



# The Oriental Insurance Company Limited

## HAPPY FAMILY FLOATER-2015 POLICY SCHEDULE

UIN: OICHLIP445V032021

<b>Policy No.</b> : 462100/48/2022/1096	<b>Prev. Policy No.</b> : 462100/48/2021/7032
<b>Cover Note No.</b> : -	<b>Cover Note Date</b> : -
<b>Insured's Code</b> : 27759913	<b>Issue Office Code</b> : 462100
<b>Insured Name</b> : A.SAMBI REDDY (GSTIN: 0)	<b>Issue Office Name</b> : DO 1 VIJAYAWADA (GSTIN: 37AAACT0627R4ZV)
<b>Address</b> : 6-242 OPP SAISUDHA MEDICALS NUTHAKKI GUNTUR - - GUNTUR ANDHRA PRADESH 522303	<b>Address</b> : P.B. NO : 719, D.NO.54-15-4B, 'GUTTIKONDA ZOOM' 1ST FLOOR, NEAR VINAYAK THEATER, RING ROAD, VIJAYAWADA ANDHRA PRADESH 520008
<b>Tel./Fax/Email</b> : 9962589250 / / 9962589250 / subbareddia@gmail.com	<b>Tel./Fax/Email</b> : 0866-2457825 / 2457309 / 2457309 / bn.rao@orientalinsurance.co.in

### Agent/Broker Details

**Dev.Off.Code** : NZ0000000108 AGENCY MANAGER DO I VIJAYAWADA  
**Agent/Broker** : BA0000017413 CH SUBRAHMANYAM  
**Address** : FLAT NO. B - 502,PINNAMANENI RESIDENCY, GOLI KRISHNAIAH STREET,  
RAMAVARAPPADU, VIJAYAWADA,KRISHNA,ANDHRA PRADESH,521108  
**Tel/Fax/Email** : 9246411005/9490743119//chinni.sm16@gmail.com

Period of Insurance : FROM 00:00 ON 05/02/2022 TO MIDNIGHT OF 04/02/2023

Collection No. & Dt. : CC 9049003546 - 03/02/2022 GST INVOICE NO :3720244558 UIN :0

Gross Premium : 15,279 GST 2750 Stamp Duty : .5 Total : 18,029

Co-insurance Details : Nil

### TPA Details :

TPA ID : YA0000000348  
TPA Name : M/S MEDI ASSIST INSURANCE TPA PRIVATE LTD.  
Address : No.4/1, IBC Knowledge Park, Tower "D" 4th Floor, Bannerghatta Road, Bangalore  
BANGALORE 560029 Toll Free No. : 1800 425 9449  
Telephone No : 1800 425 9449 FAX No. : 1800 425 9559

**Number of persons covered** : 2 **Plan Type** : SILVER Plan **Sum Insured** : 400000

### Particulars of the Persons covered :

Sr. No.	Name of The Persons	Gender	Date of Birth	Age	Relationship With Proposer	Pre-Existing Diseases	Co-Pay (%)	PA Capital Sum Insured (INR)
1	A.SAMBI REDDY	M	18/10/1962	59	Self	NIL	10	4,00,000
2	A.UMA RANI	F	23/11/1967	54	Spouse Unemployed	NIL	10	4,00,000

Place : VIJAYAWADA

Date : 03/02/2022



IRDA-REGNO-556

For and on behalf of  
The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule).The Policy document duly stamped will be sent by post

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee

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# The Oriental Insurance Company Limited

Attached to and forming part of policy number 462100/48/2022/1096

## Nominee Details

Name Of the Nominee	Relationship With the Insured	Age Of the Nominee	M/F/TG*

## Optional Cover:

		<u>Value</u>
LIFE HARDSHIP BENEFIT	NO	
RESTORATION OF SI	NO	

Total Premium in words : Indian Rupees Eighteen Thousand Twenty-Nine Only

The insurance under this policy is extended to cover risks of Domiciliary Hospitalisation up to 10 % of sum insured subject to maximum Rs 50000 only ( Fifty Thousand Only).

The insurance under this policy is extended to cover risks of :

Personal Accident Cover, Domiciliary Hospitalisation Limit, Daily cash allowance, Attendant allowance.

