



PROVISIONAL POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE
NEW INDIA FLEXI FLOATER GRP MD

Customer ID	: PO21439717		
Insured's Details		Issuing Office Details	
Insured Name	: HINDUSTAN INSECTICIDES LIMITED	Office Code	: CONNAUGHT HOUSE (310400)
Address	: SCOPE COMPLEX,CORE-6, 2ND FLOOR,7 LODHI ROAD,NEW DELHI NEW DELHI ,DELHI, 110003	Address	: E-9, CONNAUGHT HOUSE,IIND FLOOR, CONNAUGHT CIRCUS ,110001 DELHI, 110001.
Phone No	:	Phone No	: 01123416030 / 01123415157
E-mail/Fax	: hillheadoffice@gmail.com, /	E-mail/Fax	: nia.310400@newindia.co.in /
PAN No	: AAACH0905Q	S.Tax Regn. No	:

Policy Details			
Policy Number	: 31040034190400000025	Business Source Code	
Period of Insurance	: From: 01/06/2019 12:00:01 AMTo: 31/05/2020 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent	: ARVIND KUMAR - (2D10673373)
Date of Proposal	: 01-Jun-19	Agent/Bancassurance	:
Prev. Policy no.	:	Phone No	: NA / 9811262592
Client Type	: Corporate	E-mail/Fax	: / / /

Premium (₹)	Service Tax (₹)	Total (₹)	Total:(₹ in words)	Receipt No. & Date
3167267	570108	3737375	RUPEES THIRTY-SEVEN LAC THIRTY-SEVEN THOUSAND THREE HUNDRED SEVENTY-FIVE ONLY	31040081190000001581 - 31/05/19

Policy Sum Insured	: 85000000
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Total Premium(excluding Terrorism)	: 3167267
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Terrorism Premium(if applicable)	: 0
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Other Policy Details	: 850 RETIRED EMPLOYEES AND THEIR SPOUSE FAMILY FLOATER (1+1)PRE-EXISTING DISEASES COVERED 30 DAYS AND 1/2/4 YRS EXCLUSION WAIVED.
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Any Policy Number Reference	:
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Location Details	: ALL OVER INDIA BASIS DETAILS OF EMPLOYEES AND SPOUSE AS PER LIST.
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Add on Cover Details	: ROOM RENT @ 1% OF SUM INSURED AND ICU CHARGES @2% OF SUM INSURED.SERVICING TPA PARAMOUNT HEALTH SERVICE P LTD
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Excess for Provisional Policy	: .
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Special Conditions	: .
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In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 31st day of May,2019.

Signature Not Verified

Digitally signed by Srinivasan Valdeswaran
Date: 2019.05.31

Policy No. : 31040034190400000025 Document generated by 23353 at 31/05/2019 14:42:11 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



For and on behalf of
The New India Assurance Company
Limited

Duly Constituted Attorney(s)

Mudrank _____ Dt. _____ consolidated Stamp Fees Paid by Pay Order Number _____ vide receipt
number _____ dt. _____

Stamp Duty under the Policy is ₹1/-.

Tax Invoice No : 31040019P0001837

IRDA Registration Number: 190