पॉलिसी अनुसूची/ Policy Schedule - GroupMediclaim-Tailormade							
व्यवसाय स्त्रोत / Business Source: 251100							
विक्रय चैनल विविरण/ Sales Channel Details कोड/ Code: 251100 नाम/ Name: Mumbai Division XI Contact Number: 0 सह दलाल कोड / Co Broker Code: Customer Care Toll Free Number: 1800 345 0330 email:customer.support@nic.co.in							

ग्राहक का नाम /Customer Name: BANK OF MAHARASHTRA - RETIREES	ग्राहक आईडी /Customer ID: 9701926991	पैन /PAN: AACCB0774B		
पता/ Address: 1501,LOKMANGAL,SHIVAJI NAGAR, City: PUNE,	फोन /Phone:			
District: PUNE, State: MAHARASHTRA, PIN: 411005. Cell: 8007022010	ई-मेल /E-Mail:			

nidnight of 31/10/2021	। स उग्नाग/2021 यम बार	in the standard oney Ellecti	ve from 00:00 hours, on 01/11/2020 to		
प्रीमयिम/ Premium	₹ 12,50,244.00	कवर नोट संख्या और तथि7ि Cover Note Number and Date	NA		
CGST	₹ 1,12,522.00				
SGST/UTGST	₹ 1,12,522.00	. , , , , , , , ,			
IGST	₹ 0.00				
केरला बाढ़ उपकर/Kerala Flood Cess	₹ 0.00	प्रस्ताव संख्या और तथि। Proposal Number and Date	8800201105480888 Dt. 05/11/2020		
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00				
पुनर्प्राप्ति योग्य स्टाम्प इयूटी Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तथिि Receipt Number and Date	251100812010004809 Dt. 31/10/2020		
		पछिली पॉलिसी संख्या और समापृती			
कुल /Total Amount	₹ 14,75,288.00	নখি7ি Previous Policy Number and Expiry Date	NA		

NIC 75.00%, NIA - Tata Motors Auto Tie - Up Branch - 122200 10.00%, UII - LCB MUMBAI - 500100 10.00%, OIC -Co- Insurance Details: Mumbai Division 7 5.00%.

LocationAddress:

1)Bank Of Maharashtra, 1501, Lokmangal, Shivaji Nagar, Pune, Maharashtra-411005, Pune, Pune, Maharashtra, 411005.

Number of families:33 Number of Lives covered: 46

SL. No	Coverage	Coverage Description	Sum Insured				
	Standard Cover	GMC FOR RETIRED EMPLOYEE - WITH DOMICILIARY	` 99,00,000.00				
1	Excess:						
	Additional Information: NA		_				

TPA Details: VIDAL HEALTH TPA PVT LTD - MUMBAI, Fourth Floor, B Wing, 413-422, Chintamani Plaza, Andheri Kurl Road, Andheri East, Mumbai - 400099 Contact No: 22 - 29214700 Email: Nationalfeereceipts@vidalhealthtpa.com.

Clauses	As per Annexure I
	·

टिप्पणियां/ Remarks: 1. Family Definition : Retired/Resigned Employee + Spouse only. OR Widow/Widower

2. Separate rates were given for Single person i.e., either of the below mentioned cases :-

a) Retiree without Spouse

b) Surviving Spouse (Family Pensioner)

(* If employee and spouse both are alive, family floater premium have to be paid.)

3. Sum Insured for Group Health Insurance on Family Floater basis: 1 lac/2lacs/3lacs/4 lacs

4. Data:

5. Room Rent:

Sum Insured No of families Dependents 2 1 Lac 2 2 Lacs 5 6 3 Lacs 17 2 4 Lacs 9

Printed on 05/11/2020 by ID: 73152, AID: 73152

पॉलिसी अनुसूची/ Policy Schedule - GroupMediclaim-Tailormade Policy Number: 251100502010000330 वयवसाय सत्रोत / Business Source: 251100 विकरय चैनल विवरण/ Sales Channel Details जारीकर्ता कार्यालय/Issuing Office कोड/ Code: 251100 कार्यालय कोड/ Office Code: 251100 नाम/Name: Mumbai Division XI कार्यालय पता/ Office Address: MUMBAI Contact Number: 0 DIVISION XI IInd Floor, National Insurance Building,,14, Jamshedji Tata सह दलाल कोड / Co Broker Code: Road,, Churchgate - 400020. State Code: 27, Maharashtra **GSTIN: 27AAACN9967E1Z3** Contact Number: 22 22036054 **Customer Care Toll Free Number:** Mobile Number: 0 1800 345 0330 email:customer.support@nic.co.in

For Sum Insured 1 lacs and 2 Lacs: Room Rent per day shall be payable up to 1.5% of Sum Insured and ICU charges per day shall be payable up to 2% of Sum Insured.

