



**6.3.1** The institution has performance appraisal system. Effective welfare measures for teaching and non-teaching staff and avenues for career development/progression

## LIST OF SUPPORTING DOCUMENTS

### 1. Performance Appraisal System

Sr. No.	Document
01	Performance Appraisal Form
02	Performance Appraisal Policy

### 2. Monetary Welfare Measures

Sr. No.	Document
01	Group (Term- Insurance Schemes) for employees
02	Provident Fund

### 3. Non-Monetary Welfare Measures

Sr. No.	Document
01	Maternity Leaves and nursing breaks
02	Trust sponsored Staff picnic
03	Uniform for Teaching and Non-teaching staff
04	Recognition for Special Achievements
05	Initiatives for Health- Yoga
06	Festival Celebrations
07	Women's day Celebration
08	Welfare Policy
09	Non-Monetary Welfare Services



## Performance Appraisal System

Sr. No.	Document
01	Performance Appraisal Form
02	Performance Appraisal Policy



## SELF-APPRAISAL FORM

Name of Faculty Member	
Designation	
Department	<b>Management</b>
Appraisal Period and Year	<b>1 st April 2022 to 31st March 2023</b>

### Performance Appraisal Form (Academic Staff)

#### Employee Details:

- Name:
- Position:
- Review Period: (1<sup>st</sup> April 2022 - 31<sup>st</sup> March 2023)

#### Instructions:

- Rate each subpoint using a scale (e.g., Exceeds Expectations = 5, Meets Expectations = 3, Needs Improvement = 1).
- Enter the score in the designated column.
- Multiply the score by the weightage to get the weighted score.
- Sum the weighted scores from each section to get the overall section score.

#### Part A: Teaching Effectiveness (Weightage: 40%)

Subpoint	Description	Score (1-5)	Weightage (%)	Weighted Score
<b>Course Delivery (20%)</b>				
* Clarity and organization of lectures	Presents complex information in a clear and well-structured manner.		5%	
* Engagement and interaction with students	Uses effective teaching methods to promote active learning and student participation.		5%	
* Effectiveness of teaching methods	Employs a variety of teaching methods (lectures, discussions, activities) to cater to different learning styles.		5%	
* Use of technology in teaching	Integrates technology effectively to enhance the teaching and learning experience.		5%	
<b>Assessment and Feedback (20%)</b>				
* Design and quality of assessments	Assessments are well-designed, aligned with course learning outcomes, and measure student learning effectively.		5%	
* Timeliness and fairness in grading	Grades are submitted promptly and adhere to established grading rubrics.		5%	
* Effectiveness of feedback provided to students	Provides constructive and timely feedback that helps students improve their learning.		5%	
* Student satisfaction with assessment practices	Students perceive assessments to be fair and helpful in their learning.		5%	

**Part B: Research and Development (Weightage: 30%)**

Subpoint	Description	Score (1-5)	Weightage (%)	Weighted Score
<b>Research Productivity (20%)</b>				
* Number and quality of publications	Publishes high-quality research articles in peer-reviewed journals and conference proceedings.		10%	
* Contribution to research grants	Secures research funding through competitive grants.		5%	
* Presentations at conferences and workshops	Regularly presents research findings at conferences and workshops.		5%	
<b>Research Supervision (10%)</b>				
* Effectiveness in guiding and supporting research students	Provides effective guidance, mentorship, and support to research students.		5%	
* Contribution to student publications	Actively contributes to the publication of research conducted with students.		5%	

### Part C: Service and Professional Development (Weightage: 20%)

Subpoint	Description	Score (1-5)	Weightage (%)	Weighted Score
University Service (10%)				
* Participation in departmental and university committees	Actively participates in departmental and university committees and contributes meaningfully to decision-making.		5%	
* Contributions to curriculum development	Participates in curriculum development initiatives and makes valuable contributions.		5%	
Professional Development (10%)				
* Participation in workshops and conferences	Regularly attends workshops and conferences to stay current in the field.		5%	
* Ongoing learning and development activities	Engages in ongoing learning activities (e.g., online courses, professional reading) to develop new knowledge and skills.		5%	

### Part D: Additional Information

- **Portfolio (5%):**

List any teaching materials, publications, or presentations developed during the review period.

- **Extraordinary Contributions (5%):**

Describe any significant contributions beyond the core responsibilities.

### Overall Performance Assessment:

Based on the scores and comments above, provide a comprehensive evaluation of the employee's performance. Include strengths, weaknesses, and overall effectiveness.

### Development Areas:

Identify specific areas for improvement based on the appraisal and recommend specific actions or resources to support the employee's development.

Date:

Place:

Faculty Signature:

  
Director  
Sai Balaji Education Society's  
Sai Balaji International Institute  
of Management Sciences  
Pune



Dr. L.K. Tripathy  
Director



SAIBALAJI EDUCATIONAL SOCIETY  
SAIBALAJI INTERNATIONAL INSTITUTE OF MANAGEMENT SCIENCES **SBIIMS**

SBIIMS PUNE

Affiliated to Savitribai Phule Pune University  
Approved by AICTE, Ministry of HRD, Govt. of India



**SAIBALAJI INTERNATIONAL INSTITUTE OF MANAGEMENT SCIENCES**

## **ADMINISTRATION HANDBOOK**



**SAI BALAJI EDUCATION SOCIETY**

**SAIBALAJI INTERNATIONAL INSTITUTE OF MANAGEMENT SCIENCES**

It Park, Survey No # 54 (1A/1-1), Nere, Marunji Rd, near Hinjewadi, Pune, Maharashtra 411033

# **SAI BALAJI EDUCATION SOCIETY'S**

## **SAIBALAJI INTERNATIONAL INSTITUTE OF MANAGEMENT SCIENCES**

<b>1</b>	<b>Staff Performance and Development Policy</b>
<b>2</b>	<b>Substitute Appointments</b>
<b>3</b>	<b>Performance Appraisal</b>
<b>4</b>	<b>Objectives of Performance Appraisal</b>
<b>5</b>	<b>Policy Statement</b>
<b>6</b>	<b>Faculty Evaluation Process</b>
<b>7</b>	<b>Self-Appraisal</b>
<b>8</b>	<b>Head Academics/Director Appraisal</b>
<b>9</b>	<b>Student Feedback</b>
<b>10</b>	<b>Examination Results</b>
<b>11</b>	<b>Confidentiality</b>
<b>12</b>	<b>Faculty Recognition</b>



# **SAI BALAJI EDUCATION SOCIETY'S**

## **SAIBALAJI INTERNATIONAL INSTITUTE OF MANAGEMENT SCIENCES**

### **Staff Performance and Development Policy**

#### **Substitute Appointments**

The Head of Academics, in consultation with the Director, will manage substitute appointments. Priority will be given to qualified candidates from the waiting list, when available.

#### **Performance Appraisal**

This policy establishes a framework for evaluating, improving, and documenting the performance of all full-time staff members. Annual reviews will be conducted at the end of each academic year, aligning with university norms.

#### **Objectives of Performance Appraisal**

- Enhance educators' understanding of their roles and how to meet student expectations.
- Elevate classroom academic standards to effectively guide student development.
- Identify and eliminate any ineffective practices.
- Foster a sense of responsibility and dedication to teaching among coordinators.
- Provide opportunities for self-assessment of strengths, weaknesses, and overall performance.
- Gather student feedback on courses and instruction.
- Offer performance evaluations from Head Academics/Director for professional growth.
- Faculty Development

#### **Policy Statement**

SBIIMS encourages faculty to continuously refine their skills through participation in various training programs aligned with current industry trends. The quality of education relies heavily on the qualifications and capabilities of the faculty. Recognizing their crucial role in shaping student outcomes, continuous professional development is essential.

#### **Faculty Evaluation Process**

A comprehensive faculty evaluation system is implemented at SBIIMS. This system includes the following components:

## **Self-Appraisal**

Faculty members will self-assess on various aspects using a structured format. These aspects include teaching methodologies, quality of assessments, participation in professional development activities, contributions to staff and student programs, academic achievements, research publications, and involvement in extracurricular activities.

## **Head Academics/Director Appraisal**

Following self-appraisal and student feedback, the Head Academics/Director will conduct an appraisal based on pre-determined criteria.

## **Student Feedback**

Students will be encouraged to provide honest and objective evaluations of faculty members based on established criteria. This feedback will provide valuable insights into student perceptions of teaching effectiveness, allowing faculty to identify areas for improvement and better understand student expectations. Evaluation criteria will encompass course content coverage, subject depth, presentation clarity, utilization of teaching aids, classroom management, punctuality, teaching enthusiasm, communication skills, interaction skills, assessment quality, fairness in grading, and discussion of previous exams. Students will provide ratings on a numerical scale. The evaluation process will be conducted with strict confidentiality.

## **Examination Results**

Course examination results will be analyzed to gauge the effectiveness of instruction. This data, along with the other components, will be used to provide comprehensive feedback to faculty members. They will receive targeted support to enhance weaker areas, including mentorship from senior faculty for technical skills and communication skills training. This support aims to develop inspiring and motivating educators.

## **Confidentiality**

Those overseeing and evaluating the faculty development process will maintain strict confidentiality throughout.

## **Faculty Recognition**

Faculty members will receive appropriate recognition based on student feedback analysis and their overall performance.

  
Director  
Sai Balaji Education Society's  
Sai Balaji International Institute  
of Management Sciences  
Pune



Dr. L.K. Tripathy  
Director



## Monetary Welfare Measures

<b>Sr. No.</b>	<b>Document</b>
01	Group (Term- Insurance Schemes) for employees
02	Provident Fund



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## **Staff Insurance Policy 2019-2020**

**Policy Certificate - Group Care**

SAI BALAJI EDU SOCIETY  
SURVEY NO 54  
NEAR HINJEWADI IT PARK  
NEAR DUTTAWADI  
PUNE-411033  
MAHARASHTRA  
GSTN : NA  
STATE CODE : 27

Policy No	I6022922
Name of Policyholder	SAI BALAJI EDU SOCIETY
Cover type	Main Floater
Policy Period - Start Date	00:00 hrs 01-Oct-2019
Policy Period - End Date	Midnight 30-Sep-2020

**Premium Details**

Premium	CGST	IGST	SGST	UGST	Total Premium	Premium Payment Mode
₹ 502,845	₹ 45254.41	₹ 0	₹ 45254.41	₹ 0	₹ 593,354	ANNUAL PREMIUM

**Details of Insured**

S No.	Particulars	Nos.
1	Primary Insured Members	87
2	Dependents	177
	Total	264

For details of each insured refer to “Annexure A”

**Details of Cover**

S No.	Particulars	Amount
1	Total Sum Insured	₹ 25,200,000

**Intermediary Details**

Name	Code	Contact Number
ADITYA BIRLA	20005097	18002707000

## Benefits

S. No.	Particulars	Details
1	In-patient Care	Sum insured as per Graded

### Room Rent

Sum Insured	Maximum eligibility for Normal Hospitalization	Maximum eligibility for ICU Hospitalization
Rs. 200000	1 % of Sum Insured per day	2 % of Sum Insured per day
Rs. 400000	1 % of Sum Insured per day	2 % of Sum Insured per day

If the Insured Member is admitted in a room where the room rent incurred is higher than the room rent limit specified above, then the Insured Member shall bear the ratable proportion of the total Medical Expenses in the proportion of the room rent actually incurred-room rent limit/room rent actually incurred.

