

## Translated Insurance Policy (Hindi)

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XYZ Insurance Company Pvt. Ltd.

Policy Number: HLT/XYZ/2025/000123

Policyholder Name: Priya Sharma

Address: 123, Lotus Apartments, Mumbai, Maharashtra - 400001

Policy Type: Individual Health Plan

Sum Insured: Rs.5,00,000

Policy Period: 01-Apr-2025 to 31-Mar-2026

Premium Paid: Rs.12,350 (Inclusive of taxes)

This policy covers the following medical expenses:

- Hospitalization (minimum 24 hours)
- Pre-Hospitalization (30 days prior)
- Post-Hospitalization (60 days post)
- Daycare procedures (up to 500 listed procedures)
- Emergency Ambulance (up to Rs.2,000 per hospitalization)

This policy does not cover the following:

- Pre-existing diseases for the first 2 years

- OPD and dental treatments
- Cosmetic or plastic surgery
- Injuries due to substance abuse or intoxication
- Self-inflicted injuries or suicide attempts
- Pregnancy and childbirth-related expenses (unless explicitly covered)

#### 4. Claims ProcessXYZ Insurance Company Pvt. Ltd.

1. Intimate the insurer within 24 hours of hospitalization.

2. Submit the following documents:

- Doctor's prescription

3. Claim will be processed within 7 working days.

Cashless Treatment available at network hospitals.

- Policy must be renewed annually to avoid a lapse in coverage.
- A grace period of 15 days is allowed post-expiry (no coverage during grace).
- No claim bonus (NCB) available on claim-free renewals.

#### 6. Portability Clause

This policy is portable to any other health insurance provider as per IRDAI portability guidelines. Apply at

least 45 days before renewal.

#### 7. Grievance Redressal

For any complaints or issues, contact:

Customer Care: 1800-120-4567

Email: support@xyzinsurance.com

Office: XYZ Insurance Office, Bandra East, Mumbai - 400051

Or escalate to the Insurance Ombudsman

#### 8. Declaration by Policyholder

I hereby confirm that the information provided is accurate to the best of my knowledge. I have read and

understood the terms and conditions of this policy.XYZ Insurance Company Pvt. Ltd.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_