For Sum insured 3 lacs and 4 lacs: Room rent per day shall be payable up to Rs.5000/- and ICU charges upto Rs.7500/-

- 6. For critical illness, Hospitalization medical expenses alone is payable. No lump sum fixed benefit is payable.
- 7. Domiciliary treatment shall be covered subject to Clause No 3.1 of coverage. The maximum limit of sum insured is 10% of Family floater Sum Insured. The total sum insured is including the domiciliary limit as stated above.
- 8. No expenses related to maternity is payable. No day one cover available for new born child.
- 9. No corporate buffer is available.
- 10. Only employee & spouse are covered. Dependents are excluded from the scope of the policy.
- 11. After commencement of the policy if any retiree who opts out of the scheme cannot re-join the scheme.
- 12. At the time of renewal in case any insured person under this policy opts not to be included for the renewal, then he/she will not be allowed to join the scheme on subsequent renewals.

जिसकी गवाही में दिन/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवित अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट https://nationalinsurance.nic.co.in पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्त जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमिकता निरस्त हो जाएगी। /IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this observable 105/November/2020. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website https://nationalinsurance.nic.co.in shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'

इंश्योरेन्सइंडयालिमिटिड

स्टांप इयूटी Stamp^{लमिटि} Duty: (₹ 1.00)

कृते नेशनल इन्श्योरेन्स कंपनी हो लमिटिड/ For and on behalf of National Insurance Company Limited

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

TAX INVOICE

Invoice Serial No: 30154H0C00000330 Invoice Date: 05/11/2020

Details of Supplier:

National Insurance Company Limited.,

MUMBAI DIVISION XI IInd Floor, National Insurance Building,,14, Jamshedji Tata Road,,Churchgate - 400020

27, Maharashtra State: 27AAACN9967E1Z3 GSTIN No:

Details Of Receiver: BANK OF MAHARASHTRA - RETIREES Address: 1501,LOKMANGAL,SHIVAJI NAGAR

PUNE, City: District: PUNE,

MAHARASHTRA, State:

PIN: 411005.

Maharashtra

Place Of Supply State : State Code : 27

GSTIN No: 27AACCB0774B1Z4

सैक कोड/ SAC Code	सेवा का वितरण/ कुल/Total(Descripti on of Service	छूट/ Discou	टैक्स योग्य/ मूल्य/Taxable	सीजीएसटी की राशि CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/I GST		केरला बाढ़ उपकर/Kerala Flood Cess	
3AC Code		,	nt	Value(₹)	दर/Rate	राशा∕ि Amount(₹)	दर/Rate	राशि Amount(₹)	दर/Rate	राशा∕ि Amount(₹)	राशा⁄िAmount(₹)
997139	Other non- life insurance services (excluding reinsuranc e services)	12,50,24 4	0%	12,50,244	9%	1,12,52 2	9%	1,12,52	0%	0	0
TOTAL	,	12,50,24 4		12,50,244		1,12,52 2		1,12,52 2		0	0

कुल इनवॉयस मूल्य (अंकों में)Total Invoice Value (In figures) :

₹ 14,75,288

कुल इनवॉयस मूल्य (शब्दों में)Total Invoice Value (In words) : रूपए/Rupees

Fourteen Lakh Seventy Five Thousand Two Hundred Eighty Eight

रविर्स चार्ज के अधीन टैक्स की राशा/ Amount of Tax Subject to Reverse Charge : No

E.&.O.E

कृते नेशनल इन्श्योरेन्स कंपनी लमिटिड/ For and on behalf of National Insurance Company Limited

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory