

BlueDart / / M-190

Policy No. : 0238900497 00

Name : Mr ASHVINBHAI LAVJIBHAI GAJERA

Address : 20, PARMESHWARPARK SOC., NEAR
PRABHU DARSHAN SOCIETY, SHYAMDHAM
CHOWK, NANA VARACHHA
SURAT - SURAT
GUJARAT - 395006
9979343593

Dear Customer,

We are glad that you thought ahead and did the right thing by continuing your trust with Tata AIG MediCare, 0238900497. We value your relationship with us and appreciate your confidence in our services. We will not compromise on your health insurance and neither should you. We will strive to serve you the best.

Please find the following documents along with letter in the parcel.

- Policy schedule
- Premium payment receipt
- 80d certificate
- Customer Information Certificate

For further queries you can visit our website www.tataaig.com or contact us on our Toll Free No.: 1800 266 7780/ For Senior Citizens: 1800 22 9966.

For Tata AIG General Insurance Company Limited

Authorized Signatory

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully before concluding a sale.

**Policy
Schedule** }

Intermediary name : SORATHIA DEVDEEPKUMAR
VINODCHANDRA

Intermediary code : AGINFTGPS8177E

Intermediary contact no. : 9099043817(mobile or landline)

Issuing Office : SURAT

Client Id : 6089857080

Proposal no : IDV001321867

Policy holder's name : ASHVINBHAI LAVJIBHAI GAJERA

Policy holder's address : 20, PARMESHWARPARK SOC., NEAR
PRABHU DARSHAN SOCIETY, SHYAMDHAM
CHOWK, NANA VARACHHA
SURAT,395006
SURAT GUJARAT
9979343593

Insured GST No :

Place of Supply : GUJARAT

Supply Code : 24

Policy Number : 0238900497 00

Product name : Tata AIG MediCare

Plan type : Floater Basis

Policy period : From 28/03/2025 00:00 hrs to 27/03/2026 on
11:59 PM

Business Type : RENEWAL BUSINESS

Policy Tenure : 1 Year

Premium Payment Zone : Zone A

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Insured Persons Details :

Member ID	Insured person's name	Insured with TATA AIG General Insurance Co. Since	Date of Birth	Age	Relation-ship to proposer	Restore Benefits %	Sum Insured (Rs.)#	Cumulative Bonus (Rs.)	Accidental Death Sum Insured (Rs.)
OIP0741878701053	ASHVINBHAI LAVJIBHAI GAJERA	28/03/2021	01/06/1967	57	Self	100%	500,000.00	340000.00	0.00
OIP0741878702049	KAMLABEN A GAJERA	28/03/2021	01/06/1971	53	Spouse				0.00

*For Family Floater policy, Sum Insured and cumulative bonus floats among the insured members of the family as mentioned above. This shall not be applicable for newly added members in this policy.

Sum Insured mentioned is excluding cumulative bonus. Earned cumulative bonus is separately mentioned

Nominee Details for Proposer:

Insured Name	Nominee Name	Relationship to Proposer
ASHVINBHAI LAVJIBHAI GAJERA	KAMLABEN A GAJERA	Spouse
KAMLABEN A GAJERA	KAMLABEN A GAJERA	Spouse

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Benefits table

Cover	Coverage
In-Patient Treatment	Upto Sum Insured
Pre-Hospitalization expenses	Upto 60 days
Post-Hospitalization expenses	Upto 90 days
Day Care Procedures	Upto Sum Insured
Organ Donor	Upto Sum Insured
Domiciliary Treatment	Upto Sum Insured
Global cover	Upto Sum Insured
Bariatric Surgery Cover	Upto Sum Insured
In-Patient Treatment - Dental	Upto Sum Insured
Restore benefit	Upto Sum Insured
AYUSH Benefit	Upto Sum Insured
Ambulance Cover	Upto Rs. 3000 per Hospitalization
Health Checkup	Upto 1% previous year Sum Insured; max. Rs.10,000 per policy
Vaccination cover	Upto Rs.5000 per policy
Hearing Aid	50% of actuals; maximum Rs.10,000 per policy
Daily Cash for choosing Shared Accommodation (If applicable)	0.25% of base Sum Insured; maximum Rs. 2000 per day
Daily Cash for Accompanying an Insured Child	0.25% of base Sum Insured; maximum Rs. 2000 per day
Compassionate travel	Upto Rs.20,000
Consumables Benefit	Upto Sum Insured per policy year
Second Opinion	Covered
Wellness Service	8 teleconsultations (GP) and Ambulance Booking Facility.
Room Category	Shared Accommodation

