

### The Oriental Insurance Company Limited

### **GROUP MEDICLAIM TAILORMADE POLICY SHEDULE** UIN: OICHLGP449V022021

Policy No. : 332204/48/2024/370 Prev. Policy

No.

Address

Cover Note No.

: 33220405202311

Cover Note Date : 30/05/2023

Insured's Code

: AB0000054364

Issue Office Code: 332204

Insured's Name

: AGARWAL PACKERS AND MOVERS LIMITED (GSTIN: 27AAFCA3559A1ZZ)

Issue Office Name: CBO 4 RANCHI (GSTIN:

: HOTEL ALOKA

20AAACT0627R3ZB)

Address

: 5TH FLOOR, 46, Eastern Chember,

128/A, Poona Street, DANA

BUNDER, Mumbai City, Maharashtra,

RADIAM ROAD, RANCHI

400009

**RANCHI JHARKHAND 834001** 

Tel. /Fax /Email

MUMBALMAHARASHTRA 400009

Tel. /Fax /Email

0651-2360867 / / 332204@orientalinsurance.co.in

Agent/Broker Details

Dev.Off.Code

Agent/Broker

: LC0000000447 RAGHNALL INSURANCE BROKING & RISK MANAGEMENT PVT LTD

**Address** 

: 1012, Ghanshyam Enclave Gandhi Nagar, New Link Road, Kandivali West. Mumbai 400067,

New Link Road, Kandivali West. Mumbai 400067, MOB NO 9930469471

,9930469478,MUMBAI,MAHARASHTRA,400067

Tel/Fax/Email

: 022 61571917/022-61571959//

Period of Insurance: FROM 00:00 ON 30/05/2023 TO MIDNIGHT OF 29/05/2024

Collection No. & Dt.: CD A/C AB0000054364

**GST INVOICE NO: 202213763** 

UIN:0

Gross Premium

: 26.40.000 GST

: 4,75,200

Stamp Duty: 1 Total: 31,15,200

Co-insurance Details: NIL

**TPA Details:** 

TPA ID YA000000341

**TPA Name** M/S HEALTHINDIA INSU

TPA Address:

NeelKanth Corporate Park, Gala No: 406 to 412 4th Floor, Kirol Road / Village, VidyaVihar Society VidyaVihar West

contact@healthcare-india.com

MUMBAI 400086

Toll Free No

: 1800220102, 022-66867575, 022-

66131111

Telephone No:

Fax No

**Risk Details** 

As per attached Annexure

Sr No: 1

Date:

Emp/Dependant: AS PER LIST Name **ATTACHED** 

SI: 74400000

No Of **Dependants** 

: 912

**RANCHI** Place:

16/06/2023

For and on behalf of The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee

Page 1 of 3



# The Oriental Insurance Company Limited

### Attached to and forming part of policy number 332204/48/2024/370

#### Particulars of the Persons covered

Sr. No. Name Relationship Sex Age Pre-existing Ailments, If
Any

Total Sum Insured in words: Indian Rupees Seven Crores Forty-Four Lakhs Only

Total Premium in words : Indian Rupees Thirty-One Lakhs Fifteen Thousand Two Hundred Only

#### **Installment Details**

Inst. No	Installment Date	Installment %	Installment Amount	Tax	Total	Remarks
1	30/05/2023	100	26,40,000	4,75,200	31,15,200	

The insurance under this policy is subject to conditions, clauses, warranties, endorsements .

The policy shall pay for hospitalization expenses for medical/surgical treatment at any Nursing Home/Hospital in INDIA as an in-patient defined in the policy

Family Definition Employee, Spouse and Children Age Band No Age Limit Policy Type (Floater / Non-Floater) Floater Sum Insured Graded Rs. 2 Lakh Cashless Facility Yes

Maternity Cover "Maternity benefits, applicable only for the Employee or Dependent spouse, subject to a limit of Rs.50,000/- for normal and Rs.50,000/- for caesarean delivery."

9 Months waiting period for Maternity Waived off

Pre and Post Natal Expenses (OPD / IPD Covered ) NA

Baby Cover from Day-1 Covered

Pre Existing Ailments Covered for All from day 1 Waiver of 30 days waiting period Waived off

Waiver of 1st, 2nd, 3rd & 4th Year exclusion Waived off

Room Rental Limit 2% of Sum Insured per day for normal and ICU- 3% of Sum Insured per day

**Domiciliary Hospitalisation Cover Not Covered** 

Pre - Post Hospitalisation 30 days and 60 days respectively

Ambulance Charges Emergency ambulance charges up-to a sum of Rs.1500/- per hospitalization

Internal Congential Covered

Corporate Floater NA

Copay 10% Co Pay for all memebres

GIPSA /PPN Network Not Applicable(Where TPA has no tie up network hospital)

Ailment wise / procedurewise capping "Sublimits only for Cataract Rs.25,000/- per eye.

Place: RANCHI

Date: 16/06/2023



For and on behalf of The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

**Authorised Signatory** 

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee

Page 2 of 3



## The Oriental Insurance Company Limited

### Attached to and forming part of policy number 332204/48/2024/370

Kidney Stones, Hernia cover - Rs.35000/-." Day Care Procedures Covered Claim Intimation As per expiring policy Claim submission clause As per expiring policy

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac, the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operaing offices as well as Company's website.

Warranted that in case the person covered under the policy has lodged any claim under the previous policy and the sum insured is enhanced under the current policy, for a further claim for the same disease during the current policy, the earlier Limit of Sum Insured shall be applicable and not the enhanced sum insured

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

"We at Oriental continuously strive to ensure that you get the best possible treatment from our network hospitals. Please contact your TPA or any of the Oriental offices for our preferred hospitals in your area before going for a treatment. This will help us serve you in the best possible manner"

In witness whereof the undersigned being authorised by and on behalf of the Company has/have herein to set his/their hands at CBO 4 RANCHI (GSTIN: 20AAACT0627R3ZB) on 16-JUN-23

"In case of grievance related to any issue related to this policy the same may be addressed to the office In-Charge or the Grievance Officer at above policy address. If the grievance remains pending, it may be escalated to Grievance Officer of the concerned Regional Office PIRMOHANI, KADAM KUAN, PATNA, BIHAR. The next escalation in case grievance remains unresolved is CSD, Head Office, situated at Oriental House, A-25/27, Asaf Ali Road, New Delhi-110002.

If the insured is not satisfied with the resolution/reply provided by the company, he/she may approach the Office of Insurance Ombudsman, within his/her jurisdiction. The list of offices of Ombudsman is available on Company's portal."

For and on behalf of Entered By AJAY KUMAR TOPPO

The Oriental Insurance Company Limited Examined By: MANOJ KUMAR SINGH

Policy Printed By:804886 IP:

Policy Printed On: 16-JUN-23 16:25:16 MAC: Authorised Signatory

**RANCHI** Place: For and on behalf of 

The Oriental Insurance Company Limited 16/06/2023 Date :

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

**Authorised Signatory** 

Page 3 of 3

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee IRDA Regn. No. 556 - Now you can buy and renew selected policies online at www.orientalinsurance.org.in