



HELLO Binod lpta KZ44A, 2nd Floor Indira Park Ext-1 Uttam Nagar Delhi-110059 Delhi

India

Contact No.: 9953445180

Policy No.: 900001/11121/AA00681587-01

| Code I | | Intermediary Name | Contact No | |
|--------|----------|-------------------|-------------|--|
| | 80091069 | Direct Online | 18001020333 | |

This Policy Kit Contains:

- 1. The Policy Schedule along with income tax (80 D) certificate (wherever applicable)
- 2. Cashless card*

Renewal of Your Optima Restore Insurance Policy

Binod Kumar Gupta,

Thank You for renewing the policy with us.

We are pleased to enclose your renewed Policy Kit for the period 12-Oct-2018 To 11-Oct-2019

To know more about policy related information and value added offers, you may re-register yourself at our website using your unique member ID and policy number as mentioned in the policy schedule.

In case of any query, please feel free to write to <u>customerservice@apollomunichinsurance.com</u> or call us at our 24 hours toll free number 1800-102-0333. Our customer care team will be happy to assist you.

Warm Regards,

Location: Gurgaon Authorized Signatory Date: 12-Oct-2018

Note:-

- Please visit our website www.apollomunichinsurance.com to access information about our company, the customer service touch points including the Grievance handling process and various forms that you can use for service support. You will also get latest updates on products, policy wordings which you can download for your reference and record.
- Please update us with your latest contact details (in case of any change) so that same can be updated in our records. You can either write back to us or call us on our toll free no. 1800-102-0333.

*Cashless Card as enclosed would be issued only once along with this policy kit and shall remain valid for further renewals.



- Website: www.apollomunichinsurance.com Email: customerservice@apollomunichinsurance.com IRDAI Reg. No.: 131
- CIN: U66030TG2006PLC051760



SCHEDULE - Optima Restore Floater

Gurgaon Head Office, 2nd and 3rd Floor, ILabs Centre, Plot No Issuing/Servicing Office:

404-405Udhyog Vihar, Phase-3, Haryana 122016

PH: 01244584333 GSTIN: 06AAGCA1654H1ZW

HELLO Binod Ipta

GSTIN/ UIN (if any) of Policy Holder: Policy Holder's Address: RZ44A, 2nd Floor Indira Park Ext-1 Uttam Nagar Delhi-110059 Delhi

India Delhi(07) 80091069 Direct Online

Intermediary Name: Intermediary Contact No: 18001020333

Policy Number: 900001/11121/AA00681587-01

First policy inception date: 12-Oct-2017 Policy Issuance Date: 11-Oct-2018

Description/ Harmonized System Of Nomenclature Code: Accident and Health insurance Services/9971

Policy Period: From 00:01 hrs on 12-Oct-2018 To 24:00 hrs on 11-Oct-2019

Delhi (Delhi) Place of Supply:

Insured Persons Details:

Policy Holder's Name:

Intermediary Code:

Policy Holder State Name & Code:

| Member ID | Insured Person's Name | Date of Birth (DD-MM-YYYY) | Age | Relationship to Policyholder | Insured | Critical Advantage Sum Insured(USD\$) | Multiplier Benefit (Rs.) | Critical Advantage Rider Premium (Rs) | Gross Premium (Rs) |
|-------------|-----------------------|-------------------------------|-----|------------------------------------|---------|---|--------------------------------|--|-----------------------|
| 74 | Mr Binod Kumar Gupta | 25-Feb-1984 | 34 | Policy Holder | 500000 | 0 | 250000 | 0 | 11802.36 |
| 10013069375 | Mrs Jvoti Kumari | 28-Oct-1990 | 27 | Wife | | 0 | | 0 | |

Nominee Name: Jyoti Kumari Relationship to Policyholder: Wife

The nominee must be an immediate relative of the Policyholder. For all other Insured Persons, the Policyholder shall be the nominee.

Premium Calculation:

| Net Premium | (Rs.) | 10002.00 |
|-------------------------|-------|----------|
| Discounts | (Rs.) | 0.00 |
| Loading | (Rs.) | 0.00 |
| Taxable Premium | (Rs.) | 10002.00 |
| CSGT@0% | (Rs.) | 0.00 |
| SGST/UTGST@0% | (Rs.) | 0.00 |
| IGST@18% | (Rs.) | 1800.36 |
| Any other Cess or Taxes | (Rs.) | 0.00 |
| Gross Premium | (Rs.) | 11802.36 |

Rupees Eleven Thousand Eight Hundred Two and Paisa Thirty-Six Only Gross Premium amount (in words)



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For and on behalf of Apollo Munich Health Insurance Company Limited

The stamp duty of Rs. 1.00/- (Rupees One Only) paid vide No.F.10(783)/COS(HQ)/Con.duty/08. (Not applicable for the state of Jammu & Kashmir).

