## OVERSEAS MEDICLAIM IDENTIFICATION (B&H) SCHEDULE FOR SCHENGEN COUNTRIES ONLY

This Overseas Mediclaim Insurance is only available to Bangladeshi Citizens between 6 months and 79 years of age who are undertaking bonfide trips outside Bangladesh which will not involve any form of manual work and do not exceed 180 days in duration unless specifically extended.

Policy No.: UIC/CDU/MISC/OMP-0012/2/2024 Plan Category: Non Medical Date: 28/02/2024 01. Name of Insured Person(as indicated on passport) Imran Hasan 02. Age (In completed years) 01/02/2000 03. Residence Address 506 04. Residence Telephone No. /Mobile No. 0136524879 05. Insured's Occupation (Specify) **Business** 06. Passport No. A0123652 07. Name of the Usual Physician with Telephone No. Kanrul hasan 01714526396 FOR SCHENGEN COUNTRIES ONLY 08. Plan Type 09. Limit of Cover (Please See Condition-12) a) For Schengen Countries(Both Illness & Accident) Non-Medical: EURO 30,000 or US\$ equivalent US\$ 500 or EURO equivalent b) Dental Treatment 10. Deductible For Schengen Countries: No deductible For Non Schengen Countries: US\$ 100. Emergency Dental Care: US\$ 50 11. Amount of Premium (BDT) (Standard) : Tk. 1394.00 (Vat 15%) : Tk. 209.00 (Stamp) : Tk. 0.00 Tk. (Total) 1603.00 28/02/2024 12. Date of Issue 13. No. of Days Covered 14.0000 Days Visiting Country: Schengen Country 14. First day of Insurance From 28/02/2024 To 13/03/2024 15. Address of Issuing Office Head Office, Camellia House, 22, Kazi Nazrul Islam Avenue, Dhaka 1000.

**Warranty:** warranted that if any alteration/Modification /Cancellation of this Policy is needed the insured must inform the insurer United Insurance Company Limited in writing before his/her departure from Bangladesh. Claims Important Information sheet attached. disease are covered under this policy. Excluded "EBOLA" "ZICA". Excluding Prfessional Sports and sports of any kind. Excluding War and Terrorism, as per Exclusion Clause as attached. Cover for "COVID-19" is included. Warranted that covid-19 is not covered unless providing negative certificate before boarding or departure. Covid-19 Endorsement Clause as attached.

PABX: 880-2-41062001-04

Fax: 880-2-58614475, Email:

info@unitedinsurance.com.bd

16.Telephone No.

17. Fax No. / E-mail