Net Premium:	(Rs)	32232.24
Discounts:	(Rs)	12535.00
Loading:	(Rs)	0.00
UGST/SGST (9%):	(Rs)	2900.90
CGST(9%):	(Rs)	2900.90
IGST(18%):	(Rs)	
Gross Premium:	(Rs)	38034.00
Gross Premium amount(in words) : Rupees Thirty Eight Thousand And Thirty Four and Paise 00 Only		

Claim Servicing Details:

- Name of Claim Administrator: TAGIC Health Claims
- Website: www.tataaig.com
- Email: healthclaimsupport@tataaig.com
- Toll Free: 1800 266 7780 or 1800 229 966 (For Senior Citizens)
- Claims Administrator: TATA AIG General Insurance Company Limited,
Address: 5th and 6th Floor, Imperial Towers,
H.No 7-1-6-617/A, GHMC No - 615,616,
Ameerpet, Hyderabad - 500016, Telangana.

Stamp Duty Registration Details

The stamp duty of Rs.50.00/- paid in cash or demand draft or by pay order,vide Receipt/Challan no:LOA/ENF1/CSD/90/2024/25/5 dated the 01/01/2025

For Tata AIG General Insurance Co. Ltd.

Authorized Signatory

In the event of non-realization of premium, the Company shall not be liable under the policy and the policy shall stand cancelled ab initio (from inception).

Policy Servicing Address :

SURAT, UNIT NO. 403-406, 4TH FLOOR, A-WING,,
UNIVERSAL BUSINESS CENTRE, L.P.SAVANI ROAD,,
ADAJAN, SURAT, SURAT, GUJARAT, 395009

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully before concluding a sale.

Specific Exclusion / loading if applicable

Member ID	Insured Person's Name	Pre-Existing Disease	Permanent Exclusion	Loading Reason	Effective date for Exclusion/loading
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Portability Details (If Applicable)

This Policy is in continuation with , for below mentioned members.

Member name	Previous Policy Number	Name of previous insurer	Previous Insurer policy inception	Sum Insured	Claim Details if any
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Waiting period table

Member Name	Sum Insured inclusive of cumulative bonus	30 Days waiting period	2 year exclusion for specific illness & Treatment	Pre-existing disease
ASHVINBHAI LAVJIBHAI GAJERA	300000	Waived Off	Waived Off	Waived Off
KAMLABEN A GAJERA	300000	Waived Off	Waived Off	Waived Off

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**Certificate of Premium payment for the purpose of declaration under Section 80 D of Income Tax
(Amendment) Act, 1961***

Date: 27/03/2025
Policy Number:0238900497
Customer Name:ASHVINBHAI LAVJIBHAI GAJERA
20, PARMESHWARPARK SOC., NEAR
PRABHU DARSHAN SOCIETY, SHYAMDHAM
CHOWK, NANA VARACHHA
GSTIN no.:

Dear Sir/Madam,

Sub: Tax Benefit Letter forTata AIG MediCare policy no. 0238900497

This is to certify that premium amount of Rupees Thirty Eight Thousand And Thirty Four Only for health insurance Policy No 0238900497 issued to ASHVINBHAI LAVJIBHAI GAJERA for the period 28/03/2025 to 27/03/2026 has been paid.

Receipt Illustration

Receipt ID.	Name of Payer	Mode of payment	Amount paid
102001102619568	ASHVINBHAI LAVJIBHAI GAJERA	Online	38 034.00
Total Amount Paid			38 034.00

Premium illustration (Member wise)

Member ID	Name of Member	Relationship with Policyholder	Total member premium paid (Including Taxes & Loading)
0IP0741878701053	ASHVINBHAI LAVJIBHAI GAJERA	Self	20 851.73
0IP0741878702049	KAMLABEN A GAJERA	Spouse	17 182.31
Total Premium Paid (Inclusive of Loading & Taxes collected)			38 034.00

Please feel free to get in touch with us for any further help or queries at our 24x7 Helpline 18002667780 (Toll-free) or email us at customersupport@tataaig.com

We assure you of our best services at all times.