**Day Care Treatment : List of Day Care procedure attached as “Annexure A under Know your policy Better”  
List of Expenses Generally Excluded (Non-Medical) in Hospital Indemnity Policy "Annexure B under Know your policy Better"**

### Details of Benefits and Optional Extensions

1. Policy type : **Non selective**
2. Family Structure : **Self + Spouse + 2 Dependent children**
3. Age Limit: Child age up to **25 years** and Employee/Spouse Age up **to 80 years**.

### Waiting Period

1. Pre-existing diseases are **covered** for existing members and new joinees.
2. 30 Days Wait Period condition is **waived** for existing members and new joinees.
3. First & Second year exclusion condition for specific diseases is **waived** for all Insured Members.

### Pre & Post Hospitalization

1. Pre & Post Hospitalization is covered for **30 days and 60 days** respectively.

### Other Benefits

1. Ambulance charges payable up to a maximum amount of Rs. 1,000/- per claim.
2. Claim for lasik treatment - if power of eye is above +/- 7.5, is payable.
3. **New Born Baby covered** from day one within family floater Sum Insured applicable to the Employee.

Note: Claims whether Cashless or Reimbursement pertaining to any treatment taken in Non-Preferred hospitals will not be payable.

Please refer below link to access the latest list of such hospitals subjected to change from time to time

<https://www.religarehealthinsurance.com/non-preferred-hospital-list.html>

### Premium per life Excluding tax:

Age/SI	200000	400000
0-35	1254.95	1581.22
36-45	1674.32	2112
46-55	3221.32	4073.6

56-65	5660.39	7200.22
66-70	11608.84	14947.94
71-75	12095.86	15933.91
76-80	13268.84	17496.02

#### Other Term and Conditions

1. Mid-term increase in Sum insured due to change in level of the employee is allowed.
2. Dependents are to be declared at the time of inception of the policy if policy structure is with dependents.
3. No mid-term inclusion of dependents allowed except for spouse after marriage and child by birth if policy structure is with dependents.
4. Psychiatric ailments/treatment is not covered under the policy.
5. All additions and deletions will be done on a pro rata basis unless otherwise agreed.
6. The Insured must inform of new additions or deletions to the company within a reasonable time but not later than 30 days.
7. Domiciliary Hospitalization is specifically excluded.
8. Individuals cannot be covered as an employee and dependent under the same policy, nor may children or parents will be covered by both under the same policy.
9. Claim payment shall be done in favor of customer (employee)/Nominee
10. List of hospitals where cashless can be availed is also available on our website. The company however reserves the right to include/exclude any hospital from this list. However if an insured has already availed a cashless from a hospital which is later on delisted by the company, in such case the company will continue to provide cashless to that insured for the same treatment
11. Physical - Health cards will be provided
12. Following charges levied by hospitals will not be payable under the policy:-
  - Admission charge / Surcharge / Service charges / miscellaneous charges / Registration fee / Admission Fee / Other non- medical
13. Existing groups may not split into multiple groups to obtain multiple benefit levels.
14. Excluding a class within a group from coverage is not permitted
15. Any hospitalization to undergo contraception is excluded
16. Lasik Surgery, Septoplasty for cosmetic purpose shall be excluded for scope of policy, Infertility & related ailments including male sterility, treatment on trial /experimental basis; expenses on fitting of prosthesis; any device /instrument/contributing machine/replacing the functions of an organ; Holter Monitoring are outside the scope of this policy
17. 50% co-pay For cyberknife treatment/Robotic Surgery/Bio-absorbable Stent/FAMETO Laser Suregry/Toric lens/KT Laser Prostate
18. No Continuity benefit would be offered from Group (GMC) to Individual (Retail) or proposal received from members covered under this Group Policy for conversion to Retail Plan vide \*Portability guidelines shall be dealt with as per laid down guidelines.
19. Treatment related to genetic disorders is not covered
20. Ineligible employees include: contractors; temporary, seasonal, substitute, uncompensated employees; volunteers, silent partners, shareholders or investors only; owners, officers or managing members who are not active, permanent, full-time employees
21. Policy not covered injectables like lucentis/avastin/ ramicade and similar injections as they are OPD procedures unless specifically mentioned.
22. Treatment of mental retardation, arrested or incomplete development of mind of a person, subnormal intelligence, cerebral palsy, cretinism, Mongolism, mental intellectual disability, Parkinson's disease, Alzheimer's disease and Dementia will not be covered under the policy.
23. Definition - Mental Illness means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behavior, capacity to recognize, reality or ability to meet the ordinary demands of life, mental conditions associated with the abuse of alcohol and drugs, but does not include mental retardation which is a condition of arrested or incomplete development of mind of a person, specially characterized by sub normality of intelligence.
24. Infertility & related ailments including male sterility, treatment on trial /experimental basis; expenses on fitting of prosthesis (any device /instrument/contributing machine/replacing the functions of an organ) holter monitoring are outside the scope of this policy.
25. The Insured must inform of new additions within a reasonable time but not later than 30 days from the date of the joining the organization. On exit of employees, deletion of employees should be informed in writing failing which the liability incurred on claims of

such employees after their exit, would be of the employer.

26. Subject otherwise to terms, conditions and exclusions of Group Care Policy terms and Conditions.

Claims Servicing Team

Name of Service	Address	Phone	Fax	Email
Religare Health	Vipul Tech Square, Tower C, 3rd Floor, Sector 43, Golf Course	1800-102-	1800-200-	Claims@religare.
Insurance Co Ltd	Road Gurgaon - 122009	4488	6677	com

For **Religare Health Insurance Company Limited**



Authorized Signatory

Date of Issue : 13-Nov-2019

Place of Issue : Gurgaon, Haryana

Registered office address: Religare Health Insurance Company Limited, 5th Floor, 19 Chawla House, Nehru Place, New Delhi - 110019

Service Branch : RHICL, Cts No-364, 1st Floor, Tejal Society, Gokhale Road Model Colony, Above Agarwal Packaging Pvt. Ltd. Shivajinagar, Pune, Maharashtra - 411016 Branch Contact No. : 1800-102-4488

Correspondence Address: Religare Health Insurance Company Limited

Unit no 604 - 607, 6th Floor, Tower C, Unitech Cyber Park, Sector 39, Gurgaon - 122001.(HARYANA)

Call us : 1800-102-4488 Fax : 1800-200-6677

Website : [www.religarehealthinsurance.com](http://www.religarehealthinsurance.com) E-mail : [customerfirst@religarehealthinsurance.com](mailto:customerfirst@religarehealthinsurance.com)

Consolidated Stamp Duty paid vide E-Challan GRN no. 57561762 dated 24 Sep 2019, RCM Applicability- N/A

SAC: 997133 and Description of Service: Accident and Health Insurance Services State GSTIN No.: 27AADCR6281N1ZS

IRDA Registration Number - 148

UIN : IRDA/NL-HLT/RHI/P-H/V.I/254/13-14 CIN – U66000DL2007PLC161503

Note:

\*In case premium is paid (partly/fully) by the Insured Member, the same shall be eligible for deduction u/s 80D of Income tax act 1961





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## **Staff Insurance Policy 2021-2022**

**Star Group Health Insurance**  
**Unique id : SHAHLGP21214V022021**  
**Policy Schedule**

<b>Policy No.</b> : P/151100/01/2022/000113	<b>Previous Policy No.</b> : P/151100/01/2021/000124
Proposer's Code : 18367674	GSTIN : 27AAJCS4517L1ZY
Proposer's Name : SAI BALAJI EDU. SOCIETY	SAC Code : 997133/Accident and Health Insurance Services
Address : S.NO-54/1/A/1, DUTTAWADI NERE TAL-MULSHI DIST-PUNE, NERE PUNE Nere,Pune,Maharashtra-412206	Issuing Office Code : 151100
Phone No : -/9850995879/-	Issue Office Name : Area office - Pune
Email id : accounts@saibalaji.org	Address : 3rd floor, Millennium Tower Opp. Kotak Mahindra Bank, Bhandarkar Road
Proposer GSTIN : -	Phone No : 020-25510363/65603966/67/68
Collection No : 1059000178	Email id : pune.aptroad@starhealth.in
Collection Date : 30/09/2021	Place of Supply : -
Premium : Rs. 5,67,796	<b>Intermediary Code : LC0000000633</b>
CGST @9% : 51,102 /- SGST/UTGST@9%: 51,102 /-	<b>Name : M/S.INTERLINK INSURANCE AND REINSURANCE BROKING PRIVATE LIMITED</b>
Stamp Duty : Re. 1	<b>Phone : 022-67340000/7045669111</b>
Total Premium : Rs. 6,70,000	<b>Email id : direct.dept@interlinkre.com</b>

Total Premium in words	: Indian Rupees Six Lakhs Seventy Thousand Only
Period Of Insurance From	: 01/10/2021 00:00 Hrs To Midnight Of : 30/09/2022 23:59:59
<b>Co-insurance</b>	

**Risk Coverage Details**

No. of Employees / Members Covered	76
No. of Dependents Covered	158
Total No. of Persons covered	234
Sum Insured Slab	Rs. Various Sum Insured as per list attached
Total Sum Insured	Rs. 2,26,00,000/- only
Total Sum Insured (in words)	Indian Rupees Two Crores Twenty-Six Lakhs Only

**Extensions Offered**

30 days waiting Period	Exclusion no.1 appearing in the policy clause stands deleted
------------------------	--

Entered by : SH27125  
Approved by : SH35670  
Place : PUNE  
Date : 08/10/2021

For and on behalf of  
Star Health and Allied Insurance Company Ltd.

