



Ms Gulla Madhavi Latha . Mahadevapuram Kandukur, . Prakasam, 523105 Andhra Pradesh Contact No : 7893166416

Date: 08/05/2023

Dear Ms Gulla Madhavi Latha .

Thank you for choosing HDFC ERGO as your preferred insurance partner. We welcome you to be a part of our family! Your Health insurance policy reference no 2952204172828802000 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.

As a measure of our customer convenience we have implemented a Lifetime Validity Health Card. For you, this simply means that your Health Card is valid for all subsequent renewals and as long as your policy is active with us. Hence, you need not replace your health card every year

We value your relationship with us and assure you our best services at all times and we look forward to serve you.

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

For HDFC ERGO General Insurance Company Ltd.

Asharna

Head - Customer Experience Management

HDFC ERGO General Insurance Company Limited

TAX CERTIFICATE

HDFC ERGO

Dear MS GULLA MADHAVI LATHA .

Subject: Certificate for the purpose of deduction under section 80 D of Income Tax (Amendment) Act, 1986

This is to certify that we have received an amount of the period 09/06/2023 to 08/06/2024. ₹ 12189 towards premium for my: health Suraksha Policy , Policy No. 2952204172828802000 issued to for the period 09/06/2023 to 08/06/2024.

Note: This is subject to the provisions of Section 80D of income tax (Amendment) Act, 1986 as amended from time to time.

For HDFC ERGO General Insurance Company Ltd.

Date: 08/05/2023

Policy Issuing Office: Mumbai

Duly Constituted Attorney

Renewal Coupon - Yearly Free Health Check Up

Being our valued customer, you are now eligible for a yearly free Health Check Up worth Rs. 1000

Call 022 - 6234 6234 / 0120 - 6234 6234 to fix an appointment Visit the selected diagnostic center at the scheduled time. Please carry the photo copy of your policy.

The eligible Insured Person(s), is/are entitled for one time health check up benefit up to an amount of Rs.1000, which will be valid for 365 days from policy renewal date

:2952 2041 7282 8802 000

Issuance Date

Policy No.



:08/05/2023



				_		2952 2041 7282 8	802 000	Issuance Da	te	:08/05/202	:3	
				F	Period of Insurance	From 09/06/2023:	00:01 hrs	To 08/06/2024	Midnigl	ht		
Ms Gulla Madhavi Latha . MahadevapuramKandukur, .Prakasam Andhra Pradesh, 523105, Contact No : 7893166416					Invoice No. :204172828802000			Premium Frequency :Yearly				
					HSN Code :997133 Proposer Name :Ms Gulla Madhavi Latha . Customer Id :1019578634230001			, ,		:Individua	:Individual	
Andhra Pi	radesh, 523105, Contact I	No : 7893166416					-					
								EIA No.		: Not prov	ided	
				F	Payment Details : 35223	05104943 Bank	Name:BizDi	rect				
							. 10					
					Email ID : madhavilatha							
					ed Person's Details & S							
Insured's	Name	Relation with		DOB	Nominee Name	Nominee	1st Policy	Basic Sum	Tier	CB Amount	_	
		policy holder				Relationship	Inception	Insured (₹)		(₹)	Existing Disease	
Vijayalaxm	ıi .	Mother	Female	01/01/1977	Gulla Madhavi Latha	Daughter	09/06/2021	500000	Tier 2	50000	NO	
					Schedule of Cover	age						
Section	Covers				Details/ Applicabilit					imit		
	A Hospitalization Cover			un to B	tasic Sum Insured includ	ing cumulative Ronus		Basic Sum Insured and CB				
71	Medical Expenses			up to E	up to Basic Sum Insured including cumulative Bonus				Basic Sum Insured and CB			
1B	Mental Healthcare							asic Sum Insur				
2	Home Healthcare							asic Sum Insured and CB				
3	Domiciliary Hospitalization				Ba			asic Sum Insured and CB				
4	Pre-Hospitalization							0 Days				
5	Post-Hospitalization							80 Days				
6	Day Care Procedures							asic Sum Insured and CB				
7	Road Ambulance cover			Sub lin	Sub limited within the Basic Sum Insured including S Cumulative Bonus S			I 1 to 5 L -2,000				
								I 6 to 50 L -3,500				
								I Above 50 L -15,000				
8	Organ Donor Expenses								asic Sum Insured and CB			
9	Alternative Treatment								Basic Sum Insured and CB			
C1	Preventive Health Check Up -Booster			over ar				Covered Up to 1% of Basic Sum Insured max upto				
<u> </u>	Decover Decel			A	ad above the Dania C	Jacurad	F	ts 5,000, on eve	ery renew	vai		
C5 C6	,				ver and above the Basic Sum Insured ver and above the Basic Sum Insured L			Jpto 100% of Basic Sum Insured				
Cb	Sum insured Rebound			over ar	nd above the Basic Surf	i insured	ι	ipto 100% of Ba	asic Sum	insurea		
					Renewal Benefit	S						
1	Cumulative Bonus				able (5% of SI at each o	claim free yr, max	50%)					
2	my:health Active			Applica	able							
					Waiting Periods							
				Soc E	1 i - General waiting per		Policy incom	tion date				
Section A	Hospitalization Cover				1 ii - Listed illness & pro			uon date				
COULDITA	1 100pitalization 00Vei				1 iii - Preexisting conditi							
					Premium Details							
Basic Pre	emium				— Tromiam Betan					10	330.00	
										10	0.00	
Loadings												
Integrated Tax 18%										,859.00		
Total Pre	mium									12	,189.00	

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/make changes/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 no NO.LOA/CSD/477/2022/4252 dated 29/09/2022 as prescribed in Government of Maharashtra Order No. Mudrank-2017/CR.97/M-1, dated the 09th January 2018". GST Registration No: 36AABCL5045N1Z9. 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-rule

Branch :aditya jr towers, 8-2-120/86/9/a&b, 3rd floor road no-2, banjara hills hyderabad Write to us : feedbackgeneral.insurance@in.hdfcbank.com

For HDFC ERGO General Insurance Company Ltd.

Agent Name: HDFC BANK LTD Agent Code: 201587086428 Tel No.: 91-22-61606161

Duly Constituted Attorney

Explore any of our advanced digital options below and get quick assistance for your policy servicing queries.



Click on https://selfhelp.hdfcergo.com to visit our "Help" section



Live Chat with DIA on www.hdfcergo.com



Send us 'Hi' on our WhatsApp Number 8169500 500



Download the HDFC ERGO Insurance App on Android or iOS

"For detailed policy terms and conditions please visit our website https://www.hdfcergo.com/download/policy-wordings."





HDFC ERGO General Insurance Company Limited

This card is for identification purpose only.

Card has to be presented to the Network Service Provider at the time of admission/ availing cashless hospitalization or any other services. Insurance claim will be processed in accordance with the policy term & conditions. Card does not guarantee cashless hospitalization or any other service. For more details and updated list of Network Service Provider please refer our website or call our call centre. This card is valid till the time policy is active.

Customer Service No: 022 - 6234 6234 / 0120 - 6234 6234 Fax Number : 022 - 6234 6234/0120 - 6234 6234 Email : healthclaims@hdfcerog.com

Email : healthclaims@hdfcergo.com : HDFC ERGO General Insurance Company Ltd. 5th floor, Tower 1, Steller IT Park, C-25, Sector-62,Noida-201301.

Website : www.hdfcergo.com