Regards,
For Tata AIG General Insurance Company Limited

Authorized Signatory

Date of Issue: 27/03/2025
Place of Issue:SURAT

***Note**

1. Tax deductions can be claimed subject to the provisions prescribed in the relevant sections of the Income-tax Act, 1961 as amended from time to time.
2. Premium paid in advance will be applied to the policy on premium due date.
3. This premium paid certificate is conditional upon credit in company's account post clearance of the instrument/facility including electronic mode.
4. For any confirmation / impact analysis, customer is advised to refer the matter to his/her Tax consultant.
5. This certificate must be surrendered to the company in case of cancellation of this policy. In the event of incorrect representation of this declaration the liability shall be upon the policyholder/payer.

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Receipt }

Receipt No. : 102001102619568

Receipt Date : 26/03/2025

Policy No : 0238900497 00

Received with thanks from ASHVINBHAI LAVJIBHAI GAJERA a sum of Rs. 38034.00 Rupees Thirty Eight Thousand Thirty Four And Paise Zero Only Online

Gross Premium (₹)	Utilized from the receipt for policy (₹)	Balance (₹)
38034.00	38034.00	0.00

Note:

1. This is a computer generated receipt and does not require a signature.
2. Upon issuance of this Receipt, all previously issued temporary receipts, if any, related to this Policy shall be considered null and void.
3. Amounts received by cheque shall be subject to realisation.
4. Any amount received in excess of the Premium is being/shall be refunded by the Company.

GSTIN :24AABCT3518Q1Z2(GSTIN Number) GUJARAT. Service Accounting Code : 997133

Revenue (consolidated) Stamp Duty duly paid vide challan No.LOA/ENF1/CSD/83/2024/5365 date 30/11/2024 for applicable cases.

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Tata AIG MediCare



WITH YOU ALWAYS

Name : ASHVINBHAI LAVJIBHAI GAJERA
Age : 57years,
Gender : Male
Policy No .: 0238900497
From : 28/03/2025
Member ID : 0IP0741878701053

M-190 (1 to 0)

Please refer to our website or mobile application to know the list of cashless network hospitals and excluded hospitals

TAGIC Health Claims Tata AIG General Insurance Company Limited

5th and 6th Floor, Imperial Towers, H.No 7-1-6-617/A, GHMC no - 615, 616, Ameerpet,
Hyderabad – 500016, Telangana, Toll Free: 18002667780, Website: www.tataaig.com
Tata AIG Medicare UIN: TATHLIP23118V032223

Tata AIG MediCare



WITH YOU ALWAYS

Name : KAMLABEN A GAJERA
Age : 53years,
Gender : Female
Policy No .: 0238900497
From : 28/03/2025
Member ID : 0IP0741878702049

M-190 (2 to 0)

Please refer to our website or mobile application to know the list of cashless network hospitals and excluded hospitals

TAGIC Health Claims Tata AIG General Insurance Company Limited

5th and 6th Floor, Imperial Towers, H.No 7-1-6-617/A, GHMC no - 615, 616, Ameerpet,
Hyderabad – 500016, Telangana, Toll Free: 18002667780, Website: www.tataaig.com
Tata AIG Medicare UIN: TATHLIP23118V032223

Annexure to customer information sheet(CIS)- Benefit illustration in respect of policies offered on individual and family floater basis.

Age of the members insured	Coverage opted on individual basis covering each member of the family separately(at a single point of time)		Coverage opted on individual basis covering multiple members of the family under a single policy(Sum insured available for each member of the family)				Coverage opted on family floater basis with overall Sum Insured(only one sum insured available for entire family)			
	Premium (₹)	Sum Insured (₹)	Premium (₹)	Discount if any	Premium after Discount (₹)	Sum Insured (₹)	Premium or Consolidated premium for all members of the family (₹)	Floater discount if any	Premium after discount (₹)	Sum Insured (₹)
57							24543	20 %	19634.4	500000.00
53							20224	20 %	16179.2	
	Total Premium for all members of the family is Rs_____when each member is covered separately		Total Premium for all members of the family is Rs_____ when they are covered under a single policy				Total Premium when policy is opted on floater basis is Rs 32232.24			
	Sum Insured available for each individual is Rs_____		Sum Insured available for each family member is Rs_____.				Sum Insured of Rs 500000.00 is available for the entire family			

Note: Premium rates specified in the above illustration shall be standard premium rates without considering any loading. Also, the premium rates shall be exclusive of taxes applicable.

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