

Star Health and Allied Insurance Compa

TAILOR MADE GROUP PERSONAL ACCIDENT INSURANCE POL

Policy No.	:	P/181114/02/2019/000490	Previous Policy No.	4	ICE POLICY SCHEDULE
Proposer's Code		10387515	GSTIN	-	: 33AAJCS4517L1Z5 6255
Proposer's Name		Government Polytechnic College -			: 33AAJCS4517L1Z5
Address		Usilampatti	SAC Code		: 997133/Accident and Health Insurance Services
		Utthapanayakkanur USILAMPATTI USILAMPATTI Usilampatti,Madurai,Tamil Nadu- 625532	Issuing Office Code	:	: 181114
			Issuing Office Name		: Branch Office - Nagercoil
			Address		
				: No: 989, 1st Floor, "Malayil Arcade", K. P. Road,	
					Nagercoil - 629 001.
Phone No	:	NIL/9445311127/	Phone No		0.000
E-mail Id	: GPTCUSILAI@YAHOO.COM E-mail Id		:	04652-234211	
Proposer GSTIN	:	-	Place of Supply	:	nagercoil@starhealth.in
Receipt No		1079004502		:	
Receipt Date.	:	24/12/2018	Fulfiller Code	:	SH21383
Premium :Rs.28800	/-		Intermediary Code	:	BA0000211928
CGST @9%: 2,592	/-	SGST / UTGST @9% : 2,592 /-	Name	:	Ms.B.SUNITHA
Stamp Duty :Rs.5/-		Total Premium :Rs.33984 /-			WIS.D.SUNTTHA
			Phone No	:	/8608902567
Total Bromium !	,		E-mail Id	:	NIL
Total Premium In V		Time Thous	and Nine Hundred Eighty Fou	ır (Only
PERIOD OF INSUR	AN	CE From : 24/12/2018			night Of 23/12/2019

RISK COVERAGE DETAILS

Accident Care Group - Un Named

No Of Persons Covered

Total Sum Insured :RS.63900000 /-

Total Sum Insured In Words: Rupees Six Crores Thirty-Nine Lakhs Only

This Insurance is subjected to exclusion of all pre-existing illness/disabilities as per the printed Policy conditions.

SPECIAL EXCLUSION: Any claims relating to nuclear, chemical and biological terrorism is excluded from the scope of the Policy.

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Condition Precedent: In the event of any claim under the policy or intimation should be given to the company immediately, through toll free no: 1800 425 2255 / 1800 102 4477, 044 2826 3300 (chargeable), or email: support @ starhealth.in or fax - 1800 425 5522.

Special Conditions:

- Coverage not exceeding Rs.10,000/- per person for Hospitalization Medical Expenses incurred as inpatient for grievous injuries arising out of accidents only.
- 2 Unnamed Policy. Sum Insured per person Rs. 1,00,000/- against the coverage of Accidental Death only

It is hereby warranted that

- The College has covered all the students of the college with out any exception.
- 2. The college shall allow for Inspection of records by the insurer or their authorized representatives in the
- 3. The college undertakes the responsibilities to keep all the students informed about the coverage as well as the premium applicable per student as per the policy.
- 4. In the event of a claim relating to the student, the claim amount will be payable to the Father or Mother of the student (as the case may be) as certified by the Head of the School / College based on the records of
- 3 It is hereby warranted that
 - The College has covered all the staffs of the college with out any exception.
 - 2. The college shall allow for Inspection of records by the insurer or their authorized representatives in the

Entered by SH4107 Approved by SH43829 Place

For Star Health and Allied Insurance Company Ltd.

IRDAI Regn. No 129

Receipt

Date

Corporate Identity Number U66010TN2005PLC056649 Email ID : info@starhealth.in

: 25/12/2018

Authorised Signatory