

(a) Policy Schedule (Policy Certificate)

Proposer Name	ARCHANA SINGHAL	Product name	ICICI Lombard Complete Health Insurance
Address	47 MANISH BAGH COLONY INDORE, INDORE, MADHYA PRADESH - 452001	Plan Name	Health_Shield_R
Contact No.	9893024117	Policy No.	4128i/HSRN/173459174/04/000
Email Address	HI2VIV@GMAIL.COM	Period of Insurance	From 00:00 hrs 30-Jun-2023 To 23:59 hrs 29-Jun-2024
Nominee Name	VIVEK SINGHAL	Policy Tenure	1
Relationship With Policyholder	SPOUSE	Alternate Policy No.	4128i/HSAR/173459174/04/000
Appointee Name		LAN No.	NA
Nominee Age	47 Years 6 Month	Policy Issuing Office	Prabhadevi
GSTIN No. (Customer)		Policy Issued On	27-Jun-2023
Servicing Branch Address	Maple High Street, 5Th Floor, Opposite Aashima Mall, Hoshangabad Road, Bhopal, Madhya Pradesh-462026	Previous Policy No.	4128i/HSAR/173459174/03/000
		Invoice No.	1006231715817
		Servicing Branch Name	Bhopal

Politically Exposed Person (PEP)/close relative of PEP:	No
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Insured's Name(s)	Date of Birth	Age		Date of Joining	Gender	Relation With Proposer
		Y	M			
ARCHANA SINGHAL	03-Nov-1975	47	7	30-Jun-2019	Female	SELF
VIVEK SINGHAL	07-Dec-1975	47	6	30-Jun-2019	Male	SPOUSE
ROHAN SINGHAL	31-Oct-2005	17	7	30-Jun-2019	Male	SON
RITIKA SINGHAL	01-Jul-2008	14	11	30-Jun-2019	Female	DAUGHTER

Insured's Name(s)	Annual Sum Insured (₹)	Pre-existing Illness/ Injury	Optional Add-on Cover*	Pneumococcal vaccine taken	Special Condition
ARCHANA SINGHAL	5000000	None	Claim_Protector,Befit_A	NO	None
VIVEK SINGHAL		Appendectomy	Claim_Protector,Befit_A	NO	None
ROHAN SINGHAL		None	Befit_A,Claim_Protector	NO	None
RITIKA SINGHAL		None	Befit_A,Claim_Protector	NO	None

Plan Details			
Plan Name	Voluntary Co-payment	Zone opted	Guaranteed Cumulative Bonus [GCB]
HSRN_2Adult_2Child_1Year	0%	Zone A	2500000

Premium Details (₹)					
Basic Premium	CGST		SGST		Total Premium
	%	₹	%	₹	
55764.41	9	5018.80	9	5018.80	65802
				Total Tax Payable	
				10037.59	

Table of Benefits

Covers	Benefits
In Patient Treatment	Upto Annual Sum Insured No room rent capping
Daycare procedures/treatment	All procedures covered up to Annual Sum Insured
Coverage for modern treatments	Upto Annual Sum Insured
Pre Hospitalisation Medical Expenses	30 days
Post Hospitalisation Medical Expenses	60 days
In Patient AYUSH hospitalisation	Upto Annual Sum Insured
Reset Benefit	Unlimited times for different illness and once for same illness
Domestic Road Ambulance Cover	Cashless: Actuals; Reimbursement: 1% of Sum Insured ; maximum up to ₹ 10,000, within annual sum insured
Air Ambulance Cover	Upto Annual Sum Insured
Donor expenses	Upto Annual Sum Insured
Domiciliary hospitalisation	Upto Annual Sum Insured
Home Care Treatment	5% of Annual Sum Insured ; maximum upto ₹ 25,000
Wellness Program	<ul style="list-style-type: none"> Includes wellness program, health assistance, ambulance assistance and discounts on services and products Redemption of points will be through utilisation of services on our mobile application
Guaranteed Cumulative Bonus [GCB]	20% for every claim free year maximum up to 100% of Annual Sum Insured ; no reduction in case of claims
Preventive Health check up	As per annual sum insured package eligibility
Tele consultations	Unlimited
Incentives associated with vaccination against Pneumococcal disease	2.5% discount on premium if all adults in the policy have been vaccinated with pneumococcal vaccine

