



2805207168892100001

Mr. Sudhirbhai Rameshbhai Rakholiya
20-VIKRAM NAGAR-2
OPP-RANUJADHAM SOC.
PUNA GAM SURAT
SURAT
GUJARAT - 395010
Contact No.: 97XXXXXXX5
Email: suxxxxxx21@gxxxx.com

Policy No : 2805 2071 6889 2100 001

| Intermediary Code | Intermediary Name | Intermediary Contact Number |
|-------------------|-----------------------|-----------------------------|
| 201512325820 | AGENT : ASMITA RAMANI | 91-9277504513 |

Your Optima Restore Floater (Three Year) Policy

Dear Mr. Sudhirbhai Rameshbhai Rakholiya ,

Welcome to HDFC ERGO General Insurance Company Limited. We are pleased to issue you Your Optima Restore Floater (Three Year) Policy. We advise you to retain your Policy Kit during the entire term of the Policy (including renewals).

Please note that the Policy has been issued to you based on the declarations, details and documents received from/on behalf of you in/along with the Proposal Form submitted to us. Along with this policy you are also eligible for Wellness Benefits under our Add-on "HDFC ERGO Wellness Corner" -UIN: HDFHLIA24051V012324. For details of the benefits, please click on the following link <https://hdfcergo.onelink.me/ARLJ/v6t9r5kz>

Please visit our website www.hdfcergo.com for more information about our Company, Grievance handling and any other support. To know the updated list of our network hospitals please visit <https://www.hdfcergo.com/locators/cashless-hospitals-network>

We value your relationship with us and assure you our best services at all times and we look forward to serve you.

Proposer details have been updated basis the information present in the KYC documents. If you find any detail which needs to be corrected, request you to create/ modify the eKYC ID and place a request for endorsement.

Soft copy of the policy is valid for all purposes including claims.

Warm Regards,



Authorized Signatory

Location: Mumbai

Date: 28/05/2025

Note:

1. Please update us with your latest contact details (in case of any change) so that same can be updated in our records.
2. You can either email us on care@hdfcergo.com or call on our Customer care no. 022 6158 2020 / 022 6234 6234.
3. *The Copy of the proposal form has been sent on your registered email id if policy is purchased through website.

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

This is to certify that the MR.. SUDHIRBHAI RAMESHBHAI RAKHOLIYA has paid Rs. 80447 (Rupees Eighty Thousand Four Hundred Forty-Seven And Zero Paise Only) towards premium for Optima Restore Floater (Three Year) Policy No. 2805207168892100001 issued to MR.. SUDHIRBHAI RAMESHBHAI RAKHOLIYA for period of 28/02/2025 to 27/02/2028.

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai

Date: 28/05/2025



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 Policyholder.
3. Please note that this certificate will not be issued if the premium payment has been made in cash.
4. In case of dishonor 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.



Endorsement Cum Policy Schedule - Optima Restore Floater (Three Year)

| | | | |
|--------------------------------------|---|---|---|
| Policy Number | 2805 2071 6889 2100 001 | | |
| Policy Holder's Name | Mr. Sudhirbhai Rameshbhai Rakholiya | | |
| Policy Holder's Address | 20-VIKRAM NAGAR-2 OPP-RANUJADHAM SOC. PUNA GAM SURAT SURAT SURAT GUJARAT - 395010 | | |
| Policy Holder State Name & Code | Gujarat(24) | Place of Supply | GUJARAT |
| GSTIN/ UIN (if any) of Policy Holder | | | |
| First policy inception date | 28/02/2019 | Policy Issuance Date | 28/05/2025 |
| Policy Period | From 00:01 hrs on 28/02/2025 To 24:00 hrs on 27/02/2028 | | |
| Issuing/Servicing Office | OFFICE NO 207-208, B WING , 2ND FLR, ICC BUILDING , RING ROAD SURAT Tel : +91-261-2478360 | | |
| GSTIN | 24AABCL5045N1ZE | | |
| EIA Number | Not provided | | |
| Intermediary Name | AGENT : ASMITA RAMANI | Intermediary Contact No | 91-9277504513 |
| Intermediary Code | 201512325820 | Description/ Harmonized System Of Nomenclature Code | Accident and Health insurance Services/9971 |

| Insured Person Details | | | | | | |
|--------------------------------|---|--|---------------------------------------|--|----------|----------|
| Particulars / Member ID | Member 1 SUDHIRBHAI RAMESHBHAI RAKHOLIYA / 2025510048036399 | Member 2 JIGNABEN / 2025510048036400 | Member 3 HET / 2025510048036401 | Member 4 PANTHI / 2025510050876339 | Member 5 | Member 6 |
| Date of Birth (Age) | 21/12/1990 (34) | 14/12/1990 (34) | 13/01/2017 (8) | 17/02/2025 (0) | - | - |
| Relationship to Policy Holder | Self | Wife | Son | Daughter | - | - |
| Base Sum Insured (₹) | 500000 | | | | | |
| Multiplier Benefit SI (₹) | 150000 | | | | | |
| ABHA ID | - | - | - | - | - | - |
| Protector Rider Sum Insured(₹) | - | | | | | |
| Co-payment % | 0 | | | | | |
| Deductible | 0 | | | | | |
| Total Sum Insured(₹) | 650000 | | | | | |

Note : In case any insured person's wish to generate his/her ABHA ID kindly visit link given below :