Original for Recipient/ Duplicate for Supplier

Whether tax is payable on reverse charge basis

No

| | EXCLUSION(S) / | SPECIAL CONDITION(S) | |
|-------|-------------------------|----------------------|--|
| | Member ID | Person Name | Details |
| HELLO | Binod ⁾⁶⁹³⁷⁴ | Mr Binod Kumar Gupta | For Rs 500000 (Rupees Five Lakh) Sum Insured - Sec 5 A (i) of the policy wording is waived, Sec 5 A (ii) is reduced to 1 year and Sec 5 A (iii) is reduced to 2 years. |
| | 10013069375 | Mrs Jyoti Kumari | For Rs 500000 (Rupees Five Lakh) Sum Insured - Sec 5 A (i) of the policy wording is waived, Sec 5 A (ii) is reduced to 1 year and Sec 5 A (iii) is reduced to 2 years. |

Claim Administrator:Apollo Munich Claim Administrator:Not Applicable (For critical advantage rider)

Location:Gurgaon Date: 12-Oct-2018 Authorized Signatory



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Certificate for the purpose of deduction under Section 80 D of Income Tax Act, 1961*

This is to certify that Binod Gupta has paid Rs. 11802.36 (Rupees Eleven Thousand Eight Hundred Two and Paisa Thirty-Six Only) towards premium for **HELLO Binod** Restore Floater Policy No 900001/11121/AA00681587-01 issued to Binod Kumar Gupta for period **12-Oct-2018** to **11-Oct-2019**.

For and on behalf of Apollo Munich Health Insurance Company Limited

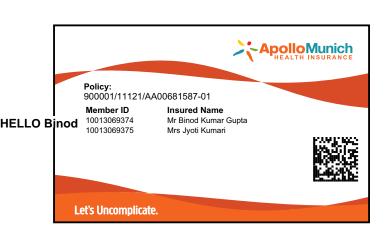
Location:Gurgaon Date: 12-Oct-2018

Authorized Signatory

*Note

- 1. This is subject to the provisions of Section 80D of Income Tax Act, 1961 as amended from time to time.
- 2. This certificate must be surrendered to the company in case of cancellation of this policy. In event of incorrect representation of this declaration the liability shall be upon the policy holder.
- 3. Please note that this certificate will not be issued if the premium payment has been made in cash.
- 4. In case of dishonour of the premium instrument, the policy will be deemed cancelled ab initio.
- 5. 80D benefit is applicable for only Self, Spouse, Dependent Children and Dependent parents

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Terms and Conditions

(1) This card would be valid till your relationship with AMHI / This card is invalid if the policy is cancelled (2) in case of renewal please refer original policy number (3) This card is issued for the purpose of identification only and does not entail automatic cashless facility at the network hospital.

(4) In case of photo-less card, a photo ID issued by any government authority is to be produced to avail cashless facility. (5) Please apply for cashless facility 48 hours prior to admission in case of planned admissions and within 24 hours of admission in case of emergency.(6) All terms and conditions of the policy would be applicable while processing your cashless request. (7) In case your cashless facility is denied due to any reason, please submit the claim for reimbursement. Denial of cashless facility does not indicate rejection of the claim. (8) Please read policy documents carefully for detailed terms and conditions. For more details on risk factors, terms and conditions please read sales brochure carefully before concluding a sale.

Apollo Munich Health Insurance Co. Ltd. Central Processing Center, 2nd & 3rd Floor, iLABS Centre, Plot No. 404/405, Udyog Vihar, Phase-III, Gurgaon-122016, Haryana. Corp. Off. 1st Floor, SCF -19, Sector - 14, Gurgaon - 122 001, Haryana. Reg. Off: Apollo Hospitals Complex, 8-2 293/82/J III/DH/900, Jubilee Hills, Hyderabad-500033, Telangana. •Website: www.apollomunichinsurance.com •Toll Free: 1800 102 0333 • IRDAI Reg. No.: 131 • CIN: U66030TG2006PLC051760