  
Authorised Signatory  
Please see overleaf

First Year Exclusion	Exclusion no.2 appearing in the policy clause stands deleted
First Two Year Exclusion	Exclusion no.3 appearing in the policy clause stands deleted
Pre-existing Diseases Exclusion	Exclusion no.4 appearing in the policy clause stands deleted
New Born Baby cover	New born baby is covered from day one up to the end of the policy period provided the mother is covered under the policy up to the extent provided in the special conditions.

### Special Conditions

Family Definition	Family Floater(Employee, Spouse and Children)
Room Rent limits including Boarding, Nursing Charges, etc,	<p>Restricted to 1% of Sum Insured for Normal and 2% of Sum Insured for ICU.</p> <p>If the Insured occupies a room with a room rent limit other than his eligibility as per the insurance policy, all the other charges shall be limited to the charges applicable for the eligible room rent or actual, whichever is lower.</p> <p>Treatment in our network hospitals only, However in the case of Medical Emergencies &amp; Accidents, treatment can be taken in other Hospitals. In all cases immediate intimation shall be given to our Call Center within 24 hours of Hospitalization.</p>
Day 1 cover for New born baby coverage limit	The benefit payable hereunder shall be up to full floater sum insured.
Pre & Post Hospitalisation limits	- Pre Hospitalization - 30 Days - Post Hospitalization - 60 Days
Ambulance Expenses limits	Emergency ambulance charges up-to a sum of Rs.2500/- per clai
Sub Limits	Sublimits only for Cataract Rs.20,000/- per eye.
Addition / Deletion of Employees & Dependents	<p>After the inception of the Policy , NO midterm inclusion of any employee &amp; dependents unless he is a new joinee and dependents of the already insured employee unless they are newly married spouse and new born child (only after completion of 5 months of age) and such inclusion is also subject to payment of additional premium on pro rata basis. For newly joined employees, the Insured shall provide the date of joining &amp; for inclusion of dependents of the already insured employees, the Insured should provide the date of marriage for newly married spouse &amp; date of birth for newly born child.</p> <p>Insured will be allowed a window period of 30 days from the policy Inception date to review the employee list covered under the policy . All Addition / deletion / Correction of the persons to be done subject to additional premium . if there is a change in the group size.</p>

Entered by : SH27125  
 Approved by : SH35670  
 Place : PUNE  
 Date : 08/10/2021

For and on behalf of  
 Star Health and Allied Insurance Company Ltd.

  
 Authorised Signatory  
 Please see overleaf

The coverage under the policy in respect of the insured persons will cease once they cease to be an employee/ member of the Insured or on the expiry of the policy, whichever is earlier. In respect of deletions, refund will be effected on prorata basis from the date of deletion of the employee under the policy - subject to NO claim for the employee or the family members, for which the Insured shall provide date of relieving of the employee

We agree for providing cover for additions from the date of joining of the new employee by charging prorata premium from the date of joining till the expiry of the policy, subject to maintenance of free and adequate balance under Cash Deposit maintained by the Insured with us or the coverage will be effective from the date of payment of premium.

The Insured shall submit of list of additions and deletions on monthly basis to reach us at the latest by the 10th of subsequent month.

The Cover for Children is only for dependent children. In the case of female children, the cover will cease once they become earning member or on getting married. In the case of dependent Male Children, the cover will cease once they become earning member

#### Other conditions

We shall issue photo ID cards in respect of all the covered persons and we require the passport size/stamp size photo for the same.

AYUSH Treatment: Expenses incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a Government Hospital or in any institute recognized by the government and/or accredited by the Quality Council of India/National Accreditation Board on Health up to 25% of the sum insured subject to a maximum of Rs.25,000/- per policy period.

All Day Care Procedures covered

Any hospitalisation expenses taken in our excluded Hospitals is not admissible. For detailed list on on the excluded service providers kindly visit our website

Dependent Child means a child (natural or legally adopted) who is financially dependent and does not have his or her independent source of income and not over 30 years

Claim for lasik treatment - if power of eye is above +/- 7.5, is payable

Internal Congenital Disease Covered

Terrorism Covered

Dental / Vision Covered in case of accident only.

Entered by : SH27125  
 Approved by : SH35670  
 Place : PUNE  
 Date : 08/10/2021

For and on behalf of  
 Star Health and Allied Insurance Company Ltd.



Authorised Signatory  
 Please see overleaf

	<p>3rd &amp; 4th Child Coverage In case of Twins and Triplets</p> <p>Psychiatric ailments covered Rs.30,000/- on IPD basis</p> <p>50% co-pay Cyber knife treatment/Robotic Surgery/Bio-absorbable Stent/FEMETO Laser Surgery/Toric Lens/KT Laser Prostat</p>
Other conditions	<p>The insured shall pay the second installment premium of Rs.2,83,898/- plus applicable Service Tax on 16/10/2021 or when the incurred claims on already paid premium (excluding S.Tax) reaches 100%, whichever is earlier, failing which policy will cease to operate</p> <p>All Other Terms &amp; Conditions Subject to printed Policy (Star Group Health Insurance Policy) Clauses attached</p>
<p>The coverage under the policy in respect of the insured persons will cease once they cease to be an employee/ member of the Insured or on the expiry of the policy, whichever is earlier. In respect of deletions, refund will be effected on prorata basis from the date of deletion of the employee under the policy - subject to NO claim for the employee or the family members, for which the Insured shall provide date of relieving of the employee.</p>	
<p>Claims will be settled through Inhouse claims team.</p>	

**Sector Classification :**

Rural		
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**Renewability:** In the event of the group policy being discontinued or not renewed or when the members of the group leave the group on account of resignation/retirement/termination or otherwise, the following provision shall apply.

**The cover for the persons covered earlier under the group policy will be granted only as per standard retail policies. However, in respect of persons who have been covered continuously for a period of one year under the group policy with our Company, we shall waive the 30 days waiting period and First year exclusions. In respect of persons who have been covered continuously for a period of two years under the group policy with our Company, we shall waive the 30 days waiting period, First year exclusions and First two year exclusions.**

**In respect of persons who have been continuously covered for a period a four years under the group policy with our Company, we shall grant cover for Pre Existing diseases also.**

**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 or 1800 102 4477, 044 2826 3300 (chargeable), or email: support@starhealth.in or fax - 1800 425 5522.

STAR value added unique services : Web enabled service for Policy details and health tips  
Inhouse Cashless facility for treatment at network hospitals across india.  
24\*7 customer care center  
Free General Physician advice

Entered by : SH27125  
Approved by : SH35670  
Place : PUNE  
Date : 08/10/2021

For and on behalf of  
Star Health and Allied Insurance Company Ltd.



Authorised Signatory  
Please see overleaf

P/151100/01/2022/000113

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

The insurance under this policy is subject to conditions, clauses, warranties, endorsements as per forms attached.

### INSTALLMENT PREMIUM TABLE

Sr.No.	Installment Due Dt.	Premium Amount (Rs)	GST Amount (Rs)	Total Installment Premium Amount (Rs)
1	On Or Before 30-SEP-21	0	0	0
2	On Or Before 16-OCT-21	0	0	0
<b>Total :</b>		<b>0</b>	<b>0</b>	<b>0</b>

Entered by : SH27125  
Approved by : SH35670  
Place : PUNE  
Date : 08/10/2021

For and on behalf of  
Star Health and Allied Insurance Company Ltd.

  
Authorised Signatory  
Please see overleaf

## INSURED PERSON DETAILS :

No of Persons Covered : 234

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
1	Mr.Misharilal R Mundada	Employee	05/02/1977	44	7	Male	183676742200000200	1	Clerical/Supervisory And Related Workers	400000	0	
2	Mr.Vijay Nimbalkar	Employee	27/01/1969	52	8	Male	183676742200000300	2	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Karuna V . Nimbalkar	Spouse	25/01/1977	44	8	Female	183676742200000301					
	Ms.Titiksha V. Nimbalkar	Daughter	19/04/2011	10	5	Female	183676742200000302					
3	Mr.Amar Prabhakar Narkhede	Employee	27/09/1982	39	0	Male	183676742200000400	3	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Monali Amar Narkhede	Spouse	14/05/1988	33	4	Female	183676742200000401					
	Ms.Dhanasvi Amar Narkhede	Daughter	06/10/2019	1	11	Female	183676742200000402					
4	Ms.Akanksha Taunk	Employee	13/10/1984	36	11	Female	183676742200000500	4	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Naman Taunk	Son	12/06/2014	7	3	Male	183676742200000502					
	Mr.Nakul Taunk	Son	12/06/2014	7	3	Male	183676742200000503					
	Mr.Digvijay Taunk	Spouse	14/08/1984	37	1	Male	183676742200000501					
5	Ms.Sangeeta Rajput	Employee	09/06/1967	54	3	Female	183676742200000600	5	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Banibrata Das	Spouse	10/11/1980	40	10	Male	183676742200000601					
6	Ms.Dr. Tripti Sahu	Employee	28/12/1978	42	9	Female	183676742200000700	6	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Amit Pethiya	Spouse	01/08/1976	45	2	Male	183676742200000701					
	Mr.Akul Pethiya	Son	31/01/2008	13	8	Male	183676742200000702					
7	Mr.Dr. Nitin Ranjan	Employee	19/05/1982	39	4	Male	183676742200000800	7	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Rituja Verma	Spouse	08/05/1991	30	4	Female	183676742200000801					

"Consolidated stamp paid vide certificate No.CSD/350/2020/1071/2020 DATED 06-MAR-2020"