*Table of Benefits for BeFit Cover

Sr. No	Table of Benefit	A
1	Outpatient Consultation	1
2	Routine Diagnostics Cover and Minor Procedures Cover	500
3	Pharmacy Cover	500
4	Physiotherapy Session	0
5	e-Counselling	6
6	Diet and Nutrition e-Consultation	6

Agent Details

Agent Name	YAMUNA VALLABH DAVE	Agent Code	ILG51162	Agent contact No.	7999636498
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GSTIN Reg. No	HSN/SAC code	The stamp duty of ₹ 1 paid vide deface no. CSD52020224718 dated 04-Nov-2022
23AAACI7904G1ZV	997133 GENERAL INSURANCE SERVICES	

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Important: Insurance benefit shall become voidable at the option of the company, in the event of any untrue or incorrect statement, misrepresentation non-description of any material particular in the proposal form/ personal statement, declaration and connected documents, or any material information has been withheld by beneficiary or anyone acting on beneficiary's behalf to obtain insurance benefit. Please note that any claims arising out of pre-existing illness/ injury/ symptoms is excluded from the scope of this policy subject to applicable terms and conditions. Refer to policy wordings for the terms and conditions. All disputes are subject to the jurisdiction of Mumbai High Court only. For claims, please call us at our toll free no. 1800 2666 or e-mail to us at healthcare@icicilombard.com or write to us at ICICI Lombard GIC, 1st, 4th (Half), 5th and 6th floors, Varun Towers- II, Opp. Hyderabad Public school, Begumpet, Hyderabad District Hyderabad, Pin code -500016 Telangana.

This policy has been issued based on the details furnished by the policyholder. Please review the details furnished in the policy certificate and confirm that same are in order. In case of any discrepancy/ variation, you are requested to call us immediately at our toll free no. 1800 2666 or write to us at customersupport@icicilombard.com. In the absence of any communication from you within the period of 15 days of receipt of this document, the policy would be deemed to be in order and issued as per your proposal. All refunds and claim payment will be done through NEFT only. In case of addition of member/ increase in sum insured, fresh waiting period will be applicable to new member/ increased sum insured. This policy certificate is to be read with the policy wordings, as one contract or any word or expression to which a specific meaning has been attached in any part of this policy shall bear the same meaning wherever it may appear.

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115

Mailing Address:

ICICI Lombard General Insurance Company Limited,
Interface Building No.: 16, 601 / 602, 6th Floor, New
Link Road, Malad (West), Mumbai - 400 064.

CIN: L67200MH2000PLC129408

Registered Office:

ICICI Lombard House, 414, P Balu
Marg, Off Veer Savarkar Road, Near
Siddhi Vinayak Temple, Prabhadevi,
Mumbai -400025.

ICICI Lombard Complete Health Insurance

Toll free no.: 1800 2666

Alternate No.: +918655 222 666 (chargeable)

Email: customersupport@icicilombard.com

Website: www.icicilombard.com

UIN - ICILIP23144V072223



[Click](#) or Scan QR Code for Customer Information Sheet and Policy Wordings

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Tax Certificate

To
 ARCHANA SINGHAL
 47 MANISH BAGH COLONY INDORE
 INDORE
 MADHYA PRADESH - 452001

Subject: Premium certificate for the purpose of deduction under section 80D of Income Tax Act, 1961 and any amendments made thereafter.

Dear ARCHANA SINGHAL,

This is to certify that the Company has received the premium dated Jun 30, 2023 for Health insurance coverage under "Health Insurance Policy" with the following details.

