

Date: 21/12/2022

Policy Number: 00677500202200

Customer ID: 0010060442

Mr. SUNIL PRAJAPATI  
PRINCIPAL  
Sandipani Academy  
LIG 148 Sector-2 Pani ki Tanki ke Pass  
Pandit Dindayal Nagar Raipur  
Bilaspur-495551  
Chhattisgarh

**Sub: Your Group Personal Accident Policy no. Policy Number: 00677500202200**

Dear Mr. SUNIL PRAJAPATI,

Welcome to Niva Bupa Health Insurance Company Limited (formerly known as Max Bupa Health Insurance Company Limited)

We know your health is of prime importance and at Niva Bupa we are committed to providing you with world-class health insurance solutions, dedicated to helping you to protect your regular affairs by protecting your employees.

In every evaluation & subsequent proposal, we consider cost-effective & suitable employee benefits, efficient limit, ease to use, our extensive insurance experience, and our ongoing client support.

We are committed to the proposition that Insurance is a critical part of employee protection and satisfaction and therefore, to your subsequent career success. We also realise that our business ethics and our ongoing professional support services are essential in maintaining your customer loyalty, which as a professional, we know you understand. We guarantee to be readily available to assist you in answering questions and providing ongoing personal service in all your Insurance affairs. Our goal is to develop a long term, mutually beneficial relationship by protecting you in a cost effective, friendly, personal and professional manner.

We are able to provide you with services necessary to meet key objective:

- *Stability: The services, knowledge and expertise of well-known and respected Insurance company.*
- *Customer service: A well staffed dedicated unit of experts has been assembled to be an advocate for effective problem solving.*
- *Claim service: Quality effective claim management provided by a staff of experienced claim management professionals utilizing state of art computer claims processing.*

Your Customer Pack contains the following documents, which will collectively help you in understanding your policy and accessing our services:

- *Certificate of Insurance*
- *Premium Receipt*
- *Terms & conditions of the policy.*
- *Employee & dependent list covered under the Policy.*

**Niva Bupa Health Insurance Company Limited**  
**(formerly known as Max Bupa Health Insurance Company Limited)**

IRDAI Registration No. 145 | CIN: U66000DL2008PLC182918

Registered Office: C-98, Lajpat Nagar 1, Delhi-110024 | Corporate Office: 14<sup>th</sup> Floor, Capital Cyberscape  
Golf Course Extension Road Sector-59, Gurugram-122011(Haryana) | Website: [www.nivabupa.com](http://www.nivabupa.com)

Tel.:+ 91-11-30902000, Fax No.: + 91- 011-30902010

*We urge all our valued group customers to read their policy documents including benefits, inclusions and exclusions carefully. Also check their Health cards which will be helpful at the point of claim. It is the responsibility of the employer to inform all the beneficiaries about the same and ensure the group customers are aware of their health policy details.*

*Should you need additional information, please write us at [group.endorsements@nivabupa.com](mailto:group.endorsements@nivabupa.com)*

*Apart from this you can view the policy details on our dedicated Group Portal at the following link:*

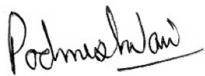
*<http://healthlink.nivabupa.com>*

*A separate individual communication on "Healthlink" would be sent on your registered email id available in our records. These communications would be with respect to "Employer" & "Employee" Login.*

*Again, thank you for choosing Niva Bupa Health Insurance Co Ltd. We appreciate the opportunity given to us to serve you and looking forward for a continued beneficial relationship.*

*Here's wishing to a healthy and happy life ahead.*

*Yours Sincerely,*

A handwritten signature in blue ink that reads "Padmesh Nair".

*Padmesh Nair  
Director-Operations & Customer Service*

*Important - Please read this document and keep in a safe place.*

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**Policy Document – Group Personal Accident  
Schedule of Insurance Certificate**

Schedule	
Issuing office	NOC - NOIDA
<b>Agent Name</b>	<b>IDBI Bank Limited</b>
<b>Agent Code</b>	<b>BNK0120001</b>
<b>Agent Contact Number</b>	<b>NA</b>
<b>Agent Landline Number</b>	<b>NA</b>
<b>Agent Address</b>	<b>NA</b>
Plan details	Individual
Policyholder's name	Sandipani Academy
Policyholder's address	LIG 148 Sector-2 Pani ki Tanki ke Pass Pandit Dindayal Nagar Raipur Bilaspur-495551 Chhattisgarh
Policy number	00677500202200
First Policy inception date	14-December-2022
Date and time of Policy commencement	14-12-2022 12:00:00 AM
Date and time of Policy expiry	13-12-2023 12:00:00 AM
Sum Assured (Corporate Floater)	0
Aggregate Limit of Liability per Event (if applicable)	30000000
Policy Period	1 Year

	Cat 1	Cat 2	Cat 3	Cat 4	Cat 5
<b>Number of Insured Persons</b>	208	-	-	-	-
Basic Benefits					
<b>Principal Sum Assured (PSA) (in Rs)</b>	10,40,00,000.00	-	-	-	-
<b>Accidental Death (Yes/No)</b>	Yes	-	-	-	-
100% of Principal Sum Assured					
<b>Accidental Permanent Total Disability (PTD) - % of PSA</b>	100%	-	-	-	-
<b>Accidental Permanent Partial Disability (PPD) (Yes/No)</b>	Yes	-	-	-	-
<b>Temporary Total Disability - Weekly Benefit (Rs)</b>	1% of PSA or Rs 5,000/- (whichever is lower)	-	-	-	-
Optional Benefits					
<b>Fixed Medical Expenses – Opted limit</b>	0	-	-	-	-
<b>Variable Medical Expenses – Option details</b>	10% of PSA or 40 % of admissible claim or Actual (whichever is lower)	-	-	-	-
<b>Education Allowance for Children – Option</b>	10% of PSA upto Maximum of Rs.200000 per child	-	-	-	-
<b>Broken Bones – Opted limit</b>	0	NA	NA	NA	NA
<b>Corporate Floater – Option details</b>	0	0	0	-	-
<b>Elimination Period (Yes/No)</b>	No	No	No	No	No