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
8	Ms.Ekta Joshi	Employee	13/10/1984	36	11	Female	183676742200000900	8	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Manish Joshi	Spouse	07/02/1985	36	7	Male	183676742200000901					
	Ms.Ishana Joshi	Daughter	25/03/2015	6	6	Female	183676742200000902					
9	Ms.Dr. Nalini Dixit	Employee	28/06/1979	42	3	Female	183676742200001000	9	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Kapil Dixit	Spouse	03/03/1987	34	6	Male	183676742200001001					
	Mr.Rudransh Dixit	Son	21/10/2017	3	11	Male	183676742200001002					
10	Mr.Shekhar Verma	Employee	14/04/1982	39	5	Male	183676742200001100	10	Clerical/Supervisory And Related Workers	400000	0	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Laxmidhar Biswal	Employee	27/11/1970	50	10	Male	183676742200001200	11	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Babita Biswal	Spouse	03/03/1976	45	6	Female	183676742200001201					
	Ms.Subhashree L Biswal	Daughter	25/08/2005	16	1	Female	183676742200001202					
	Mr.Subham Biswal	Son	05/09/2010	11	0	Male	183676742200001203					
12	Mr.Ajit Sangale	Employee	14/01/1973	48	8	Male	183676742200001300	12	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Sonmati A. Sangale	Spouse	07/05/1982	39	4	Female	183676742200001301					
	Ms.Neha A. Sangale	Daughter	27/02/2003	18	7	Female	183676742200001302					
	Mr.Chinmay A. Sangale	Son	14/08/2008	13	1	Male	183676742200001303					
13	Mr.Ashok Chitnis	Employee	04/08/1947	74	1	Male	183676742200001400	13	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Geeta Chitnis	Spouse	25/01/1956	65	8	Female	183676742200001401					
14	Ms.Vini Lalwani	Employee	19/04/1986	35	5	Female	183676742200001500	14	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Daksh Lalwani	Son	24/03/2012	9	6	Male	183676742200001501					
15	Mr.Girish Naik	Employee	30/10/1968	52	11	Male	183676742200001600	15	Clerical/Supervisory And Related Workers	400000	2	



S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Anuradha Naik	Spouse	02/06/1972	49	3	Female	183676742200001601					
	Ms.Isha Naik	Daughter	01/01/2002	19	9	Female	183676742200001602					
16	Ms.Dipti Wanjale	Employee	04/01/1982	39	8	Female	183676742200001700	16	Clerical/Supervisory And Related Workers	200000	2	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Mr.Deepak Wanjale	Spouse	09/01/1976	45	8	Male	183676742200001701					
	Mr.Omkar Wanjale	Son	24/04/2003	18	5	Male	183676742200001702					
17	Mr.Mahendra Karanjawane	Employee	19/01/1986	35	8	Male	183676742200001800	17	Clerical/Supervisory And Related Workers	200000	2	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Yogita Karanjawane	Spouse	13/03/1990	31	6	Female	183676742200001801					
	Mr.Manyankraj M. Karanjawane	Son	02/02/2016	5	7	Male	183676742200001802					
18	Mr.Sashikant Kamble	Employee	19/09/1969	52	0	Male	183676742200001900	18	Clerical/Supervisory And Related Workers	200000	3	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Rekha S Kamble	Spouse	24/09/1972	49	0	Female	183676742200001901					
	Ms.Srushti S Kamble	Daughter	29/11/2001	19	10	Female	183676742200001902					
	Mr.Dranav S Kamble	Son	14/07/2004	17	2	Male	183676742200001903					
19	Ms.Bharti Vinode	Employee	15/08/1977	44	1	Female	183676742200002000	19	Clerical/Supervisory And Related Workers	200000	3	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Mr.Rajendra Vinode	Spouse	31/03/1972	49	6	Male	183676742200002001					
	Mr.Abhishek Vinode	Son	20/11/1998	22	10	Male	183676742200002002					
	Ms.Apurva Vinode	Daughter	27/10/2005	15	11	Female	183676742200002003					
20	Ms.Nutan Singh	Employee	18/05/1989	32	4	Female	183676742200002100	20	Clerical/Supervisory And Related Workers	200000	0	
21	Mr.Dilip Patil	Employee	10/04/1981	40	5	Male	183676742200002200	21	Clerical/Supervisory And Related Workers	200000	2	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms. Priyanka Patil	Spouse	09/04/1988	33	5	Female	183676742200002201					
	Mr.Viraj Patil	Son	14/12/2011	9	9	Male	183676742200002202					
22	Ms.Rajshree Yogesh Marathe	Employee	27/11/1991	29	10	Female	183676742200002300	22	Clerical/Supervisory And Related Workers	200000	2	

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	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Mr.Yogesh Marathe	Spouse	19/09/1988	33	0	Male	183676742200002301					
	Mr.Sarojit Marathe	Son	24/03/2014	7	6	Male	183676742200002302					
23	Mr.Dilip Shamrao Chavan	Employee	20/01/1991	30	8	Male	183676742200002400	23	Clerical/Supervisory And Related Workers	200000	3	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Anusaya Chavan	Spouse	07/06/1993	28	3	Female	183676742200002401					
	Mr.Mithun Chavan	Son	14/04/2014	7	5	Male	183676742200002402					
	Ms.Shreya Chavan	Daughter	20/08/2015	6	1	Female	183676742200002403					
24	Mr.Sudam Mahadev Daundkar	Employee	11/06/1990	31	3	Male	183676742200002500	24	Clerical/Supervisory And Related Workers	200000	3	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Sonali Sudam Daundkar	Spouse	16/04/1994	27	5	Female	183676742200002501					
	Ms.Ishwari Sudam Daundkar	Daughter	27/08/2013	8	1	Female	183676742200002502					
	Mr.Arav Sudam Daundkar	Son	05/07/2019	2	2	Male	183676742200002503					
25	Mr.Sagar Maruti Bhondave	Employee	02/07/1978	43	2	Male	183676742200002600	25	Clerical/Supervisory And Related Workers	200000	2	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Bhagyashree Bhondve	Spouse	01/12/1985	35	9	Female	183676742200002601					
	Ms.Deeshita Bhondve	Daughter	27/09/2015	6	0	Female	183676742200002602					
26	Mr.Kochayyat Ramchandran Dattan	Employee	28/10/1972	48	11	Male	183676742200002700	26	Clerical/Supervisory And Related Workers	200000	2	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Sheeba Dattan Nair	Spouse	03/11/1976	44	10	Female	183676742200002701					
	Mr.Devamsh Dattan Nair	Son	09/12/2002	18	9	Male	183676742200002702					
27	Ms.Dr.Lokesh Arora	Employee	09/12/1981	39	9	Female	183676742200002800	27	Clerical/Supervisory And Related Workers	400000	3	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Mr.Sumit Arora	Spouse	26/05/1978	43	4	Male	183676742200002801					
	Ms.Rakshita Arora	Daughter	22/07/2007	14	2	Female	183676742200002802					
	Mr.Kartik Arora	Son	31/03/2012	9	6	Male	183676742200002803					
28	Mr.Kshirod Chand	Employee	24/06/1980	41	3	Male	183676742200002900	28	Clerical/Supervisory And Related Workers	400000	2	
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No		Remarks			
	Ms.Punyatoya Mishra	Spouse	03/01/1988	33	8	Female	183676742200002901					
	Mr.Priyansh Chand	Son	18/10/2017	3	11	Male	183676742200002902					

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
29	Ms.Neha Agarwal	Employee	02/02/1978	43	7	Female	183676742200003000	29	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Vikrant Agarwal	Spouse	13/04/1978	43	5	Male	183676742200003001					
	Ms.Anushka Agarwal	Daughter	17/04/2008	13	5	Female	183676742200003002					
	Ms.Amaira Agarwal	Daughter	24/12/2013	7	9	Female	183676742200003003					
30	Mr.Jitendra Swain	Employee	17/06/1977	44	3	Male	183676742200003100	30	Clerical/Supervisory And Related Workers	200000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Priyanshu Jitendra Swain	Son	28/04/2018	3	5	Male	183676742200003103					
	Ms.Subhadarshani D Pradhan	Spouse	07/07/1984	37	2	Female	183676742200003101					
	Mr.Shlok Jitendra Swain	Son	05/06/2009	12	3	Male	183676742200003102					
31	Ms.Dhanashri Gaurkar	Employee	23/04/1992	29	5	Female	183676742200003200	31	Clerical/Supervisory And Related Workers	200000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Sanjog Gathe	Spouse	04/10/1987	33	11	Male	183676742200003201					
32	Mr.Rajib Kumar Mohanty	Employee	19/07/1988	33	2	Male	183676742200003300	32	Clerical/Supervisory And Related Workers	200000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Radha Rani Dey	Spouse	12/03/1992	29	6	Female	183676742200003301					
33	Ms.Aishwarya Subhash Hamand	Employee	01/09/1994	27	0	Female	183676742200003400	33	Clerical/Supervisory And Related Workers	200000	0	
34	Ms.Dr.Priyanka P Rotey	Employee	09/06/1987	34	3	Female	183676742200003500	34	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Abhijeet S. Anasane	Spouse	30/07/1985	36	2	Male	183676742200003501					
35	Mr.S.Shrinivasan	Employee	04/08/1947	74	1	Male	183676742200003600	35	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Radha Shrinivasan	Spouse	15/06/1951	70	3	Female	183676742200003601					
36	Mr.Dhananjay Bagul	Employee	15/05/1971	50	4	Male	183676742200003700	36	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
	Ms.Vrushali Bagul	Spouse	12/09/1976	45	0	Female	183676742200003701					
	Mr.Abhisekh Bagul	Son	24/12/1999	21	9	Male	183676742200003702					
	Ms.Avantika Bagul	Daughter	24/07/2009	12	2	Female	183676742200003703					
37	Mr.Umesh Dattatray Bhosale	Employee	19/08/1975	46	1	Male	183676742200003800	37	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Sarika Umesh Bhosale	Spouse	10/09/1980	41	0	Female	183676742200003801					
	Mr.Chaitanya Umesh Bhosale	Son	06/05/2005	16	4	Male	183676742200003802					
38	Mr.Dhananjay Salunke	Employee	24/09/1971	50	0	Male	183676742200003900	38	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Geeta Salunke	Spouse	05/05/1976	45	4	Female	183676742200003901					
	Mr.Neel D Salunke	Son	20/02/2001	20	7	Male	183676742200003902					
	Ms.Rajlaxmi D Salunke	Daughter	15/09/2009	12	0	Female	183676742200003903					
39	Mr.Vilas Gangaram Navale	Employee	07/04/1965	56	5	Male	183676742200004000	39	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms. Vijaya Navale	Spouse	23/12/1971	49	9	Female	183676742200004001					
	Ms.Sayali Navale	Daughter	22/08/1994	27	1	Female	183676742200004002					
	Mr.Ranjit Navale	Son	02/04/1998	23	5	Male	183676742200004003					
40	Mr.Dombale Ashok Biru	Employee	01/06/1969	52	3	Male	183676742200004100	40	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Dombale Sunita Ashok	Spouse	01/06/1970	51	3	Female	183676742200004101					
	Mr.Dombale Sumit Ashok	Son	30/07/1992	29	2	Male	183676742200004102					
	Mr.Dombale Pratik Ashok	Son	03/04/1996	25	5	Male	183676742200004103					
41	Mr.Rakesh Shirase	Employee	17/10/1974	46	11	Male	183676742200004200	41	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Jyoti Shirase	Spouse	11/12/1979	41	9	Female	183676742200004201					
	Ms.Diksha Shirase	Daughter	18/08/2005	16	1	Female	183676742200004202					
	Mr.Arpit Shirase	Son	28/04/2015	6	5	Male	183676742200004203					
42	Ms.Neha Surve	Employee	24/06/1982	39	3	Female	183676742200004300	42	Clerical/Supervisory And Related Workers	200000	3	
							<b>ID No</b>					