Deductible : Nil

The insurance under this policy is subject to conditions, clauses, warranties, endorsements as per forms attached.

The policy shall pay for hospitalisation expenses for medical/surgical treatment taken as an in-patient at any Nursing Home/Hospital in INDIA as defined in the policy.

Warranted that in case the person covered under the policy has lodged any claim under the previous policy and the sum insured is enhanced under the current policy, for a further claim for the same disease during the current policy, the earlier limit of Sum Insured shall be applicable and not the enhanced sum insured.

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

**"We at Oriental continuously strive to ensure that you get the best possible treatment from our network hospitals. Please contact your TPA or any of the Oriental offices for our preferred hospitals in your area before going for a treatment. This will help us serve you in the best possible manner"**

In witness whereof the undersigned being authorised by and on behalf of the Company has/have herein to set his/their hands at DO 1 VIJAYAWADA (GSTIN: 37AAACT0627R4ZV) on 03-FEB-22.

**1.Claim to be reported within 48 hrs of admission but before discharge.**

**2.Claim documents to be submitted within 15 days of discharge.**

**For complete details please refer to policy condition.**

## Policy History Data

Place : VIJAYAWADA

Date : 03/02/2022



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## The Oriental Insurance Company Limited

Attached to and forming part of policy number 462100/48/2022/1096

Policy No.	Period From	Period To	Insurer Name	Sum Insured
432100/48/2009/2754	05-FEB-09	04-FEB-10	The Oriental Insurance Company Ltd.	200000
462100/48/2010/2775	05-FEB-10	04-FEB-11	The Oriental Insurance Company Ltd.	200000
462100/48/2011/3048	05-FEB-11	04-FEB-12	The Oriental Insurance Company Ltd.	200000
462100/48/2012/2222	05-FEB-12	04-FEB-13	The Oriental Insurance Company Ltd.	200000
462100/48/2013/2106	05-FEB-13	04-FEB-14	The Oriental Insurance Company Ltd.	400000
462100/48/2014/1725	05-FEB-14	04-FEB-15	The Oriental Insurance Company Ltd.	400000
462100/48/2015/1692	05-FEB-15	04-FEB-16	The Oriental Insurance Company Ltd.	400000
462100/48/2016/1910	05-FEB-16	04-FEB-17	The Oriental Insurance Company Ltd.	400000
462100/48/2017/1546	05-FEB-17	04-FEB-18	The Oriental Insurance Company Ltd.	400000
462100/48/2018/1347	05-FEB-18	04-FEB-19	The Oriental Insurance Company Ltd.	400000
462100/48/2019/1315	05-FEB-19	04-FEB-20	The Oriental Insurance Company Ltd.	400000
462100/48/2020/999	05-FEB-20	04-FEB-21	The Oriental Insurance Company Ltd.	400000
462100/48/2021/7032	05-FEB-21	04-FEB-22	The Oriental Insurance Company Ltd.	400000

### Claim History Data

Policy no.	Claimant Name	Claim No.	Claim OS	Claim Paid
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Place : VIJAYAWADA

Date : 03/02/2022



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## The Oriental Insurance Company Limited

Attached to and forming part of policy number 462100/48/2022/1096

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"In case of grievance related to any issue related to this policy the same may be addressed to the office In-Charge or the Grievance Officer at above policy address. If the grievance remains pending, it may be escalated to Grievance Officer of the concerned Regional Office DOOR NO.48-14-111, SRI NITYA COMPLEX, 2ND FLOOR,OPP : KARNATAKA BANK, RAMA TALKIES ROAD,VISAKHAPATNAM,. The next escalation in case grievance remains unresolved is CSD, Head Office, situated at Oriental House, A-25/27, Asaf Ali Road, New Delhi-110002.

If the insured is not satisfied with the resolution/reply provided by the company, he/she may approach the Office of Insurance Ombudsman, within his/her jurisdiction. The list of offices of Ombudsman is available on Company's portal."

Entered By : subbareddia@gmail.com

Policy Printed By : OICL

IP :

For and on behalf of  
The Oriental Insurance Company Limited

Policy Printed On : 03-FEB-22 14:47:38

MAC :

Authorised Signatory

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Place : VIJAYAWADA

Date : 03/02/2022



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