

To,  
**HCL TECHNOLOGIES LIMITED**  
**52098226**  
Address  
NA

NEW DELHI, DELHI  
Pin code: 0  
Phone no: 8377914060

Date: 30/09/2024  
Shortfall Letter No: DEL-0924-CL-0034628-S01  
U/W Claim Number:  
Agent Code:  
Dev off Code:

**Sub:Query pertaining to claim DEL-0924-CL-0034628**

|                              |                                      |                          |                              |
|------------------------------|--------------------------------------|--------------------------|------------------------------|
| <b>Proposer/Insured Name</b> | HCL TECHNOLOGIES LIMITED/RAJ KISHORE | <b>Policy number</b>     | 90000034230400000108         |
| <b>Employee Code</b>         | 52098226                             | <b>ID Card number</b>    | DEL-NI-H0351-057-0097423-E   |
| <b>Patient name</b>          | PRIYANKA KUMARI                      | <b>Hospital name</b>     | A SWASTHAM MEDICARE HOSPITAL |
| <b>Date of Admission</b>     | 15-Sep-2024                          | <b>Date of Discharge</b> | 15-Sep-2024                  |
| <b>Claim Amount</b>          | 23724                                | <b>Claim number</b>      | DEL-0924-CL-0034628          |

Dear Sir/Madam,  
With reference to your claim paper submitted with us you are requested to provide us with the following details to enable us to process your claim further.

1. Kindly provide gravida status and indication for the abortion and copy of hospital registration certificate

**Important**

Please note that the above claim is being assessed based on the assumption that all your bills have been submitted to us.

Please also note that issuance of this query letter, does not amount to acceptance/clearance of your claim. On receipt of the above documents, your claim will be processed in accordance with the Terms and Conditions of the Policy. Please quote the above query number in your query reply and also for any further correspondence with regards to the claim.

For any further assistance please feel free to write us on [claimsdocuments@vidalhealthtpa.com](mailto:claimsdocuments@vidalhealthtpa.com) or call us at our 24x7 call center numbers

Printed on : 30/09/2024