

(a) Policy Schedule (Policy Certificate)

Proposer Name	SUSHANTA MEHER	Policy No.	4128/iHPA/163202699/02/000
Address	201 RING VIEW RESIDENCY, DODDANEKUNDI OUTER RING ROAD, KARTHIK NAGAR, OPPOSITE PLAZA SUPERMARKET, DODDANEKUNDI OUTER RING ROAD, KARTHIK NAGAR, BANGALORE, KARNATAKA - 560037	Period of Insurance	From 00:00 hrs 15-Jan-2022 To 23:59 hrs 14-Jan-2024
Contact No.	9740096978	Policy Tenure	2
Email Address	SUSHANTA.MEHER@GMAIL.COM	LAN No.	NA
Nominee Name		Policy Issuing Office	Prabhadevi
Relationship With Policyholder		Policy Issued On	14-Jan-2022
Appointee Name		Previous Policy No.	4128/iHP/163202699/01/000
GSTIN Number (Customer)		Nominee Age	NA
Servicing Branch Address	Fourth Parsavnath Capital Tower Bhai Veer Singh Marg, New Delhi New Delhi 110001	Servicing Branch Name	New Delhi
		Invoice Number	100122628504

Insured's Name(s)	Date of Birth	Age		Date of Joining	Gender	Relation With Proposer	Annual Sum Insured (₹)	Pre-existing Illness/ Injury	Optional Add-on Cover*	Special Condition
		Y	M							
SUSHANTA MEHER	05-Mar-1983	38	10	15-Jan-2019	Male	SELF	1000000	None	None	None

Plan Details				GSTIN Reg. No	HSN/SAC code	The stamp duty of ₹ 1 paid vide deface no. CSD232202184 dated 06-Jan-2022
Plan Name	Additional Sum Insured (₹)	Sub-limit	Voluntary Deductible (₹)			
iHP_Individual_Adult_2_Years_A	200000	None	0	07AAACI7904G1ZP	997133 GENERAL INSURANCE SERVICES	

Premium Details (₹)				
Basic Premium	IGST		Total Tax Payable	Total Premium
	%	₹		
26815.25	18	4826.75	4826.75	31642

Agent Details					
Agent Name	AMERICAN EXPRESS BANKING CORP	Agent Code	8654380	Agent contact No.	9717759244

Important: Insurance benefit shall become voidable at the option of the company, in the event of any untrue or incorrect statement, misrepresentation non-description of any material particular in the proposal form/ personal statement, declaration and connected documents, or any material information has been withheld by beneficiary or anyone acting on beneficiary's behalf to obtain insurance benefit. Please note that any claims arising out of pre-existing illness/ injury/ symptoms is excluded from the scope of this policy subject to applicable terms and conditions. Refer to policy wordings for the terms and conditions. All disputes are subject to the jurisdiction of Mumbai High Court only. For claims, please call us at our toll free no. 1800 2666 or e-mail to us at ihealthcare@icicilombard.com or write to us at ICICI Lombard GIC, ICICI Bank Tower, Plot no-12, Financial district Nanakramguda, Gachibowli, Hyderabad, Andhra Pradesh 500032.

This policy has been issued based on the details furnished by the policyholder. Please review the details furnished in the policy certificate and confirm that same are in order. In case of any discrepancy/ variation, you are requested to call us immediately at our toll free no. 1800 2666 or write to us at customersupport@icicilombard.com. In the absence of any communication from you within the period of 15 days of receipt of this document, the policy would be deemed to be in order and issued as per your proposal. All refunds and claim payment will be done through NEFT only. In case of addition of member/ increase in sum insured, fresh waiting period will be applicable to new member/ increased sum insured. This policy certificate is to be read with the policy wordings, as one contract or any word or expression to which a specific meaning has been attached in any part of this policy shall bear the same meaning wherever it may appear.



[Click](#) or Scan QR Code for Customer Information Sheet and Policy Wordings

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115

Mailing Address:

ICICI Lombard General Insurance Company Limited,
Interface Building No.: 16, 601 / 602, 6th Floor, New
Link Road, Malad (West), Mumbai - 400 064.

