

## HEALTH CARD



ID before

### TPA ID No.: SHRPL/0395//TG0100002719

Name of Insured Person: Arvind Kumar Address: PLOT NO 85, UDYOG VIHAR, PHASE 1, GURUGRAM, GURGAON,

HARYANA, 122016 Age: 29 Gender : M Policy No.: 0239594264

Policy Period/Validity Period: 01/08/2022 - 31/07/2023

Name of Policyholder: Arvind Kumar (S H RETAIL PRIVATE LIMITED) Relationship with Policyholder: SELF

Emergency Contact no. of TPA: 011-45451300 Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in website:www.safewaytpa.in Terms & Conditions

This card is for identification purposes only.

2. For cashless benefit, treatment has to be taken in network hospitals only. Preauthorization is compulsory for cashless

3. For planned hospitalization inform TPA at least 7 days before. For emergency cases, inform within 24 hours of admission

4. For reimbursement claims, TPA has to be intimated within 7 days

of hospitalization and prior to discharge
All terms and conditions of the Insurance policy are applicable. 5.

For grievance redressal, login to insurance Company

website:www.safewaytpa.in

Terms & Conditions



# **HEALTH CARD**



### TPA ID No.: SHRPL/0395//TG0100002720

Name of Insured Person: Sonam Vaday Address: PLOT NO 85, UDYOG VIHAR, PHASE 1, GURUGRAM, GURGAON,

HARYANA, 122016 Gender :F Age: 28 Policy No.: 0239594264

Policy Period/Validity Period: 01/08/2022 - 31/07/2023

Name of Policyholder: Arvind Kumar (S H RETAIL PRIVATE LIMITED) Relationship with Policyholder: SPOUSE

Emergency Contact no. of TPA: 011-45451300 Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in

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verify Photo ID before

Please This card is for identification purposes only. For cashless benefit, treatment has to be taken in network

2. Admiceion 3.

> 5. All terms and conditions of the Insurance policy are applicable.

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emergency cases, inform within 24 hours of admission

For planned hospitalization inform TPA at least 7 days before. For

For reimbursement claims, TPA has to be intimated within 7 days

For grievance redressal, login to insurance Company

of hospitalization and prior to discharge

HEALTH CARD



ID before

## TPA ID No.: SHRPL/0395//TG0100002721

Name of Insured Person: Athary Yaday Address: PLOT NO 85, UDYOG VIHAR, PHASE 1, GURUGRAM, GURGAON,

HARYANA, 122016 Age: 3 Gender:M Policy No.: 0239594264

Policy Period/Validity Period: 01/08/2022 - 31/07/2023

Name of Policyholder: Arvind Kumar (S H RETAIL PRIVATE LIMITED) Relationship with Policyholder: SON

Emergency Contact no. of TPA: 011-45451300 Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in website:www.safewaytpa.in Terms & Conditions

- This card is for identification purposes only
- 2. For cashless benefit, treatment has to be taken in network hospitals only. Preauthorization is compulsory for cashless
- 3 For planned hospitalization inform TPA at least 7 days before. For emergency cases, inform within 24 hours of admission
- 4. For reimbursement claims, TPA has to be intimated within 7 days
- of hospitalization and prior to discharge 5. All terms and conditions of the Insurance policy are applicable.

For grievance redressal, login to insurance Company