

**PATIENT ONBOARDING FORM**

SR.NO.	DETAILS	PARTICULARS
1.	BORROWER NAME	AJAY VAGHELA
2.	PATIENT NAME	AJAY VAGHELA
3.	PATIENT DOB	14-10-1981
4.	POLICY HOLDER'S DOB	14-10-1981
5.	HOSPITAL NAME WITH ADDRESS	PUSHPAM HOSPITAL (B-Wing, Upvan Comm. Nr. Dharti Bungalows, Chandkheda.
6.	RELATION BETWEEN PT & POLICY HOLDER	SELF
7.	MOBILE NO OF POLICY HOLDER	
8.	E MAIL OF THE POLICYHOLDER	
9.	AADHAR CARD NO. PAN CARD NO. BORROWER	7115 9404 5481 AMHPV56769
10.	RESIDENTIAL ADDRESS AS PER AADHAR CARD	6 Quarters, Near Gurdhwara, Juvag Chowk, Sabarmati, Ahmedabad-380005
11.	PRESENT ADDRESS	SAME AS ABOVE
12.	OCCUPATION OF POLICY HOLDER	JOB
13.	MONTHLY INCOME	20-40 K