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
	Dependant Details	Relationship	DOB	Age in Yrs	Age in Mths	Sex			Remarks			
	Mr.Nitin Surve	Spouse	12/12/1975	45	9	Male	183676742200004301					
	Mr.Ritesh Nitin Surve	Son	01/11/2004	16	11	Male	183676742200004302					
	Ms.Tanishka Nitin Surve	Daughter	16/08/2009	12	1	Female	183676742200004303					
43	Mr.Nand Kumar Jadhav	Employee	06/11/1984	36	10	Male	183676742200004400	43	Clerical/Supervisory And Related Workers	200000	2	
	Ms.Ratnamala Jadhav	Spouse	20/01/1988	33	8	Female	183676742200004401					
	Ms.Kavya Jadhav	Daughter	04/06/2014	7	3	Female	183676742200004402					
44	Mr.Anil Kale	Employee	13/04/1986	35	5	Male	183676742200004500	44	Clerical/Supervisory And Related Workers	200000	2	
	Ms.Bhagyashree Kale	Spouse	20/06/1991	30	3	Female	183676742200004501					
	Ms.Krashnali Kale	Daughter	15/08/2017	4	1	Female	183676742200004502					
45	Mr.Popat Namdev Jadhav	Employee	13/09/1987	34	0	Male	183676742200004600	45	Clerical/Supervisory And Related Workers	200000	3	
	Ms.Nilam Popat Jadhav	Spouse	14/04/1992	29	5	Female	183676742200004601					
	Ms.Divya Popat Jadhav	Daughter	23/01/2014	7	8	Female	183676742200004602					
	Mr.Shri Popat Jadhav	Son	24/03/2019	2	6	Male	183676742200004603					
46	Mr.Raju Kerba Rathod	Employee	01/06/1973	48	3	Male	183676742200004700	46	Clerical/Supervisory And Related Workers	200000	3	
	Ms.Suman Raju Rathod	Spouse	05/03/1977	44	6	Female	183676742200004701					
	Mr.Ramesh Raju Rathod	Son	01/06/1996	25	3	Male	183676742200004702					
	Ms.Reshma Raju Rathod	Daughter	05/01/2000	21	8	Female	183676742200004703					
47	Mr.Ganesh Nivrutti Gaikwad	Employee	05/04/1990	31	5	Male	183676742200004800	47	Clerical/Supervisory And Related Workers	200000	0	
48	Mr.Pintoo Baban Rode	Employee	08/12/1989	31	9	Male	183676742200004900	48	Clerical/Supervisory And Related Workers	200000	2	
	Ms.Prajakta Pintoo Rode	Spouse	20/05/1995	26	4	Female	183676742200004901					
	Mr.Aarush Pintoo Rode	Son	11/10/2017	3	11	Male	183676742200004902					

In the event of the policy being withdrawn in future, intimation about the withdrawal will be sent 3 months prior to the date when renewal falls due.The insured will have the option of migrating to any other similar health insurance policy offered by the Company at the relevant time.

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
49	Mr.Pradeep Jadhav	Employee	19/09/1981	40	0	Male	183676742200005000	49	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Purva Pradeep Jadhav	Spouse	01/05/1990	31	5	Female	183676742200005001					
	Mr.Pranay Pradeep Jadhav	Son	21/05/2012	9	4	Male	183676742200005002					
50	Mr.Israr Ahmed	Employee	08/09/1992	29	0	Male	183676742200005100	50	Clerical/Supervisory And Related Workers	200000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Priyanka Wankhede	Spouse	01/05/1991	30	5	Female	183676742200005101					
51	Mr.Dnyaneshwar Ramdas Misal	Employee	27/05/1992	29	4	Male	183676742200005200	51	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Vaishali Misal	Spouse	02/10/1996	24	11	Female	183676742200005201					
	Ms.Pratiksha Misal	Daughter	16/02/2017	4	7	Female	183676742200005202					
52	Mr.Shivraj Shankarrao Magre	Employee	19/05/1983	38	4	Male	183676742200005300	52	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Vidhya Shivraj Magre	Spouse	18/09/1988	33	0	Female	183676742200005301					
	Ms.Tanishka Shivraj Magre	Daughter	31/03/2015	6	6	Female	183676742200005302					
53	Ms.Nirupama Mundada	Employee	02/11/1978	42	10	Female	183676742200005400	53	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Pritha Mundada	Daughter	30/07/2001	20	2	Female	183676742200005401					
	Ms.Alekhya Mundada	Daughter	17/10/2008	12	11	Female	183676742200005402					
54	Ms.Dr.Beena Jiby	Employee	07/03/1975	46	6	Female	183676742200005500	54	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Jiby Kuriyan	Spouse	26/01/1970	51	8	Male	183676742200005501					
	Ms.Binita Jiby	Daughter	14/09/2000	21	0	Female	183676742200005502					
	Mr.Bijin Jiby	Son	10/08/2002	19	1	Male	183676742200005503					
55	Mr.Girish Chavan	Employee	14/11/1985	35	10	Male	183676742200005600	55	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Pooja Karekar	Spouse	29/11/1986	34	10	Female	183676742200005601					
	Mr.Shouraya Girish Chavan	Son	13/07/2015	6	2	Male	183676742200005602					

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
56	Ms.Sonali Kshirsagar	Employee	03/11/1985	35	10	Female	183676742200005700	56	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Dashrath Suryavanshi	Spouse	08/10/1982	38	11	Male	183676742200005701					
	Ms.Kiyrá Suryavanshi	Daughter	03/07/2017	4	2	Female	183676742200005702					
57	Mr.Mahesh Jadhav	Employee	29/06/1984	37	3	Male	183676742200005800	57	Clerical/Supervisory And Related Workers	200000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Gauri Mahesh Jadhav	Spouse	04/11/1988	32	10	Female	183676742200005801					
	Ms.Siddhi Mahesh Jadhav	Daughter	25/09/2011	10	0	Female	183676742200005802					
	Mr.Shriraj Mahesh Jadhav	Son	18/01/2014	7	8	Male	183676742200005803					
58	Mr.Gajanan Sherkhane	Employee	23/07/1973	48	2	Male	183676742200005900	58	Clerical/Supervisory And Related Workers	200000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Manisha G Sherkhane	Spouse	15/05/1986	35	4	Female	183676742200005901					
	Mr.Prathmesh G Sherkhane	Son	25/07/2005	16	2	Male	183676742200005902					
	Ms.Sakshi G Sherkhane	Daughter	14/05/2007	14	4	Female	183676742200005903					
59	Mr.Lalatendu Swain	Employee	30/06/1981	40	3	Male	183676742200006000	59	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Saswati Swain	Spouse	18/07/1983	38	2	Female	183676742200006001					
	Ms.Saira Swain	Daughter	15/08/2017	4	1	Female	183676742200006002					
60	Mr.Navnath Chore	Employee	01/06/1975	46	3	Male	183676742200006100	60	Clerical/Supervisory And Related Workers	200000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Bharati N Chore	Spouse	13/01/1983	38	8	Female	183676742200006101					
	Ms.Anuksha N Chore	Daughter	07/01/2007	14	8	Female	183676742200006102					
	Ms.Samiksha N Chore	Daughter	07/01/2007	14	8	Female	183676742200006103					
61	Mr.Tukaram Ramesh Telange	Employee	06/11/1991	29	10	Male	183676742200006200	61	Clerical/Supervisory And Related Workers	200000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Radha Bhagwan Japtap	Spouse	10/02/1996	25	7	Female	183676742200006201					
62	Mr.Sachin Eknath Surve	Employee	08/02/1984	37	7	Male	183676742200006300	62	Clerical/Supervisory And Related Workers	200000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
		Spouse					183676742200006301					

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
	Ms.Anuja Sachin Surve		06/11/1990	30	10	Female						
	Ms.Samruddhi Sachin Surve	Daughter	04/10/2010	10	11	Female	183676742200006302					
	Ms.Swara Sachin Surve	Daughter	29/05/2012	9	4	Female	183676742200006303					
63	Mr.Kiran Balbhim Rathod	Employee	25/04/1989	32	5	Male	183676742200006400	63	Clerical/Supervisory And Related Workers	200000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Laxmi Kiran Rathod	Spouse	02/05/1992	29	4	Female	183676742200006401					
	Ms.Kanchan Kiran Rathod	Daughter	22/04/2013	8	5	Female	183676742200006402					
	Ms.Kinchana Kiran Rathod	Daughter	27/12/2014	6	9	Female	183676742200006403					
64	Mr.Ramkrishna Balu Chandan	Employee	03/07/1987	34	2	Male	183676742200006500	64	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Ashwini Ramkrishna Chandan	Spouse	20/11/1993	27	10	Female	183676742200006501					
	Ms.Aradhya Ramkrishna Chandan	Daughter	06/05/2016	5	4	Female	183676742200006502					
65	Mr.Vishal Tulstdidas Dhumal	Employee	01/11/1985	35	11	Male	183676742200006600	65	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Pallavi Vishal Dhumal	Spouse	08/03/1985	36	6	Female	183676742200006601					
	Mr.Sarthak Vishal Dhumal	Son	11/10/2012	8	11	Male	183676742200006602					
66	Mr.Rajaram Jadhav	Employee	01/06/1973	48	3	Male	183676742200006700	66	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Shakuntala Jadhav	Spouse	02/06/1977	44	3	Female	183676742200006701					
	Mr.Rahul Rajaram Jadhav	Son	16/04/1995	26	5	Male	183676742200006702					
67	Mr.Tushar Dnyaneshwar Gaikwad	Employee	31/12/1988	32	9	Male	183676742200006800	67	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Sonika Tushar Gaikwad	Spouse	13/02/1992	29	7	Female	183676742200006801					
	Ms.Sharayu Tushar Gaikwad	Daughter	22/10/2015	5	11	Female	183676742200006802					
68	Ms.Shraddha Anesh Bansode	Employee	17/05/1990	31	4	Female	183676742200006900	68	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Ganesh Bansode	Spouse	23/02/1988	33	7	Male	183676742200006901					