CIN: L67200MH2000PLC129408

Registered Office:

ICICI Lombard House, 414 Veer
Savarkar Marg, Near Siddhi Vinayak
Temple, Prabhadevi, Mumbai - 400 025. Website: www.icicilombard.com

ICICI Lombard Complete Health Insurance

Toll free no.: 1800 2666

Alternate No.: +918655 222 666 (chargeable)

Email: customersupport@icicilombard.com

UIN - ICILHIP22096V062122

Tax Certificate

To

SUSHANTA MEHER

201 RING VIEW RESIDENCY, DODDANEKUNDI OUTER RING
 ROAD, KARTHIK NAGAR, OPPOSITE PLAZA SUPERMARKET
 DODDANEKUNDI OUTER RING ROAD, KARTHIK NAGAR
 BANGALORE
 KARNATAKA - 560037

Subject: Premium certificate for the purpose of deduction under section 80D of Income Tax Act, 1961 and any amendments made thereafter.

Dear SUSHANTA MEHER,

This is to certify that the Company has received the premium dated Jan 11, 2022 for Health insurance coverage under "Health Insurance Policy" with the following details.

Policyholder's Name	SUSHANTA MEHER	Policy Number	4128i/HPA/163202699/02/000
Policy Start Date	Jan 15, 2022	Policy End Date	Jan 14, 2024
Plan Name	iHP_Individual_Adult_2Years_A	Total Premium Paid (₹)	31642
GSTIN Number (Customer)		GSTIN Reg.No (ICICI Lombard)	07AAACI7904G1ZP
Servicing Branch Name	New Delhi	Servicing Branch Address	Fourth Parsavnath Capital Tower Bhai Veer Singh Marg, New Delhi New Delhi 110001

Premium Details (₹)				
Basic Premium	IGST		Total Tax Payable	Total Premium
	%	₹		
26815.25	18	4826.75	4826.75	31642

Financial Year	Amount (₹)
2021-2022	15821.00
2022-2023	15821.00

The product is eligible for deduction u/s 80D of the Income Tax, 1961 and any amendments made there to.

Note: This certificate must be surrendered to the Insurance Company in case of Cancellation of the Policy. In the event of incorrect representation of this declaration, the liability shall be upon the policyholder.

ICICI Lombard Health Care Card



Name : SUSHANTA MEHER
Policy No. : 4128/IHPA/163202699/02/000
Card No. : 113311641
Gender : Male Age : 38 DOB : 05-Mar-1983
Valid Upto : 14-Jan-2024



Toll Free No.: 1800 2666

- This card is not transferable and is valid at network hospitals only
- Use of this card is governed by the policy terms and conditions
- Cashless access to the network provider can only be obtained when accompanied with an authorisation letter issued by ICICI Lombard Health Care
- Please produce this card along with Government issued any valid photo ID proof to prove identity (in case of non - photo cards)
- Valid up to policy expiry date or cancellation date whichever is earlier

ICICI Lombard health Care Pays: Hospitalisation bills for admissible claim, subject to prior approval. In case of emergency, approval can be taken within 24 hours of hospitalisation.

Insured Pays: All non - medical hospitalisation bills and expenses not covered under the policy amount in excess of limit specified in authorisation. Entire bill, if condition is not covered by policy and if authorisation is not obtained / given.

Mailing Address: ICICI Lombard Health Care, ICICI Bank Tower, Plot Number 12, Financial District, Nanakram Guda, Gachibowli, Hyderabad - 500 032.

Registered Address: ICICI Lombard General Insurance Company Limited, ICICI Lombard House, 414, Veer Savarkar Marg, Near Siddhivinayak Temple, Prabhadevi, Mumbai - 400 025.

