

Star Health and Allied Insurance Company Limited

Family Health Optima Insurance Plan
Unique Identification No. IRDAI/HLT/SHA/P-HV/III/129/2017-18
Policy Schedule

In consideration of payment of Rs.15287/- towards renewal premium of Policy number: P/131311/01/2019/003311, the policy stands renewed for a further period of 1 year as per the details given below.

Renewal Endorsement No P/131311/01/2020/004150

GSTIN 37AAJCS4517L12X

Customer Code AA0010092057
Customer Name Mr K VENKATESWARA RAO
Proposer Code 12786295
Proposer Name Mr K VENKATESWARA RAO
Address COCONADA CHAMBER OF COMMERCE, D NO : 41-8-25, PRIMESES WEST BLOCK, COMMECIAL ROAD, KAKINADA

SAC Code 997133/Accident and Health Insurance Services
Issuing Office Code 131311
Issuing Office Name Branch Office - Kakinada
Address Door No. 6-1-29, First floor Near Nookalamma Temple, Beside IOC Petrol Bunk Jawhar Street, Suryarao Peta, Kakinada-533004

Kakinada, East Godavari, Andhra Pradesh-533001

Tel/Mobile 9246694458/
E-mail id kumarituskdd@yahoo.com

Tel/Mobile 0884-2342661
E-mail id kakinada@starhealth.in

Proposer GSTIN -
Proposal date 21/11/2015
Date of Inception of first policy 21-NOV-15
Renewal Year Fourth Year

Place of Supply -
Fulfiller Code SH1765

Intermediary Code : BA0000021927

Collection Number & Date 1055005248 & 20/11/2019

Name : SHAIK LAI SHARIEF

Premium Rs 12955/-
CGST @9% Rs 1,166/- SGST / UTGST @9% Rs 1,166/-
Total Premium Rs 15287/- Stamp Duty Re 1/-

Tel/Mobile : 8985943647/9440127998

E-mail id : sl_sherief@yahoo.com

Total Premium In Words : Rupees Fifteen Thousand Two Hundred Eighty Seven Only

Period of insurance	: From : 21/11/2019 00:00:00	To : Midnight of 20/11/2020
Basic Floater Sum Insured	: 500000	Scheme Description : 2A-2C
In words	: Rupees Five Lakhs Only	
Bonus: Rs. 275000	Limit of Coverage : Rs. 775000	Recharge Benefit : Rs 150000

Details of Insured Persons :

Sl. No	Name of the Insured	Gender	Date of Birth	Age in Yrs	Relationship with Proposer	ID Card No	Pre-existing Disease	Inception Date
1	K VENKATESWARA RAO	M	05/06/1975	44	SPLF	4742674-11	No PED declared	21/11/2015
2	K VARALAKSHMI	F	16/07/1984	35	SPOUSE	4742674-12	No PED declared	21/11/2015
3	K KRISHNA VAMSI	M	06/09/2001	18	DEPENDANT CHILD	4742674-13	No PED declared	21/11/2015

Entered By : SH19294

For Star Health and Allied Insurance Company Ltd

IRDAI Regn. No 129

Corporate Identity Number U66010TN2005PLC056649

Email ID : support@starhealth.in

