

Health Insurance

Aditya Birla Health Insurance Co. Limited


**ADITYA BIRLA
CAPITAL**

PROTECTING INVESTING FINANCING ADVISING

Group Travel Protect - Certificate of Insurance

Policy Issuing Office	Aditya Birla Health Insurance Co. Limited, 10th Floor, R-Tech Park, Nirlon Compound, Goregaon East, Mumbai - 400063	Policy Servicing Office	Aditya Birla Health Insurance Co. Limited, 7th floor, C building, Modi Business Centre, Kasarvadavali, Mumbai, Thane West - 400615
Policyholder's Name	MAKE MY TRIP (INDIA) PVT. LTD	Policy Number	93-23-00028-00-00
Policyholder's Address	18th and 19th Floor, Building No - 5, Epitome Building, DLF Phase III, Gurgaon, Haryana, 122002	Certificate Number	GAT-MMTAIR-076241
Product Name	Air	Intermediary Code	N/A
Intermediary Name	N/A	Intermediary E-mail ID	N/A
Intermediary Contact Details	N/A		
Name & Residential Address of Insured Person	Brajmohan Singh		
Communication Address of the Insured Person (Please mention if different than Residential Address)			
Geographical Scope	India Ecluding City of Residence (Domestic)	Passport No	N/A
Unique Identification	MTMINFDF41523395029758-P1C1X1	Coverage Type	Individual
Date of purchase policy	23-09-2023	Insured Person Contact Details	9470213207
Trip Duration	Maximum 1 Days	Trip Type	Single trip
Period of Insurance: from <u>04-12-2023</u> to <u>04-12-2023</u> (both days inclusive)			

Insured Person Details						
Member ID	Insured Person Name /		Date of Birth	Gender	Nominee Name	Relationship
	Unique Identifier					
MTMINFDF41523395029758-P1C1X1	Brajmohan Singh		32874	MALE	-	-

Coverage Detail				
Construct 1 - Benefits	Payout Basis	Deductible	Co-Pay	Sum Insured/Applicability
Personal Accident	-	-	-	50000
Delay of checked in baggage	-	4 Hrs	-	2000
Total Loss of checked in baggage	-	-	-	2000
Trip Delay	-	2 Hrs	-	1500
Trip cancellation	-	-	-	upto 3000
Missed Carrier	-	-	-	3000
Common Carrier cancellation	-	-	-	3000
Flight Diversion and Cancellation	-	-	-	3000

Pre-Exising Disease Details	
NA	NA

Waiting Period	
NA	NA

Restriction / Sub-Limits on Medical Expenses	
Medical Expenses	Sub Limits

Premium Details

Particulars	Amount (Rs.)
Net Premium	15.52542372881356
CGST (9%)	
SGST / UTGST (9%)	
IGST (18%)	2.794576271186441
Gross Premium	18.32

GST Registration No.: 27AANCA4062G1ZN

Category: General Insurance

SAC Code: 997133

Claim Assistance

TPA Name: Aditya Birla Health Insurance Co. Limited	TPA ID: TPA001
TPA Address: Aditya Birla Health Insurance Co. Limited, 5th Floor, Modi Business Centre, Kasarvadavali, Near Hypercity Mall, Thane, Maharashtra	Contact Number: 18002707000 Email: ABHICL.GroupTPAClaims@adityabirlacapital.com

Customer Complaints (Grievances)

In case of a conflict, the customer can contact ABHI as per the details mentioned below:

WhatsApp	Send 'Claim' to 8828800035 from your registered mobile number
Helpline Number	Call us at 18002707000
Email ID	Write to us at care.healthinsurance@adityabirlacapital.com

Underwriter Notes

Major Policy Terms and Conditions

1. Premium Shall not be refunded in case of any claims being paid under policy
2. Group Administrator relationship is direct relationship with Group Members
3. Any change in GST /Applicable direct taxes might change the premium
4. No Group should be form for the purpose of Insurance
5. One Master Policy for entire company with Individual COI per traveler
6. Product will be applicable for Indian residents only
7. Please read complete policy document for detailed policy coverages & exclusions
8. The policy is valid only for customers of MMT
9. Policy Period means the period commencing from the Policy Period Start Date and ending on the Policy Period End Date as specifically appearing in the Policy Schedule.

Exclusions

1. Any Preexisting medical conditions and its related complication/consequences
2. Travelling against the advice of Physician
3. Self-Quarantine.
4. Quarantine/ Isolation Advised by any authorized testing center.
5. Quarantine / Isolation at any authorized center.
6. Self-Isolation during lockdown

Stamp Duty :-

The stamp duty of paid vide MH016945204202223E & 18/03/2023, received from Stamp Duty Authorities vide Receipt No. 0008817681202223 & 31/03/2023, payment has been made vide Letter of Authorisation No. LOA/CSD/678/2023/20/3 & 10/04/2023 from Main Stamp Duty Office

Grievance Redressal

In case of a grievance, the Insured Person/ Policyholder can contact Us with the details through our website: www.adityabirlacapital.com, Email: care.healthinsurance@adityabirlacapital.com or Toll Free: [1800 270 7000](tel:18002707000). Address: Any of Our Branch office or Corporate office. For senior citizens, please contact respective branch office of the Company or call at [1800 270 7000](tel:18002707000) or write an e- mail at seniorcitizen.healthinsurance@adityabirlacapital.com The Insured Person can also walk-in and approach the grievance cell at any of Our branches. If in case the Insured Person is not satisfied with the response, then they can contact Our Head of Customer Service at the following email carehead.healthinsurance@adityabirlacapital.com. If the Insured Person is still not satisfied with Our redressal, he/she may approach the nearest Insurance Ombudsman. The contact details of the Ombudsman offices are provided on Our website and in the Policy.

Note: This certificate must be surrendered to the Insurance Company for issuance of fresh certificate in case of cancellation of Policy or any alteration in the insurance affecting the premium.

Important

- 1) In case of payment by cheque, in the event of dishonour of cheque for any reason whatsoever, insurance provided under this document automatically stands cancelled from the inception irrespective of whether a separate communication is sent or not
- 2) Insurance cover is subject to the terms and conditions mentioned in the Policy wordings provided to you with this Certificate of Insurance. For complete set of benefits, terms, conditions & exclusions please refer policy wordings.
- 3) The assignment of Benefits under the Policy shall be allowed subject to applicable law.

Master Policy Number: 93-23-00028-00-00

Certificate Number: GAT-MMTAIR-076241

Date: 23-09-2023

Place: Mumbai

*This is a computer generated statement doesn't need any signature