S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
	Mr.Uttkarsh Ganesh Bansode	Son	17/07/2012	9	2	Male	183676742200006902					
	Ms.Manasvi Ganesh Bansode	Daughter	16/05/2016	5	4	Female	183676742200006903					
69	Mr.Prashant N Avchare	Employee	22/07/1976	45	2	Male	183676742200007000	69	Clerical/Supervisory And Related Workers	200000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Veena P Avchare	Spouse	12/06/1978	43	3	Female	183676742200007001					
	Mr.Rithul P Avchare	Son	05/08/2011	10	1	Male	183676742200007002					
70	Mr.Amber Asaram Pawar	Employee	19/06/1989	32	3	Male	183676742200007100	70	Clerical/Supervisory And Related Workers	200000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Shital Amber Pawar	Spouse	09/04/1996	25	5	Female	183676742200007101					
	Mr.Aaryan Amber Pawar	Son	16/03/2015	6	6	Male	183676742200007102					
	Ms.Ardhaya Amber Pawar	Daughter	13/08/2018	3	1	Female	183676742200007103					
71	Mr.Deepak Dixit	Employee	22/12/1980	40	9	Male	183676742200007200	71	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Madhavi Deepak Dixit	Spouse	03/01/1983	38	8	Female	183676742200007201					
	Ms.Yashada Deepak Dixit	Daughter	21/09/2012	9	0	Female	183676742200007202					
	Mr.Jayesh Deepak Dixit	Son	23/09/2015	6	0	Male	183676742200007203					
72	Ms.Nidhi Ashish Girahiya	Employee	24/09/1977	44	0	Female	183676742200007300	72	Clerical/Supervisory And Related Workers	400000	3	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Mr.Ashish Girahiya	Spouse	22/04/1979	42	5	Male	183676742200007301					
	Mr.Aum Girahiya	Son	17/12/2007	13	9	Male	183676742200007302					
	Mr.Arihant Girahiya	Son	17/08/2009	12	1	Male	183676742200007303					
73	Mr.Anil Verma	Employee	30/04/1968	53	5	Male	183676742200007400	73	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Sabitha Anil Verma	Spouse	24/11/1973	47	10	Female	183676742200007401					
74	Mr.Abhay Mishra	Employee	29/07/1979	42	2	Male	183676742200007500	74	Clerical/Supervisory And Related Workers	400000	1	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Sheetal Abhay Mishra	Spouse	02/09/1979	42	0	Female	183676742200007501					

Continuity of benefits for waiting period and bonus, if any and if applicable, will be given provided the insured had been renewing the policy

S.No	Name of Employee	Relationship	DOB	Age in Yrs	Age in Mths	Sex	ID No	Emp Id	Occupation	Floater SI	No Dep.	Remarks
75	Mr.Kapil Kapdiya	Employee	15/04/1986	35	5	Male	183676742200007600	75	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Swati Kapil Kapdiya	Spouse	05/10/1987	33	11	Female	183676742200007601					
	Mr.Mayur Kapil Kapdiya	Son	12/07/2016	5	2	Male	183676742200007602					
76	Mr.Amol Deogadkar	Employee	27/08/1986	35	1	Male	183676742200007700	76	Clerical/Supervisory And Related Workers	400000	2	
	<b>Dependant Details</b>	<b>Relationship</b>	<b>DOB</b>	<b>Age in Yrs</b>	<b>Age in Mths</b>	<b>Sex</b>	<b>ID No</b>		<b>Remarks</b>			
	Ms.Avni Amol Deogadkar	Spouse	13/12/1987	33	9	Female	183676742200007701					
	Mr.Advait Amol Deogadkar	Son	06/09/2016	5	0	Male	183676742200007702					

without any break (or renewing within the grace period offered)

In witness whereof the undersigned being authorised by and on behalf of the company has / have herein to set his/ their hands at Area office - Pune on 08th Day of October 2021 .

**STAR GROUP HEALTH INSURANCE**  
**Unique Identification No: SHAHLGP21214V022021**

**PREAMBLE**

The declaration and other documents if any shall be the basis of this Contract and is deemed to be incorporated herein.

**A.DEFINITIONS**

**Standard Definitions**

**Accident:** An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

**Any one illness:** Any one illness means continuous period of illness and includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment was taken.

**AYUSH Day Care Centre:** AYUSH Day Care Centre means and includes Community Health Centre (CHC), Primary Health Centre (PHC), Dispensary, Clinic, Polyclinic or any such health centre which is registered with the local authorities, wherever applicable and having facilities for carrying out treatment procedures and medical or surgical/para-surgical interventions or both under the supervision of registered AYUSH Medical Practitioner (s) on day care basis without in-patient services and must comply with all the following criterion:

- i. Having qualified registered AYUSH Medical Practitioner(s) in charge;
- ii. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out;
- iii. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative.

**AYUSH Hospital:** An AYUSH Hospital is a healthcare facility wherein medical/surgical/para-surgical treatment procedures and interventions are carried out by AYUSH Medical Practitioner(s) comprising of any of the following:

- a. Central or State Government AYUSH Hospital; or
- b. Teaching hospital attached to AYUSH College recognized by the Central Government/Central Council of Indian Medicine/Central Council for Homeopathy; or
- c. AYUSH Hospital, standalone or co-located with in-patient healthcare facility of any recognized system of medicine, registered with the local authorities, wherever applicable, and is under the supervision of a qualified registered AYUSH Medical Practitioner and must comply with all the following criterion:
  - i. Having at least 5 in-patient beds;
  - ii. Having qualified AYUSH Medical Practitioner in charge round the clock;
  - iii. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out;
  - iv. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative.

**Condition Precedent:** Condition Precedent means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.

**Congenital Anomaly:** Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

- a) **Internal Congenital Anomaly:** Congenital anomaly which is not in the visible and accessible parts of the body
- b) **External Congenital Anomaly:** Congenital anomaly which is in the visible and accessible parts of the body

**Co-Payment:** Co-payment means a cost sharing requirement under a health insurance policy that provides that the policyholder/insured will bear a specified percentage of the admissible claims amount. A co-payment does not reduce the Sum Insured.

**Day Care Centre:** A day care centre means any institution established for day care treatment of illness and/or injuries or a medical setup with a hospital and which has been registered with the local authorities, wherever applicable, and is under supervision of a registered and qualified medical practitioner AND must comply with all minimum criterion as under-

- i) has qualified nursing staff under its employment;
- ii) has qualified medical practitioner/s in charge;
- iii) has fully equipped operation theatre of its own where surgical procedures are carried out;
- iv) maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.

**Day Care Treatment:** Day care treatment means medical treatment, and/or surgical procedure which is:

- i. Undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
- ii. which would have otherwise required hospitalization of more than 24 hours

Treatment normally taken on an out-patient basis is not included in the scope of this definition

**Dental Treatment:** Dental treatment means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.

**Disclosure to information norm:** The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact.

**Grace Period:** Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.

**Hospital:** A hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) of the said act Or complies with all minimum criteria as under:

- i) has qualified nursing staff under its employment round the clock;
- ii) has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
- iii) has qualified medical practitioner(s) in charge round the clock;
- iv) has a fully equipped operation theatre of its own where surgical procedures are carried out;
- v) maintains daily records of patients and makes these accessible to the insurance company's authorized personnel;

**Hospitalization:** Hospitalization means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

**Illness:** Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment;

**(a) Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery

**(b) Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics;

- 1. It needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
- 2. it needs ongoing or long-term control or relief of symptoms
- 3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
- 4. it continues indefinitely
- 5. it recurs or is likely to recur

**Injury:** Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

**Inpatient Care** Inpatient care means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.

**Intensive Care Unit:** Intensive care unit means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

**ICU Charges:** ICU (Intensive Care Unit) Charges means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.

**Maternity expenses:** Maternity expenses means;

- a) medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization);
- b) expenses towards lawful medical termination of pregnancy during the policy period.

**Medical Advice:** Medical Advice means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.

**Medical Expenses:** Medical Expenses means those expenses that an Insured Person has necessarily and actually incurred for medical

treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.

**Medical Practitioner:** Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.

**Medically Necessary Treatment:** Medically necessary treatment means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:

- i) is required for the medical management of the illness or injury suffered by the insured;
- ii) must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- iii) must have been prescribed by a medical practitioner;
- iv) must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

**Network Provider:** Network Provider means hospitals or health care providers enlisted by an insurer, TPA or jointly by an Insurer and TPA to provide medical services to an insured by a cashless facility.

**New Born Baby:** Newborn baby means baby born during the Policy Period and is aged upto 90 days.

**Non-Network Provider:** Non-Network means any hospital, day care centre or other provider that is not part of the network.

**Notification of Claim:** Notification of claim means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.

**Nuclear, Chemical and Biological Terrorism** shall mean the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous Chemical agent and/or Biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear. "Chemical" agent shall mean any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property. "Biological" agent shall mean any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) which cause illness and/or death in humans, animals or plants.

**OPD treatment:** OPD treatment means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.

**Pre-Existing Disease:** Pre-existing Disease means any condition, ailment, injury or disease:

- a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement
- or**
- b) For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement

**Pre-hospitalization Medical Expenses:** Pre-hospitalization Medical Expenses means medical expenses incurred during pre-defined number of days preceding the hospitalization of the Insured Person, provided that:

- i. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
- ii. The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company

**Post-hospitalization Medical Expenses** means medical expenses incurred during pre-defined number of days immediately after the insured person is discharged from the hospital provided that:

- i. Such Medical Expenses are for the same condition for which the insured person's hospitalization was required, and
- ii. The inpatient hospitalization claim for such hospitalization is admissible by the insurance company.

**Qualified Nurse:** Qualified nurse means a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

**Reasonable and Customary Charges:** Reasonable and Customary charges means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.

**Room Rent:** Room Rent means the amount charged by a Hospital towards Room and Boarding expenses and shall include the associated medical expenses.

**Surgery or Surgical Procedure:** Surgery or Surgical Procedure means manual and / or operative procedure(s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.

**Unproven/Experimental treatment:** Unproven/Experimental treatment means the treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.

