

THE NEW INDIA ASSURANCE CO. LTD. REGISTERED & HEAD OFFICE:87,MAHATMA GANDHI ROAD,MUMBAI 400001.

GOOD HEALTH POLICY CERTIFICATE

Certificate No. 712500/GH/SEP2018/2610					Period of Insurance			From To	01/09/2018 31/08/2019			
VISHWAJEET NANDKEOLYAR						Card Number			:	5546XXXXXXXXX717	70	
FLAT#303,SUNFLOWER BLOCK PAVANI RESIDENCY PUTENHALLI YELAHANKA					Master Policy No.			:	7125003418210000	0010		
BANGALORE 560064						Clause attached			:	GH 2013-OCT		
Mobile No:8884550991 Email Id:vishwajeetnandkeolyar1@yahoo.co.in					Servi	ce Tax Reg	egistration : AAACN4165CST178			3		
GSTIN/UIN	:	NA / NA			GST	N :		NA				
	:				SAC		: (0			
		Personal Accident Section		Mediclaim Section		on	n Hospital Cash Benefit		Nomi	nation Particulars for	PA Coverage	
Name of the Insured Person	In (₹	ım sured In ıkhs)	Premium + GST (₹)	Sum Insured (₹In Lakhs)	Premiu GST (₹)	m +	Limit per day (₹)	Max. no of days			Name	Relation
VISHWAJEET NANDKEOLYAR				2	760	3	400	15				
AAYUSH NANDKEOLYAR				1	201	0	200	15				
NAMITA NANDKEOLYAR				2	760	3	400	15				
Total Premium includi	ng	GST	0		1723	16						

Nomination for Certificate Holder for Mediclaim	Name: NAMITA NANDKEOLYAR	Relation: WIFE
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		Cumulative Bonus for Mediclaim				
Name of the Insured Person	DOB	Customer code	%	Applicable S.I.	Effective date	Pre-existing diseases/Disabilities excluded - refer Clause No.4.1(for Mediclaim)
VISHWAJEET NANDKEOLYAR	12/12/1963	20140900087	20	200000		Not Applicable
AAYUSH NANDKEOLYAR	29/01/1998	20140900085	20	100000		Not Applicable
NAMITA NANDKEOLYAR	17/09/1969	20140900086	20	200000		Not Applicable

Terms & Conditions forming part of this Policy No. 71250034182100000010 may be downloaded from our website, newindia.co.in/citibank.

Notice or communication to be given in respect of claims to TPA							
	MD INDIA HEALTHCARE SERVICES(TPA) PVT.LTD.	Contact Details	TOLL FREE: 1800-233-1166				
	GUNA COMPLEX, NEW DOOR NO.443&445, OLD DOOR NO.304 & 305.	Details	FAX TOLL FREE: 1860-233-4449				
	ANNA SALAI, TEYNAMPET, CHENNAI-600018.		PAN UAN: 1860-233-4446, 1860-233-4448				
Email Id	citibank_chennai@mdindia.com	Website	www.mdindiaonline.com				

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



This certificate is issued based on the application made by the Citibank Card Members / Account Holders in writing / over internet / Phone in respect of self and/or family members and/or domestic employess such application shall be the basis of this Contract of Insurance Coverage.

The benefits in respect of the within mentioned insured persons are subject to definitions, terms, conditions and exclusions under the respective policies.

under the respective policies.						
This policy is subject to Good Health Policy Clause GH 2013-OCT.						
Address of the Policy issuing Office	Divisional Office : 712500 II Floor, Mount Casa Blanca Building, No.260, Anna Salai,Chennai-600006	In witness whereof the undersinged being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their)hand(s) on this 01st day of September 2018.				
Phone Numbers Fax Email Id Website	044-23456824 /826 / 827 044-23456825 nia.gh712500@newindia.co.in newindia.co.in/citibank					

For The New India Assurance Company Limited

M.V. CHANDRASEKAR Senior Divisional Manager



THE NEW INDIA ASSURANCE CO. LTD. REGISTERED & HEAD OFFICE:87,MAHATMA GANDHI ROAD,MUMBAI 400001.

MEDICLAIM PREMIUM CERTIFICATE FOR THE PURPOSE OF DEDUCTION UNDER SECTION 80 D OF INCOME TAX (AMENDMENT) ACT 1986 (in respect of self / spouse / dependent children / dependent parents only)

Insurer Office Code	:	CITIBANK DO (712500)
Address	:	II FLOOR, MOUNT CASA BLANCA BUILDING, NO. 260, ANNA SALAI, CHENNAI 600006 TAMIL NADU
Telephone		044-23456824 / 826 / 827
Fax	::	044-23456825
Policy Number	:	71250034182100000010

This is to certify that Mr./Mrs. VISHWAJEET NANDKEOLYAR has paid $\ref{thm:property}$ 17216 (Rupees Seventeen Thousand Two Hundred Sixteen Only) towards premium for Mediclaim Insurance GH SEP2018 2610 for the period 01/09/2018 to 31/08/2019.

(You are not eligible to claim Income Tax Deduction in the event of Cancellation of this Certificate).

For The New India Assurance Company Limited

> M.V. CHANDRASEKAR Senior Divisional Manager



IMPORTANT

This policy is subject to the terms and conditions contained in the policy document (Clauses).

This policy is governed by Health Insurance Regulations 2016 issued by Insurance Regulatory Development Authority of India on 12.07.2016.

This policy is also governed by IRDAI (Protection of Policyholders' Interest) Regulations, 2017.

This Schedule comes attached with the policy document (Clauses). <u>If not attached, please ask for the same</u>.

Health Insurance Regulations 2016 and IRDAI (Protection of Policyholders' Interest) Regulations, 2017 are available on the website of IRDAI.