Policyholder's Name	ARCHANA SINGHAL	Policy Number	4128i/HSRN/173459174/04/000
Policy Start Date	Jun 30, 2023	Policy End Date	Jun 29, 2024
Plan Name	HSRN_2Adult_2Child_1Ye ar	Total Premium Paid (₹)	65802
GSTIN Number (Customer)		GSTIN Reg.No (ICICI Lombard)	23AAACI7904G1ZV
Servicing Branch Name	Bhopal	Servicing Branch Address	Maple High Street, 5Th Floor, Opposite Aashima Mall, Hoshangabad Road, Bhopal, Madhya Pradesh-462026

Premium Details (₹)					
Basic Premium	CGST		SGST		Total Premium
	%	₹	%	₹	
55764.41	9	5018.80	9	5018.80	10037.59

Financial Year	Amount (₹)
2023-2024	65802.00

The product is eligible for deduction u/s 80D of the Income Tax, 1961 and any amendments made there to.

Note: This certificate must be surrendered to the Insurance Company in case of Cancellation of the Policy. In the event of incorrect representation of this declaration, the liability shall be upon the policyholder.

In case You find any variations against Your proposal or any discrepancy in the Policy, please contact Us immediately on the numbers available on our website www.icicilombard.com Or call on our toll free no. 1800 2666

ICICI Lombard Health Care Card

ICICI Lombard Health Care

Name : ARCHANA SINGHAL
Policy No. : 4128i/HSRN/173459174/04/000
Card No. : 116956939
Gender : Female Age : 47 DOB : 03-Nov-1975
Valid Upto : 29-Jun-2024

ICICI Lombard
Nibhaye Vaade

Toll Free No.: 1800 2666

- *For services like second opinion, doctor appointment, facilitating hospitalization, post hospitalization care, call our Health Assistance Helpline at 040-66274205 (8 AM to 8 PM Monday to Saturday except public holidays)
- This card is non-transferable and is valid at network hospitals only.
- Use of this card is governed by the policy terms and conditions
- Cashless access to the network provider can only be obtained when accompanied with an authorization letter issued by ICICI Lombard GIC Ltd.
- In case of non photo cards, to prove your identity, please produce this card along with any photo id card issued by Government.
- Valid up to policy expiry date or cancellation date whichever is earlier.

ICICI Lombard Health Care Pays: Hospitalisation bills for admissible claim, subject to prior approval. In case of emergency, approval can be taken within 24 hours of hospitalization.

Insured Pays: All non-medical hospitalization bills and expenses not covered under the policy.

Mailing Address: ICICI Lombard Healthcare, 1st, 4th (Half), 5th and 6th floors, Varun Towers- II, Opp. Hyderabad Public school, Begumpet, Hyderabad, District Hyderabad, Pin code - 500 016, Telangana.

Registered Address: ICICI Lombard House, 414, P. Balu Marg, Off Veer Savarkar Road, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai 400 025.

Fax Number: (040) 6698 9160/61

Toll Free Number: 1800 2666

Email: ihealthcare@icicilombard.com

Visit us at: www.icicilombard.com

Insurance is the subject matter of the solicitation. IRDA Reg. No.: 115. CIN: L67200MH2000PLC129408

*The mentioned covers are add-ons by paying additional premium and available only if opted by the policyholders.

ICICI Lombard Health Care Card

ICICI Lombard Health Care

Name : VIVEK SINGHAL
Policy No. : 4128i/HSRN/173459174/04/000
Card No. : 116956940
Gender : Male Age : 47 DOB : 07-Dec-1975
Valid Upto : 29-Jun-2024

ICICI Lombard
Nibhaye Vaade

Toll Free No.: 1800 2666

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Website: www.icicilombard.com

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ICICI Lombard Health Care Card

ICICI Lombard Health Care

Name : ROHAN SINGHAL
Policy No. : 4128i/HSRN/173459174/04/000
Card No. : 116956941
Gender : Male Age : 17 DOB : 31-Oct-2005
Valid Upto : 29-Jun-2024

ICICI Lombard
Nibhaye Vaade

Toll Free No.: 1800 2666

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ICICI Lombard Health Care Card

ICICI Lombard Health Care

Name : RITIKA SINGHAL
Policy No. : 4128i/HSRN/173459174/04/000
Card No. : 116956942
Gender : Female Age : 14 DOB : 01-Jul-2008
Valid Upto : 29-Jun-2024

ICICI Lombard
Nibhaye Vaade

Toll Free No.: 1800 2666

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