<https://healthid.ndhm.gov.in/register>

| |
|--|
| Protector Rider - HDHHLIP21335V022021 Individual Personal Accident Rider - APOPAIP19004V011920 Hospital Daily Cash Rider - HDHHLIP21344V022021 Critical Advantage Rider HDHHLIP21342V022021 my:health Critical Illness - HDFHLIA22141V032122 Optima Wellbeing (Add-on) - HDFHLIA24099V012324 |
|--|

| Other Riders and Benefits (₹) | | | | | | |
|---|----|---|---|---|---|---|
| Protector Rider | - | | | | | |
| Hospital Daily Cash Rider SI (Max. 30 days) | - | | | | | |
| Critical Advantage Rider SI (\$) | - | - | - | - | - | - |
| IPA Rider SI | - | - | - | - | - | - |
| my: health Critical Illness Sum Insured (Rs.) | | | | | | |
| my: health Critical Illness Plan | | | | | | |
| Unlimited Restore Benefit | No | | | | | |
| Optima Wellbeing Rider | No | | | | | |

| Nominee Details | |
|--|------------------------------------|
| Nominee Name : Ms. Jignaben | Relationship to Policyholder: Wife |
| The nominee must be an immediate relative of the policyholder. For all other Insured Persons the policy holder shall be the nominee. | |

| Premium Calculation (₹) | | | | |
|---|---|-------------------------|--|-----|
| Net Premium | 68175 | CGST@9% | | 753 |
| Discounts | 0 | SGST/UTGST@9% | | 753 |
| Loadings | 0 | IGST@18% | | 0 |
| Taxable Premium | 68175 | Any other Cess or Taxes | | 0 |
| Gross Premium | 80447 | | | |
| Gross Premium (in words) | Rupees Eighty Thousand Four Hundred Forty-Seven And Zero Paise Only | | | |
| The stamp duty of Rs. 0/- paid vide Order No:(LOA/ENF-1/CSD/64/2024-25/ Validity Period Dt. 15/10/2024 to Dt. 31/12/2028, OW No. 4742 Dt. 04/10/2024 GRN NO. MH007778466202425M, Dt. 10/09/2024, SBI Bank & DEFACE No. 0005045616202425, Dt. 03/10/2024) as prescribed by Government of Maharashtra Notification No. Mudrank 2017/C.R.97/M-1, Dt.09/01/2018 | | | | |
| Original for Recipient/ Duplicate for Supplier | | | | |
| Whether tax is payable on reverse charge basis: No | | | | |

Endorsement Cum Policy Schedule - Optima Restore Floater (Three Year)

| List of Endorsements | | |
|----------------------|---------------------|----------------|
| Endt No | Description | Effective Date |
| 001 | Addition of Insured | 22/05/2025 |

For declared and accepted pre-existing medical conditions, waiting period (s) shall apply per policy terms and conditions from 1st policy inception date of the policy, fresh waiting period (s) shall apply on enhanced sum insured.

Claim Administrator : HDFC ERGO General Insurance Company Ltd

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai

Date: 28/05/2025


Authorized Signatory

Explore any of our advanced digital options below and get quick assistance for your policy servicing queries.



Click on <https://selfhelp.hdfcergo.com> to visit our "Help" section



Live Chat with DIA on www.hdfcergo.com



Send us 'Hi' on our WhatsApp Number 8169 500 500



Download the **here** app by HDFC ERGO

"For detailed policy terms and conditions please visit our website <https://www.hdfcergo.com/download/policy-wordings>"

| SCHEDULE OF BENEFITS | |
|--|--|
| In-patient Treatment | Upto 500000 |
| Pre-Hospitalization | Upto 500000 for 60 days |
| Post-Hospitalization | Upto 500000 for 180 days |
| Day Care Procedures | Upto 500000 |
| Domiciliary Treatment | Upto 500000 |
| Organ Donor | Upto 500000 |
| Daily Cash for choosing Shared Accommodation | Rs.800 per day, Maximum Rs.4,800 |
| Ambulance (per hospitalization limit) | Upto Rs.2,000 per Hospitalization |
| E-Opinion in respect of a Critical Illness | One per policy year |
| Restore Benefit | 100% of Basic SI (for any illness or any insured person) |
| Multiplier Benefit | Bonus of 50% of Basic Sum Insured post completion of each Policy Year irrespective of claims, maximum upto 100% of Basic Sum Insured |
| Preventive Health Check-up (Floater) | Up to a maximum of Rs.2,500 per policy, only once at the end of a block of every continuous two policy years. |



Policy No.: 2805207168892100001

| Insured Name | Member ID | Date of Birth | Gender |
|---------------------------------|------------------|---------------|--------|
| Sudhirbhai Rameshbhai Rakholiya | 2025510048036399 | 21/12/1990 | M |
| Jignaben | 2025510048036400 | 14/12/1990 | F |
| Het | 2025510048036401 | 13/01/2017 | M |
| Panthi | 2025510050876339 | 17/02/2025 | F |

Terms and Conditions

(1) This card would be valid till your relationship with HDFC ERGO General Insurance Company Limited / 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) 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 claim status visit help section on our web site www.hdfcergo.com. Alternatively you may write to us at Healthclaims@hdfcergo.com.

HDFC ERGO General Insurance Company Limited. IRDAI Reg. No.146 CIN: U66030MH2007PLC177117. Registered & Corporate Office: HDFC ERGO General Insurance Company Limited – 6th Floor, Leela Business Park, Andheri-Kurla Road, Andheri (East), Mumbai – 400 059. Health Claim Services Address : HDFC ERGO General Insurance Company Limited Stellar IT Park, Tower-1 , 5th Floor, C - 25, Noida, Sector 62, 201301, Uttar Pradesh. Service No. 022 6158 2020 / 022 6234 6234 Email: healthclaims@hdfcergo.com.Trade Logo displayed above belongs to HDFC Ltd and ERGO International