Fax Number: (040) 6698 9160 / 61

Email: ihealthcare@icicilombard.com

Toll Free Number: 1800 2666

Visit us to: www.icicilombard.com

Insurance is the subject matter of the solicitation. IRDA Reg. No.: 115. CIN: L67200MH2000PLC129408

02023M1

ICICI Lombard General Insurance Company Limited

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ICICI Lombard Complete Health Insurance

Toll free no.: 1800 2666

Alternate No.: +918655 222 666 (chargeable)

Email: customersupport@icicilombard.com

UIN - ICILHIP22096V062122

Health Coupon

1

Complimentary Health Checkup Coupon


This coupon entitles the Insured to undergo the following tests at our empaneled centres without any charges:

- * Medical examination
- * Blood grouping & Rh
- * Hb%
- * CBC
- * Fasting blood sugar
- * Urine routine

Call 1800 2666 to fix your appointment

INSURED_NAME	Health Checkup Date	CARD_NO
SUSHANTA MEHER		113311641

Policy Number: 4128i/iHPA/163202699/02/000 Valid Up to: 14-Jan-2024



Complimentary Health Checkup Coupon


This coupon entitles the Insured to undergo the following tests at our empaneled centres without any charges:

- * Medical examination
- * Blood grouping & Rh
- * Hb%
- * CBC
- * Fasting blood sugar
- * Urine routine
- * ECG
- * Total cholesterol
- * PPBS (Post prandial/lunch blood sugar)

Call 1800 2666 to fix your appointment

Insured Name	Health Checkup Date	Card No.
SUSHANTA MEHER		113311641

Policy Number: 4128i/iHPA/163202699/02/000 Valid Up to: 14-Jan-2024



Complimentary Health Check - Up Coupon



How to use your complimentary health check - up coupon

- Please call 1800 2666 or SMS 'HEALTHCHECK' TO 575758 to book your appointment at the diagnostic centre of your choice within our network.
- Timings for booking an appointment are between 10.00 am to 05:00 pm, Monday to Friday.
- Free health check - up can only be availed by calling on the above mentioned number and booking your appointment in advance.
- The health check - up coupon can be availed by the insured member carrying this coupon.



The free health checkup is non transferable and cannot be clubbed with any other offer from service provider. To avail this offer, the insured is required to carry the health card to medical diagnostic centers along with Complimentary Health checkup coupon while going for the health checkup. This coupon is valid upto the expiry date of the health insurance policy. ICICI Lombard General Insurance Company Limited. ICICI trade logo displayed above belongs to ICICI Bank and is used by ICICI Lombard GIC Ltd. under license and Lombard logo belongs to ICICI Lombard GIC Ltd. ICICI Lombard General Insurance Company Limited, Registered Office: ICICI Lombard House, 414, Veer Savarkar Marg, Prabhadevi, Mumbai - 400025, IRDA Reg.No.115, Toll Free 1800 2666. Fax No - 022 61961323. CIN (L67200MH2000PLC129408). Website: www.icicilombard.com. Email: customersupport@icicilombard.com

Complimentary Health Check - Up Coupon



How to use your complimentary health check - up coupon

- Please call 1800 2666 or SMS 'HEALTHCHECK' TO 575758 to book your appointment at the diagnostic centre of your choice within our network.
- Timings for booking an appointment are between 10.00 am to 05:00 pm, Monday to Friday.
- Free health check - up can only be availed by calling on the above mentioned number and booking your appointment in advance.
- The health check - up coupon can be availed by the insured member carrying this coupon.



The free health checkup is non transferable and cannot be clubbed with any other offer from service provider. To avail this offer, the insured is required to carry the health card to medical diagnostic centers along with Complimentary Health checkup coupon while going for the health checkup. This coupon is valid upto the expiry date of the health insurance policy. ICICI Lombard General Insurance Company Limited. ICICI trade logo displayed above belongs to ICICI Bank and is used by ICICI Lombard GIC Ltd. under license and Lombard logo belongs to ICICI Lombard GIC Ltd. ICICI Lombard General Insurance Company Limited, Registered Office: ICICI Lombard House, 414, Veer Savarkar Marg, Prabhadevi, Mumbai - 400025, IRDA Reg.No.115, Toll Free 1800 2666. Fax No - 022 61961323. CIN (L67200MH2000PLC129408). Website: www.icicilombard.com. Email: customersupport@icicilombard.com