

Individual Policy Schedule

Date : 04/01/2022

Event Number : 1 - INITIAL POLICY
Policy Number : 336390 - ANKIT JAGDAMBA PRASAD PANDEY

Insurance Company Information

Insurance Company : 103 AMERICAN LIFE INSURANCE CO_EBP(LSB)_103
Telephone : 971-04-4156134
Fax :
P.O. Box : 371916
Address : DUBAI, UAE

Policy Information

Policy Number	: 336390	Event Number	: 1
External Policy Ref	: MED21579	Event Type	: INITIAL POLICY
Application Number	: 11680	Validation Date	: 04/01/2022
Policy Holder	: ANKIT JAGDAMBA PRASAD PANDEY	Payment Method	: ANNUAL
Policy Group	:	Currency	: UAE Dirham
Tax Registration No.	:	Address	: 908 Al falasi building Al shuwaihean sharjah UAE, , P.O. Box , UAE
Effective Date	: 04/01/2022		
Expiry Date	: 03/01/2023		

Individual Policy Information

Regulatory Approval Code	Relation	Package
DHA-MED21579	SPOUSE - FEMALE	Essential Benefits Plan (EBP) - Basic Plan - METLIFE - Dependants

Premium Information

Gross Premium	VAT	Gross Premium with VAT
2,200.00	110.00	2,310.00

Payment Information

Payment	Date	Amount
1st Payment	04/01/2022	2,310.00

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Insured Members												
Insured Member	DHA Member ID	Principal	Effective Date	End Date	Relation	Package Description	CLASS	AGE	SEX	GRP	VAT	GRP with VAT
2076119 URVASHI SHUKLA	I013-036-116390068-01	2076119 URVASHI SHUKLA	04/01/2022	03/01/2023	SPOUSE - FEMALE	Essential Benefits Plan (EBP) - Basic Plan - METLIFE - Dependants	B	27	F	2,200.00	110.00	2,310.00
							Family Totals (AED)			2,200.00	110.00	2,310.00