#### **Specific Definitions**

**Associated medical expenses:** Associated medical expenses means medical expenses such as Professional fees, OT charges, Procedure charges, etc., which vary based on the room category occupied by the insured person whilst undergoing treatment in some of the hospitals. If Policy Holder chooses a higher room category above the eligibility defined in policy, then proportionate deduction will apply on the Associated Medical Expenses in addition to the difference in room rent. Such associated medical expenses do not include Cost of pharmacy and consumables, Cost of implants and medical devices and Cost of diagnostics.

**AYUSH Treatment:** AYUSH Treatment refers to the medical and / or hospitalization treatments given under 'Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems.

**Basic Sum Insured:** Basic Sum Insured wherever it appears shall mean the amount of insurance for which the premium has been paid. Where coverage is on individual basis / family floater basis the sum insured is the amount shown against each individual / family unit respectively

**Company:** Company means Star Health and Allied Insurance Company Limited

**Dependent Child:** Dependent Child means a child (natural or legally adopted) who is financially dependent and does not have his or her independent source of income and not over 30 years

**Diagnosis:** Diagnosis means Diagnosis by a registered medical practitioner, supported by clinical, radiological and histological, histopathological and laboratory evidence and also surgical evidence wherever applicable, acceptable to the Company.

**Family:** Family means

- a. Insured Person / Beneficiary
- b. Spouse and
- c. Dependent Children not exceeding 2 numbers

**Group Administrator / Proposer:** Group Administrator / Proposer means the person/organization who has signed in the proposal form / declaration form and named in the Policy Schedule. He may or may not be insured under the policy

**Hazardous Sport / Hazardous Activities:** Hazardous Sport / Hazardous Activities means engaging whether professionally or otherwise in any sport or activity, which is potentially dangerous to the Insured Person (whether trained, or not). Such Sport/Activity including but not limited to Winter sports, Ice hockey, Skiing, Skydiving, Parachuting, Ballooning, Scuba Diving, Bungee Jumping, Mountain Climbing, Riding or Driving in Races or Rallies, caving or pot holing, hunting or equestrian activities, diving or under-water activity, rafting or canoeing involving rapid waters, yachting or boating outside coastal waters, jockeys, horseback, Polo, Circus personnel, army/navy/air force personnel and policemen whilst on duty, persons working in underground mines, explosives, magazines, workers whilst involved in electrical installation with high-tension supply, nuclear installations, handling hazardous chemicals.

**In-Patient:** In-Patient means an Insured Person who is admitted to Hospital and stays there for a minimum period of 24 hours for the sole purpose of receiving treatment.

**Insured Person:** Insured Person means the name/s of persons shown in the schedule of the Policy

**Sum Insured:** Sum Insured wherever it appears shall mean the amount of insurance for which the premium has been paid. Where coverage is on individual basis / family floater basis the sum insured is the amount shown against each individual / family unit respectively.

## **B. COVERAGE**

In consideration of the premium paid, subject to the terms, conditions, exclusions and definitions contained herein the Company agrees as under.

That if during the period stated in the Schedule the insured person shall contract any disease or suffer from any illness or sustain bodily injury through accident and if such disease or injury shall require the insured Person/s, upon the advice of a duly Qualified Physician/Medical Specialist /Medical Practitioner or of duly Qualified Surgeon to incur Hospitalization expenses for medical/surgical treatment at any Nursing Home / Hospital in India as an in- patient, the Company will pay to the Insured Person/s the amount of such expenses as are reasonably and necessarily incurred up-to the limits mentioned in the schedule but not exceeding the sum insured stated in the schedule hereto.

- A) Room, boarding, nursing expenses as provided by the Hospital / Nursing Home up to the limits mentioned in the schedule
- B) Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees.
- C) Anesthesia, blood, oxygen, operation theatre charges, ICU Charges, surgical appliances, medicines and drugs, diagnostic materials and X-ray, diagnostic imaging modalities, dialysis, chemotherapy, radiotherapy, cost of pacemaker, stent and similar expenses
- D) Emergency ambulance charges up to the limits mentioned in the schedule for transportation of the insured person by private ambulance service when this is needed for medical reasons to go to hospital for treatment, provided however there is an admissible claim under the policy.
- E) Relevant Pre-Hospitalization and Post-Hospitalization medical expenses up to the limits mentioned in the schedule
- F) **AYUSH Treatment:** Expenses incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a Government Hospital or in any institute recognized by the government and/or accredited by the Quality Council of India/National Accreditation Board on Health up to 25% of the sum insured subject to a maximum of Rs.25,000/- per policy period.

**G)Coverage for Modern Treatments:** The expenses payable during the entire policy period for treatment of the following diseases / conditions (either as a day care or as an in-patient exceeding 24hrs of admission in the hospital) is limited to the amount mentioned in table below

	Uterine artery Embolization and HIFU	Balloon Sinuplasty	Deep Brain Stimulation	Oral Chemotherapy (Sublimits including pre & Post Hospitalization)	Immunotherapy-Monoclonal Antibody to be given as injection	Intra Vitreal injections
Sum Insured Rs	Limit per person, per policy period for each diseases / Condition Rs.					
Up to Rs.1,00,000	12500	5000	25000	12500	25000	5000
From Rs.1,00,001/- to Rs.2,00,000/-	25000	10000	50000	25000	50000	10000
From Rs.2,00,001/- to Rs. 3,00,000/-	37500	15000	75000	37500	75000	15000
From Rs.3,00,001/- To 4,00,000/-	100000	40000	200000	100000	200000	40000
From Rs.4,00,001/- to Rs.5,00,000/-	125000	50000	250000	125000	250000	50000
From Rs.5,00,001/- to Rs.7,50,000/-	125000	50000	250000	125000	275000	60000
From Rs.7,50,001/- to Rs.10,00,000/-	150000	100000	300000	200000	400000	75000
From Rs.10,00,001/- to Rs.15,00,000/-	175000	125000	400000	250000	500000	100000
From Rs.15,00,001/- to Rs.20,00,000/-	200000	150000	450000	275000	550000	125000
From Rs.20,00,001/- to Rs.25,00,000/-	200000	150000	500000	300000	600000	150000
From Rs.25,00,001/- to Rs.50,00,000/-	225000	175000	600000	400000	750000	175000
From Rs.50,00,001/- to Rs.75,00,000/-	250000	200000	700000	500000	900000	200000
From Rs.75,00,001/- to Rs.1,00,00,000/-	300000	200000	750000	600000	1000000	200000



	Robotic surgeries	Stereotactic radio surgeries	Bronchical Thermoplasty, Vaporisation of the prostate(Green laser treatment or holmium laser treatment),IONM-(Intra Operative Neuro Monitoring)	Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions
Sum Insured	Limit per person, per policy period for each diseases / Condition Rs.			
Up to Rs.1,00,000	25000	25000	Up to Sum Insured	25000
From Rs.1,00,001/- to Rs.2,00,000/-	50000	50000		50000
From Rs.2,00,001/- to Rs.3,00,000/-	75000	75000		75000
From Rs.3,00,001/- To 4,00,000/-	200000	175000		200000
From Rs.4,00,001/- to Rs.5,00,000/-	250000	200000		250000
From Rs.5,00,001/- to Rs.7,50,000/-	275000	275000		275000
From Rs.7,50,001/- to Rs.10,00,000/-	300000	225000		400000
From Rs.10,00,001/- to Rs.15,00,000/-	400000	250000		500000
From Rs.15,00,001/- to Rs.20,00,000/-	450000	275000		550000
From Rs.20,00,001/- to Rs.25,00,000/-	500000	300000		600000
From Rs.25,00,001/- to Rs.50,00,000/-	600000	350000		750000
From Rs.50,00,001/- to Rs.75,00,000/-	700000	375000		900000
From Rs.75,00,001/- to Rs.1,00,00,000/-	750000	400000		1000000

Expenses on Hospitalization are payable provided the hospitalization is for minimum period of 24 hours. However this time limit will not apply for the day care treatments / procedures taken in the Hospital / Nursing Home where the Insured is discharged on the same day. The company's liability for specified ailment / surgical procedure is up to the limits mentioned in the schedule.

**Expenses relating to hospitalization will be considered in proportion to the room rent limit stated in the policy schedule.**

**Co-payment: Claims payable subject to copayment as stated in the schedule.**

## C.EXCLUSIONS

### Standard Exclusions

#### 1. Pre-Existing Diseases - Code Excl 01

- A. Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first policy with insurer.
- B. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- C. If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations, then waiting period for the same would be reduced to the extent of prior coverage.
- D. Coverage under the policy after the expiry of 48 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer.

#### 2. Specified disease/procedure waiting period - Code Excl 02

- A. Expenses related to the treatment of the following listed Conditions, surgeries/treatments shall be excluded until the expiry of 12 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident.

List of specific diseases/procedures

- i. Hepato-pancreato-biliary diseases including Gall bladder and Pancreatic calculi
- ii. All types of management for kidney and genitourinary tract calculi
- iii. All Diseases of Prostate
- iv. All types of Hernia
- v. Hydrocele
- vi. Congenital Internal disease/defect anomalies (Except to the extent covered under Newborn Baby Cover if specifically opted)
- vii. Pilonidal sinus and Fistula / Fissure in ano,
- viii. Piles
- ix. Sinusitis and related disorders

Expenses related to the treatment of the following listed Conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident.

