



Baiai Allianz General Insurance Company Ltd. Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006 GROUP PERSONAL ACCIDENT POLICY SCHEDULE

UIN: IRDA/NL-HLT/BAGI/P-P/V.I/151/13-14

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc. :

497/498, 5th floor, Isana Kattima building,, Poonamallee High Road, Arumbakkam,, , , Chennai-600106 Phone No

:044-43904400

Policy No. OG-25-1501-9902-00000607 Product **GROUP PERSONAL ACCIDENT**

Period of Insurance 24-JAN-25 From 09:00:00 22-JAN-25 To 21-JAN-26 Policy Issued On

Midniaht

Co-Insurance Details Own Share: 100%

Insured Name MADHA INSTITUTE OF ENGINEERING AND TECHNOLOGY

Insured Address ERANDAMKATTALAI, , PO Area - -, SADHANANTHAPURAM, TIRUVALLUR, TAMIL NADU -

600128

Bank Details : No Details No Details

GSTIN / UIN NΑ Place of Supply/State 33 - Tamil Nadu

Code/Name

Company GST No: 33AABCB5730G1Z4 445574140/1 Invoice No:

AABCB5730G Company PAN:

Description Sum Insured (Rs) Total 663 Member Covered 3,31,50,000.00

50000 **Highest Sum Insured** Additional** Loading @ 0 % Additional Discount@ 0 % **Base Premium** 10,559.00 **Special Discount** 0 **Net Premium** 10,559.00

0.0

Terrorism** Surcharge

Stamp Duty

State GST (9%) 950.00 950.00 Central GST (9%) **Final Premium** 12.459.00

*** All Premium figures are in Rupee.

On specific request and subject to terms and conditions, record of information exchange will be made available.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year.

I/We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Scope of Cover As per the policy wording attached.

Risk Covered Unnamed Group Personal Accident. Risk Class: II Wider: Death + Permanent Total Disablement + Per-

manent Partial Disablement (Sum Insured maximum 60 times of monthly income or Rs. 50000

whichever is less).

Special Perils As per policy terms and conditions **Special Exclusions** As per policy terms and conditions

Subject to Clauses Additional Cover Cremation charges is covered up to 5000/-. Carriage of Dead body is covered up to

5000/-. Repatriation of Remains is covered up to 5000/-. Family Transportation is covered up to 5000/-. Children's Education bonus in case of Death or Permanent Total disability of proposer - Onetime payment of Rs.5,000/- each towards the cost of education of up to 2 of your dependent children who were under the age of 19 on the date you met with Accidental Bodily Injury. Students will not be enrolled on selection basis. Valid proof along with the Unique registration number of students shall be mandatorily submitted at that time of claim. Bonafide certificate from Institute specifying the student#s name is man-

datory at the time of claims.

Warranties Onus of proof lies with the insured for employment and coverage under the policy for the person on be-

half of whom the claim is made. At any point of time the total number of employees on rolls should not exceed the total number of persons declared under the policy. To furnish the total number of employees on rolls at the time of accident. Violation in number of persons covered will prejudice claim under the policy. Employment proof and Salary Certificate should be submitted at the time of claim. Proper/authentic attendance sheet to be maintained #grade wise. Policy should be issued position wise and grade wise. Policy is on all or none basis.SI should commensurate with salary Only Addition endorsement is allowed in unnamed GPA. Deletion endorsement is not allowed. The Group Manager declares that they have non-tamperable registers or records or pro- cedures to identify the member insured / covered. The registers, records or the procedures shall be subject toinspection at any time...Conti..The Group Manager shall declare the updated member count via official medium (eg. mail, letterhead, etc.) periodicallY. Incase of increase in member count the insurer shall seek additional pro-rated premium from the Group

Fax no: 020-30512246

Give a Missed Call on 8080945060, SMS 'WORRY' to 575758

Say Hi on WhatsApp us on 7507245858





Manager. Upon mutual agreement between the Insurer and the Group manager the claim settlement can be done by the Insurer either in favour of the Group Manager or the Insured Member / Nominee / Legal Heir. However, wherever it has been agreed to settle the claim in favour of the Group Manager , the Insurer must seek an undertaking from the Group Manager that confirms that the final claim settlement will be done to the Insured Member / Nominee / Legal Heir within 15 days of claim settlement to the Group Manager as per policy t&c. The employer may utilize the insurance amount as part of the overall service benefit and pass on the balance , if any to the Insured Member / Nominee / Legal Heir. student-309, 1 earning parent-309and staff-45 Age Restriction Upto 70 years

 Special Conditions
 Beneficiary will be Employee

 Comments
 As per policy terms and conditions

Bank RM Employee Code: Y

Agency Code BAG23010127 Channel Name : MAGRM

Agency Name : A Sudhamini

Contact No: 08220297938/09600052436

Email - SAIINSURANCE21@GMAIL.COM

Premium Collection Details [Receipt No/Collection No/Amount] 1501-01583605 / 436614464 / Rs. 12,459.00 ,

*** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque

*** This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific warranty or condition attached



For & On Behalf of Bajaj Allianz General Insurance Company Ltd.

Authorized Signatory





This document is digitally signed, hence counter signature / stamp is not required

Regd Office: Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs. 2.50/- paid for insurance policy stamps vide Order No. CSD/36/2024-25/2886 dated 01-AUG-24 of General Stamp Office, Mumbail India

Principal Location: 497/498, 5th floor, Isana Kattima building, Poonamallee High Road, Arumbakkam, Chennai - 600106 PH:044-43904400 | Services Accounting Code: 997133 - Accident and health insurance services. No reverse charge is payable on these services.

In case of any claim, please contact our 24 Hour Call centre at 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'Bagichelp@bajajallianz.co.in'.

It is mandatory to keep your policy with updated contact (Mobile No., Email ID and PAN Card) and bank account details, to process any of your service requests faster and hassle-free in future.

You can update the same through Caringly yours App {Link}, WhatsApp Service { Say Hi on WhatsApp +91 75072 45858}, Contact our 24-Hour Call Center at 1800-209-5858, 1800-102-5858, Give a Missed Call on 8080945060, SMS WORRY to 575758, Email bagichelp@bajajallianz.co.in, website {http://www.bajajallianz.com}, contact your agent or nearest

436614464/-/23010127/NA/-

Prefix your area code if you are calling from a Mobile Device.

A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

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Bajaj Allianz General Insurance Company Ltd.

497/498, 5th floor, Isana Kattima building, Poonamallee High Road, Arumbakkam, Chennai - 600106 Contact No: O44-43904400

RECEIPT

Receipt Number 1501-01583605

Receipt Date 22/01/2025
Business Channel MAGRM

Received with thanks from MADHA INSTITUTE OF ENGINEERING AND TECHNOLOGY (Customer ID: 458201173) a total sum of Rupees Twelve Thousand Four Hundred Fifty Nine Only by,

Instrument Type	Instrument No.	Instrument Date	Bank Name	Branch Name	Amount
Online Pay- ment	108026885	22/01/2025	NA	NA	12,459

Total Amount

Rs. 12,459.00

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.

Authorised Signatory

Regd.Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006

^{*} Cheque/DD/PO receipt is valid subject to realisation of the instrument.