

**UNITED INDIA INSURANCE COMPANY LIMITED**

LARGE CORPORATE CELL, NO. 98/A, DR. RADHAKRISHNAN SALAI, CHENNAI, PIN: 600004 TAMIL NADU

PH: (044) 28478641, (044) 28478640 E Mail Id : irctcpa@uiic.co.in

**OPTIONAL TRAVEL INSURANCE COVER FOR E-TICKET PASSENGERS OF IRCTC****Certificate of Insurance**

**Master policy No.** : 5002004224P101121449000  
**Certificate Number** : 65482358730109022025  
**Name and Address of the Group Organizer/Group Policy holder** : Indian Railway Catering and Tourism Corporation Limited.  
B-148, 11th Floor, Statesman House, Barakhamba Road, New Delhi-110001.  
**Name of the Insured** : r k pandey  
**Trip** : **From** 10/04/2025 19:40:00 **To** 11/04/2025 04:10:00  
**Originating Station** : PRAYAGRAJ JN.  
**Destination Station** : NEW DELHI  
**Train Number** : 12397  
**Train Name** : MAHABODHI EXP  
**PNR Number** : 6548235873

**Insured Details :**

Name of Insured Person	Age	Gender (Male / Female)	Mobile Number	E-Mail ID
r k pandey	48	Male	7398965054	rk6803664@gmail.com

**Policy coverage details :**

Death	Permanent Total Disability	Permanent Partial Disability	Hospitalization Expenses For Injury	Transportation Of Mortal Remains
1	2	3	4	5
10,00,000/-	10,00,000/-	upto 7,50,000	Upto 2,00,000/-	10,000/-

- The coverage starts from the date & time when the Insured Person (s) boards the train and ending on the date & time of arrival at the destination station as mentioned in the Policy schedule including 'process of entraining' and 'process of detraining'.
- The certificate is valid only if Insured Person (s) are travelling with a valid e-ticket issued by IRCTC.
- The Insurance coverage will be applicable only to Indian resident. Coverage's, Terms & Conditions are only outlined briefly in this document. For complete details, Policy wording needs to be referred.

**Schedule Of Premium (In Rs.) :**

Base Premium	0.38
IGST	0.07
<b>Total Premium</b>	<b>0.45</b>

In case of any claim you may contact the office or sent mail to : [irctcpa@uiic.co.in](mailto:irctcpa@uiic.co.in) or you may contact us  
Through Website: [www.uiic.co.in](http://www.uiic.co.in) Toll free: 1800 425 333 33 (from 10 a.m to 5.45 p.m. Monday to Friday)  
E-mail: [customercare@uiic.co.in](mailto:customercare@uiic.co.in)

IN WITNESS WHEREOF, this Certificate of Insurance has been signed on 09/02/2025

**Date : 09/02/2025****For United India insurance Co. Ltd.**

GST No. 33AAACU5552CIZQ

PAN No. AAACU5552C

United India Insurance Co. Ltd. Registered Head Office No.24, Whites Road, Chennai 600 014 Website: <http://www.uiic.co.in>  
UIN code : IRDAN545CP0275V01200708

**Authorized Signatory**

**UNITED INDIA INSURANCE COMPANY LIMITED**

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**OPTIONAL TRAVEL INSURANCE COVER FOR E-TICKET PASSENGERS OF IRCTC****Certificate of Insurance**

**Master policy No.** : 5002004224P101121449000  
**Certificate Number** : 65482358730209022025  
**Name and Address of the Group Organizer/Group Policy holder** : Indian Railway Catering and Tourism Corporation Limited.  
B-148, 11th Floor, Statesman House, Barakhamba Road, New Delhi-110001.  
**Name of the Insured** : meena devi  
**Trip** : **From** 10/04/2025 19:40:00 **To** 11/04/2025 04:10:00  
**Originating Station** : PRAYAGRAJ JN.  
**Destination Station** : NEW DELHI  
**Train Number** : 12397  
**Train Name** : MAHABODHI EXP  
**PNR Number** : 6548235873

**Insured Details :**

Name of Insured Person	Age	Gender (Male / Female)	Mobile Number	E-Mail ID
meena devi	41	Female	7398965054	rk6803664@gmail.com

**Policy coverage details :**

Death	Permanent Total Disability	Permanent Partial Disability	Hospitalization Expenses For Injury	Transportation Of Mortal Remains
1	2	3	4	5
10,00,000/-	10,00,000/-	upto 7,50,000	Upto 2,00,000/-	10,000/-

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**OPTIONAL TRAVEL INSURANCE COVER FOR E-TICKET PASSENGERS OF IRCTC****Certificate of Insurance**

**Master policy No.** : 5002004224P101121449000  
**Certificate Number** : 65482358730309022025  
**Name and Address of the Group Organizer/Group Policy holder** : Indian Railway Catering and Tourism Corporation Limited.  
B-148, 11th Floor, Statesman House, Barakhamba Road, New Delhi-110001.  
**Name of the Insured** : Divyanshu pandey  
**Trip** : **From** 10/04/2025 19:40:00 **To** 11/04/2025 04:10:00  
**Originating Station** : PRAYAGRAJ JN.  
**Destination Station** : NEW DELHI  
**Train Number** : 12397  
**Train Name** : MAHABODHI EXP  
**PNR Number** : 6548235873

**Insured Details :**

Name of Insured Person	Age	Gender (Male / Female)	Mobile Number	E-Mail ID
Divyanshu pandey	16	Male	7398965054	rk6803664@gmail.com

**Policy coverage details :**

Death	Permanent Total Disability	Permanent Partial Disability	Hospitalization Expenses For Injury	Transportation Of Mortal Remains
1	2	3	4	5
10,00,000/-	10,00,000/-	upto 7,50,000	Upto 2,00,000/-	10,000/-

- The coverage starts from the date & time when the Insured Person (s) boards the train and ending on the date & time of arrival at the destination station as mentioned in the Policy schedule including 'process of entraining' and 'process of detraining'.
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**Certificate Number** : 65482358730409022025  
**Name and Address of the Group Organizer/Group Policy holder** : Indian Railway Catering and Tourism Corporation Limited.  
B-148, 11th Floor, Statesman House, Barakhamba Road, New Delhi-110001.  
**Name of the Insured** : Dristi pandey  
**Trip** : **From** 10/04/2025 19:40:00 **To** 11/04/2025 04:10:00  
**Originating Station** : PRAYAGRAJ JN.  
**Destination Station** : NEW DELHI  
**Train Number** : 12397  
**Train Name** : MAHABODHI EXP  
**PNR Number** : 6548235873

#### Insured Details :

Name of Insured Person	Age	Gender (Male / Female)	Mobile Number	E-Mail ID
Dristi pandey	13	Female	7398965054	rk6803664@gmail.com

#### Policy coverage details :

Death	Permanent Total Disability	Permanent Partial Disability	Hospitalization Expenses For Injury	Transportation Of Mortal Remains
1	2	3	4	5
10,00,000/-	10,00,000/-	upto 7,50,000	Upto 2,00,000/-	10,000/-

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