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Details of benefits opted by Primary Insured's Spouse:

	Cat 1	Cat 2	Cat 3	Cat 4	Cat 5
<b>Number of Insured Persons</b>	0	0	0	0	0
<b>Basic Benefits</b>					
<b>Principal Sum Assured (PSA)</b> (Specify as % of Primary Insured's PSA)	-	-	-	-	-
<b>Accidental Death</b> (Yes/No) 100% of Principal Sum Assured	No	No	No	No	No
<b>Accidental Permanent Total Disability (PTD) - % of PSA</b>	-	0	0	0	0
<b>Accidental Permanent Partial Disability (PPD)</b> (Yes/No)	No	No	No	No	No
<b>Optional Benefits</b>					
<b>Fixed Medical Expenses – opted limit</b>	-	-	-	-	-
<b>Variable Medical Expenses – Option details</b>	-	-	-	-	-
<b>Broken Bones – Opted limit</b>	-	-	-	-	-

Details of benefits opted by Primary Insured's Dependent children:

	Cat 1	Cat 2	Cat 3	Cat 4	Cat 5
<b>Number of Insured Persons</b>	0	0	0	0	0
<b>Basic Benefits</b>					
<b>Principal Sum Assured (PSA)</b> (Specify as % of Primary Insured's PSA)	-	-	-	-	-
<b>Accidental Death</b> (Yes/No) 100% of Principal Sum Assured	No	No	No	No	No
<b>Accidental Permanent Total Disability (PTD) - % of PSA</b>	-	0	0	0	0
<b>Accidental Permanent Partial Disability (PPD)</b> (Yes/No)	No	No	No	No	No
<b>Optional Benefits</b>					
<b>Fixed Medical Expenses – opted limit</b>	-	-	-	-	-
<b>Variable Medical Expenses – Option details</b>	-	-	-	-	-
<b>Broken Bones – Opted limit</b>	-	-	-	-	-

	Cat 1	Cat 2	Cat 3	Cat 4	Cat 5
<b>Number of Insured Persons</b>	-	-	-	-	-
<b>Basic Benefits</b>					
<b>Principal Sum Assured (PSA)</b> (Specify as % of Primary Insured's PSA)	-	-	-	-	-
<b>Accidental Death</b> (Yes/No) 100% of Principal Sum Assured	-	-	-	-	-
<b>Accidental Permanent Total Disability (PTD) - % of PSA</b>	-	-	-	-	-
<b>Accidental Permanent Partial Disability (PPD)</b> (Yes/No)	-	-	-	-	-

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Total Number of Primary Insured	208
Total Number of Dependants	0
Total Number of Insured Persons	208

Benefit	Coverage Details
Residential Accommodation and Vehicle Modification allowance	Not -Opted
Family Transportation	Not -Opted
Last Rites Expenses	Not -Opted
Any One Year loss Limit	No
Coverage for Special Conditions	NA
Waiver for Permanent Exclusion	Yes (Terrorism Covered)

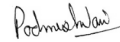
GST Details	
GSTI No.:23AAFCM7916H1ZG	SAC Code/ Type of Service : 997133 / General Insurance Services
Niva Bupa State Code : 23	Customer State Code / Customer GSTI No. : 8/ GSTINNOTREQUIRED

Premium Calculation:	
Net premium (Rs.)	47,840.00
Integrated Goods and Service Tax (18%)	8,611.20
Central Goods and Service Tax (0%)	0.00
Duties and cess (Rs.)	0.00
State/UT Goods and Service Tax (0%)	0.00
Gross premium (Rs.)	56,451.20
Gross premium (Rs.) (In words)	Rupees Fifty Six Thousand Four Hundred Fifty One and Twenty Paise Only
Renewal premium due date	14-12-2023 12:00:00 AM

Policy Issuing Office: Noida Consolidated Stamp Duty deposited on the Master policy.

According to rule 54(2) of CGST Rules 2017, policies/endorsements issued by an Insurance Company can be treated as a tax invoices and such invoices need not be serially numbered

For and on behalf of Niva Bupa Health Insurance Company Limited  
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**Location: NOIDA**  
**Date: 21-12-2022**

**Director-Operations & Customer Service**

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**Premium Receipt**

M/s Sandipani Academy  
LIG 148 Sector-2  
Pani ki Tanki ke Pass Pandit Dindoyal Nagar  
Bilaspur - 495551  
Chhattisgarh

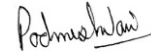
We acknowledge the receipt of payment towards the premium of the following health insurance policy:

Policy Holder's Name:	Policy Number	00677500202200	
M/s Sandipani Academy	Aggregate Sum Insured (Rs.)	Rs.104000000.00	
Commencement Date	14-12-2022	Expiry date	13-12-2023
Gross Premium(Rs.)	Rs.56,450/-		

Upon issuance of this receipt, all previously issued temporary receipts, if any, related to this policy are considered null and void.

GST Details	
GSTI No.:23AAFCM7916H1ZG	SAC Code/ Type of Service : 997133 / General Insurance Services
Niva Bupa State Code : 23	Customer State Code / Customer GSTI No. : 8/ GSTINNOTREQUIRED

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