

MR.Omprakash Yadav

S/O

J/901 Stellar jeevan Gretar

Noida sector 1

Contact No. 8929125711

2024-11-05

Dear MR. Omprakash Yadav ,

Thank you for choosing UHL Health COMPANY LTD. as your preferred insurance partner. We welcome you to be a part of our family!

Your Health insurance policy reference no UHL170937 is confirmed on the basis of the information and declaration given by you.

The details of coverage are mentioned in the enclosed policy schedule of insurance. We value your relationship with us and assure you our best services at all times and we look forward to serving you.

Now you can view your policy details and health card at your fingertips. Download our Mobile App now and experience convenience today!

As per recent directive by Insurance Regulator IRDAI, KYC verification has been mandated for all existing & new insurance customers. To ensure that we comply with this guideline, we are retrieving your KYC documents (Address proof and Photo) updated with Pan No from the CERSAI portal. Rest assured, your KYC details will be verified or retrieved for KYC purposes only.

Proposer details have been updated based on the information present in the KYC documents. If you find any detail which needs to be corrected, we request you to create/modify the eKYC ID and place a request for endorsement.

Soft copy of the policy is valid for all purposes, including claims.

For UHL Health Company Ltd.



Duly Constituted Attorney

Omprakash Yadav J/901 Stellar jeevan Greter Noida sector 1 Contact No :8929125711	Policy Number : UHL170937	Issuance Date : 2024-11-05 00:00:00
	Period of Insurance	From 2024-11-05 00:00:00 To2024-12-04 23:59:59
	Invoice No. : UHL170937 Policyholder Name : Mr. Omprakash Yadav HSN Code : XXX Place of Supply : J/901 Stellar jeevan Greter Noida sector 1 Customer Id : 82 EIA No. : Not provided	Premium Frequency : Single Policy Type : FAMILY Floater Premium Tier:Tier1 Previous Policy Renewal:No
	Email ID : uofcharity@gmail.com	
Intermediary Name	Intermediary Code	Intermediary Contact Number
HE DIRECT_DBG DIRECT_297411	201880669365	

Plan Person's Details and Sum Plan - Optima Secure												
Insured Person'sName	Relation with policy holder	Gender	Date of Birth	Nominee Name	Relationship with Nominee	First PolicyInception date	Base SumInsured	Aggregate Deductible	Plus Benefit	Unlimited Restore Add on(Y/N)	Overseas Travel Secure	

The nominee must be an immediate relative of the policyholder. For all other Insured Persons the policy holder shall be the nominee

Unlimited Restore UIN No: HDFHLIA22188V012122 Optima Wellbeing UIN No:HDFHLIA24099V012324

For declared and accepted pre-existing medical conditions, waiting period (s) shall apply per policy terms and conditions from 1st policy inception date of the policy, fresh waiting period (s) shall apply on enhanced sum insured

Premium Details (`)			
Particulars			
Base Premium (A)			
Optional Cover Premium (B)			
Add on Cover Premium (C)			
Loading (D)			
Total Premium (E=A+B+C+D)			
Aggregate Deductible Discount			
Online Discount			
Employee Discount			
Loyalty Discoun			
NRI Discount			
Family Discount			
Long term Policy Discount			
Total Discount (F)			
Integrated Tax 18%			
Goods & Service Tax (GST)			
Total Premium including GST			

Payment Details					
Instrument details	OPS196024342162	Date	02/07/2024	Bank Name	BIZDIRECT
Processing Centre					
HDFC ERGO General Insurance Co. Ltd. , Stellar IT Park, Tower-1, Fifth Floor, C - 25, Sector 62, Noida - 0120 398 8360					
For Claim/Policy related queries call us at +91- 22 6234 6234/+91- 120 6234 6234 or Visit Help Section on www.hdfcergo.com for policy copy/tax certificate/makechanges/register & track claim.					
If the premium is not realised the policy shall be void from inception.Consolidated stamp duty for this Insurance Policy is paid by Demand Draft, vide Receipt/Challan noNO.LOA/ENF-1/CSD/34/2023/6045 dated 27/12/2023 as prescribed in Government of Maharashtra Order No. Mudrank-2017/CR.97/M-1, dated the 09th January 2018. GST Registration No: 27AABCL5045N1Z8". GST for this invoice is not payable under reverse charge basis. I/ 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-rul					
Branch :leela business park, 6th flr, andheri - kurla rd, mumbai					

For UHL Health Company Ltd.



Duly Constituted Attorney

For detailed policy terms and conditions please visit our website
<https://www.Uhlhealth.com/download/policy-wordings>