

# Group Accident Guard Policy <u>Group Policy Schedule</u>

Policyholder Contact No: Policyholder E-mail id:

Business Description: Educational Institute

New Business---410449



**Policyholder Details** 

Policyholder name : K V SUBBAREDDY INSTITUTE OF TECHNOLOGY

Policyholder Address: KURNOOL,ANDHRA

KURNOOL-518001 KURNOOL

ANDHRA PRADESH

India

Cust GSTIN number: 37AAAAV4191N1ZX

Intermediary Code: AGINASXPB9038Q Intermediary Contact No: 9177287508 Intermediary Name: B V RAMANA

V KANANA

Renewal No: 00 Endorsement No: 00

Policy Number: 0239244687

Place of Supply: ANDHRA PRADESH

State code: 37

Number of Lives Covered: 1761 Territory Limit: Worldwide

Policy Type: Named Operative Time: 24 Hrs

Relationship Type: Non Employer Employee Sum Insured Basis: Fixed

Loan Type:

Sum Insured Type: Fixed

Total Sum Insured: INR 176,100,000

Maximum Sum Insured: INR 100,000 Aggregate limit for any one accident: INR 50,000,000

Aggregate limit for any one year: INR 0

Age Group: 3 years to 25 years Payment frequency: Annual

Policy Period: From: 17/01/2022 14:27hr To 16/01/2023 23:59hr

Premium details	
Net Premium (Rs):	57,021.18
UGST/SGST @9 % (Rs.)	5,131.91
CGST @9 % (Rs.)	5,131.91
Gross Premium (Rs)	67,285.00

GSTIN: 37AABCT3518Q1ZV-ANDHRA PRADESH, Service Accounting Code: 997133

Insured Description: Educational Institute

	Sr. No.	Category Description	No. of Insured	AD	DM	PTD	PPD	Fixed Medex OPD	Fixed Medex IPD	Fixed Medex OPD and IPD	Variable Medex	Remarks
١	1	Category_1	1761	100,000	0	100,000	0	0	30,000	0	0	

# Coverage Details:

	Sr No.	Coverages	SI Per Person	Deductible	Co pay(%)	Remarks
	1	Accidental Medical Expenses	52,830,000			Fixed IPD - Rs 30000 or actuals whichever is lower
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2	Permanent Total Disability	176,100,000		Covered
3	Accidental Death	176,100,000		Students

- Conditions if any :-
- The Benefits which are mentioned in this Schedule shall only be available under the Policy.

#### Important Exclusions:

The Policy does not provide benefits for any loss resulting in whole or in part from, or expenses incurred, in respect of:

- 1. Any Pre-existing Condition, any complication arising from it;
- 2. suicide, attempted suicide (whether sane or insane) or intentionally self-inflicted Injury or illness
- 3. being under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Physician and taken as prescribed
- 4. Participation in an actual or attempted felony, riot, crime, misdemeanor(excluding traffic violations) or civil commotion
- 5. Mosquito bite and resultant diseases;

This is only a summary of the product features/terms/conditions/exclusions. For more details, please refer our website www.tataaig.com

- Commencement of risk cover under the policy is subject to receipt of premium by Tata AIG General Insurance Company Limited.
- The stamp duty of 5.00 (RUPEES AND PAISE) vide Receipt/Challan no. LOA/CSD/198/2021/4893 dated 29/11/2021

#### **General Conditions:**

- You have a period of 15 Days from the date of receipt of the **Policy** document to review the terms and conditions of this **Policy and** if you have any objections you have the option of cancelling the **Policy** stating the reasons for cancellation and the premium paid after adjusting the amounts spent on any medical check-up, stamp duty charges and proportionate risk premium shall be refunded.
- There will be no premium refund in case of cancellation due to non-disclosure of material facts, mis-representation or fraud. In case of non-cooperation, premium shall be refunded on short rate table basis as specified in the policy.
- Any product revision/modification/future withdrawal will be done with the approval of Insurance Regulatory & Development Authority of
  India and will be intimated to you at least 3 months in advance. In case of withdrawal, you have an option to migrate to our similar health
  insurance product.
- This Policy Schedule in original must be surrendered to the Company in case of cancellation of the Policy Schedule

<u>Claims Administrator Details:</u> Insured Person(s) can notify a Claim by sending an SMS CLAIMS to 5616181 or by calling The Company's 24x7 toll free helpline 1800-266-7780 or 1800 229966 (only for senior citizen Policy holders). Please use the Claim Intimation Form for intimation of a claim.

### Policy Servicing/Grievances/Complaints:

• The Company is committed to extend the best possible services to its customers. However, if you are not satisfied with our services and wish to lodge a complaint / claim, please feel free to call our 24X7 Toll free number 1800-266-7780/022-66939500 (tolled) or you may email to the customer service desk at <a href="mailto:customersupport@tataaig.com">customersupport@tataaig.com</a>. Senior citizens can call our dedicated line at 1800 229966. Please refer The Company's Website for the grievance redressal policy

#### Prohibition of Rebates - Section 41 of Insurance Act, 1938 as amended by Insurance Laws I Amendment) Act, 2015

- 1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
- 2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees



Date: 17/01/2022
Place: KURNOOL

For Policy wordings, please scan the below QR code :

For TATA AIG General Insurance Company Limited



Authorised Signatory

# **Policy Servicing Address**

SHOP NO. 8 & 9, 2ND FLOOR,, T J SHOPPING MALL, SBI CIRCLE, KURNOOL, , , KURNOOL, KURNOOL, ANDHRA PRADESH, 518004



## **RECEIPT**

Receipt No: 109341027340665 Receipt Date: 29/01/2022

Policy No : 0239244687

Received with thanks from VAIBHAV EDUCATIONAL SOCIETY a sum of Rs. 67285( Rupees Sixty-Seven Thousand Two Hundred Eighty-Five And Paise Zero Only)

Sr.No. Policy Number Total Premium		Utilized from the receipt for policy	Balance	
1	0239244687	67,285.00	67,285.00	0.00

#### Note:

- 1. This is a computer generated receipt and does not require a signature.
- 2. Upon issuance of this Receipt, all previously issued temporary receipts, if any, related to this Policy shall be considered null and avoid.
- 3. Amounts received by cheque shall be subject to realisation.
- 4. Any amount received in excess of the Premium is being/shall be refunded by the Company.

GSTIN: 37AABCT3518Q1ZV-ANDHRA PRADESH, Service Accounting Code: 997133

Revenue (consolidated) Stamp Duty duly paid vide challan No. date for applicable cases