List of specific diseases/procedures

- a) Cataract and diseases of the anterior and posterior chamber of the Eye, Diseases of ENT, Diseases related to Thyroid, Prolapse of intervertebral disc (other than caused by accident), Varicose veins and Varicose ulcers, all Stricture Urethra, all Obstructive Uropathies, Epididymal Cyst, Benign Tumours of Epididymis, Spermatocele, Varicocele, Hemorrhoids, Rectal Prolapse, Stress Incontinence.
- b) Desmoid tumour of anterior abdominal wall.
- c) All treatments (conservative, interventional, laparoscopic and open) related to all Diseases of Uterus, Fallopian tubes, Cervix and Ovaries, Uterine bleeding, Pelvic Inflammatory Diseases, Benign breast diseases, Umbilical sinus, Umbilical fistula.
- d) Conservative, operative treatment and all types of intervention for Diseases related to Tendon, Ligament, Fascia, Bones and Joint Including Arthroscopy and Arthroplasty [other than caused by accident]
- e) Degenerative disc and Vertebral diseases including Replacement of bones and joints and Degenerative diseases of the Musculo-skeletal system
- f) Subcutaneous Benign lumps, Sebaceous cyst, Dermoid cyst, Mucous cyst lip / cheek, Carpal tunnel syndrome, Trigger finger, Lipoma, Neurofibroma, Fibroadenoma, Ganglion and similar pathology
- g) Any transplant and related surgery
- B. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- C. If any of the specified disease/procedure falls under the waiting period specified for pre-Existing diseases, then the longer of the two waiting periods shall apply.
- D. The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.
- E. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.
- F. List of specific diseases/procedures
  - i. During the first year of operation of the Insurance cover, the expenses on treatments (conservative, interventional, laparoscopic and open) related to Hepato-pancreato-biliary diseases including Gall bladder and Pancreatic calculi, all types of management for kidney and genitourinary tract calculi., all Diseases of Prostate, all types of Hernia., Hydrocele, Congenital Internal disease/defect anomalies (Except to the extent covered under Newborn Baby Cover if specifically opted) Pilonidal sinus and Fistula / Fissure in ano, Piles, Sinusitis and related disorders, If these are Pre-Existing at the time of proposal they will be covered subject to exclusion number 3 mentioned below.
  - ii. Cataract and diseases of the anterior and posterior chamber of the Eye, Diseases of ENT, Diseases related to Thyroid, Prolapse of intervertebral disc (other than caused by accident), Varicose veins and Varicose ulcers, all Stricture Urethra, all Obstructive Uropathies, Epididymal Cyst, Benign Tumours of Epididymis, Spermatocele, Varicocele, Hemorrhoids, Rectal

- Prolapse, Stress Incontinence.
- iii. Desmoid tumour of anterior abdominal wall.
  - iv. All treatments (conservative, interventional, laparoscopic and open) related to all Diseases of Uterus, Fallopian tubes, Cervix and Ovaries, Uterine bleeding, Pelvic Inflammatory Diseases, Benign breast diseases, Umbilical sinus, Umbilical fistula.
  - v. Conservative, operative treatment and all types of intervention for Diseases related to Tendon, Ligament, Fascia, Bones and Joint Including Arthroscopy and Arthroplasty [other than caused by accident]
  - vi. Degenerative disc and Vertebral diseases including Replacement of bones and joints and Degenerative diseases of the Musculo-skeletal system
  - vii. Subcutaneous Benign lumps, Sebaceous cyst, Dermoid cyst, Mucous cyst lip / cheek, Carpal tunnel syndrome, Trigger finger, Lipoma, Neurofibroma, Fibroadenoma, Ganglion and similar pathology
  - viii. Any transplant and related surgery

### **3.30-day waiting period - Code Excl 03**

A. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the same are covered

B. This exclusion shall not, however, apply if the Insured Person has Continuous Coverage for more than twelve months

C. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently

### **4. Investigation & Evaluation - Code Excl 04**

A. Expenses related to any admission primarily for diagnostics and evaluation purposes only are excluded

B. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded

**5. Rest Cure, rehabilitation and respite care - Code Excl 05:** Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:

- i. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non skilled persons
- ii. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs

**6. Obesity/ Weight Control - Code Excl 06:** Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions;

- A. Surgery to be conducted is upon the advice of the Doctor
- B. The surgery/Procedure conducted should be supported by clinical protocols
- C. The member has to be 18 years of age or older and
- D. Body Mass Index (BMI);
  - 1. greater than or equal to 40 or
  - 2. greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
    - a. Obesity-related cardiomyopathy
    - b. Coronary heart disease
    - c. Severe Sleep Apnea
    - d. Uncontrolled Type 2 Diabetes

**7. Change-of-Gender treatments - Code Excl 07:** Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.

**8. Cosmetic or plastic Surgery - Code Excl 08:** Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.

**9. Hazardous or Adventure sports - Code Excl 09:** Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.

**10. Breach of law - Code Excl 10:** Expenses for treatment directly arising from or consequent upon any Insured Person committing or

attempting to commit a breach of law with criminal intent.

**11.Excluded Providers - Code Excl 11:** Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the policyholders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim.

12.Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof - **Code Excl 12**

13.Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons - **Code Excl 13**

14.Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure - **Code Excl 14**

15.**Refractive Error - Code Excl 15:** Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptries.

**16.Unproven Treatments - Code Excl 16:** Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.

**17.Sterility and Infertility - Code Excl 17:** Expenses related to sterility and infertility. This includes;

- a. Any type of contraception, sterilization
- b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
- c. Gestational Surrogacy
- d. Reversal of sterilization

**18.Maternity - Code Excl 18**

- i. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy;
- ii. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the policy period.

**Specific Exclusions**

19.Circumcision unless necessary for treatment of a disease not excluded under this policy or necessitated due to an accident, Preputioplasty, Frenuloplasty, Preputial Dilatation and Removal of SMEGMA. -**Code Excl 19.**

20.Congenital External diseases/condition defects or anomalies -**Code Excl 20.**

21.Convalescence, general debility, run-down condition, Nutritional deficiency states -**Code Excl 21.**

22.Intentional self injury. -**Code Excl 22.**

23.Venereal disease and Sexually transmitted diseases (Other than HIV) -**Code Excl 23.**

24.Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not) -**Code Excl 24.**

25.Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials. -**Code Excl 25.**

26.Expenses incurred on Enhanced External Counter Pulsation Therapy and related therapies, Chelation therapy, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy, VAX-D, Low level laser therapy, Photodynamic therapy and such other similar therapies. -**Code Excl 26.**

27.Unconventional, untested, experimental therapies. -**Code Excl 27.**

28.Autologous derived Stromal vascular fraction, Chondrocyte Implantation, Procedures using Platelet Rich plasma and Intra articular injection therapy Immunotherapy without proper indication. -**Code Excl 28.**

29.Biologicals, except when administered as an in-patient, when clinically indicated and hospitalization warranted. -**Code Excl1 29.**

- 30.All treatment for Priapism and erectile dysfunctions **-Code Excl 30.**
- 31.Inoculation or Vaccination (except for post-bite treatment and for medical treatment other than for prevention of diseases).  
**-Code Excl 31.**
- 32.Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization. (Dental implants are not payable).  
**-Code Excl 32.**
- 33.Medical and / or surgical treatment of Sleep apnea, treatment for endocrine disorders **-Code Excl 33.**
- 34.Hospital registration charges, admission charges, record charges, telephone charges and such other charges **-Code Excl 34.**
- 35.Cost of spectacles and contact lens, hearing aids, Cochlear implants and procedures, walkers and crutches, wheel chairs, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis, infusion pump and such other similar aids. **-Code Excl 35.**
- 36.Any hospitalizations which are not Medically Necessary **-Code Excl 36.**
- 37.Other Excluded Expenses as detailed in the website " www.starhealth.in" **Code- Excl 37.**
- 38.Existing disease/s, disclosed by the insured and mentioned in the policy schedule (based on insured's consent), for specified ICD codes.  
**-Code Excl 38.**
- 39.Naturopathy Treatment **-Code Excl 40.**

#### D.CONDITIONS

##### Standard Conditions

**1.Disclosure of Information:** The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or non-disclosure of any material fact by the policy holder.

#### 2.Claim Settlement

- A. **Condition Precedent to Admission of Liability:** The terms and conditions of the policy must be fulfilled by the insured person for the Company to make any payment for claim(s) arising under the policy.
- B. **Documents for Cashless Treatment:**
- a. Call the 24 hour help-line for assistance - 1800 425 2255/1800 102 4477  
Senior Citizens may call at 044 40020888
  - b. Inform the ID number for easy reference
  - c. On admission in the hospital, produce the ID Card issued by the Company at the Hospital Helpdesk
  - d. Obtain the Pre-authorisation Form from the Hospital Help Desk, complete the Patient Information and resubmit to the Hospital Help Desk.
  - e. The Treating Doctor will complete the hospitalisation/ treatment information and the hospital will fill up expected cost of treatment. This form is submitted to the Company
  - f. The Company will process the request and call for additional documents / clarifications if the information furnished is inadequate.
  - g. Once all the details are furnished, the Company will process the request as per the terms and conditions as well as the exclusions therein and either approve or reject the request based on the merits.
  - h. In case of emergency hospitalization information to be given within 24 hours after hospitalization
  - i. Cashless facility can be availed only in networked Hospitals. For details of Networked Hospitals, the insured may visit [www.starhealth.in](http://www.starhealth.in) or contact the nearest branch.

In non-network hospitals payment must be made up-front and then reimbursement will be effected on submission of documents.

**Note:** The Company reserves the right to call for additional documents wherever required.

Denial of a Pre-authorization request is in no way to be construed as denial of treatment or denial of coverage. The Insured Person can go ahead with the treatment, settle the hospital bills and submit the claim for a possible reimbursement.

**C.For Reimbursement claims :** Time limit for submission of

Sl.no.	Type of Claim	Prescribed time limit
1	Reimbursement of hospitalization, day care and pre hospitalization expenses	Claim must be filed within 15 days from the date of discharge from the Hospital.
2	Reimbursement of Post hospitalization	within 15 days after date of discharge from hospital

**D. Notification of Claim :** Upon the happening of the event, notice with full particulars shall be sent to the Company within 24 hours from the date of occurrence of the event irrespective of whether the event is likely to give rise to a claim under the policy or not.

**Note:** Conditions C and D are precedent to admission of liability under the policy. However the Company will examine and relax the time limit mentioned in these conditions depending upon the merits of the case.

**E.Documents to be submitted for Reimbursement:** The reimbursement claim is to be supported with the following documents and submitted within the prescribed time limit.

- a. Duly completed claim form, and
- b. Pre Admission investigations and treatment papers.
- c. Discharge Summary from the hospital
- d. Cash receipts from hospital, chemists
- e. Cash receipts and reports for tests done
- f. Receipts from doctors, surgeons, anesthetist
- g. Certificate from the attending doctor regarding the diagnosis.
- h. KYC (Identity Proof, Address Proof) of the proposer where claim liability is above Rs.1 Lakh as per AML Guidelines.

Organ transplant on the Insured Person shall satisfy the requirements of the Transplantation of Human Organs Act of 1994 and any amendments thereto

### 3.Provision for Penal Interest

- i) The Company shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of last necessary document
- ii) In the case of delay in the payment of a claim, the Company shall be liable to pay interest to the policyholder from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate
- iii) However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document. In such cases, the Company shall settle or reject the claim within 45 days from the date of receipt of last necessary document
- iv) In case of delay beyond stipulated 45 days, the Company shall be liable to pay interest to the policyholder at a rate 2% above the bank rate from the date of receipt of last necessary document to the date of payment of claim
- v) "Bank rate" shall mean the rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.

**4.Complete Discharge:** Any payment to the policyholder, insured person or his/ her nominees or his/ her legal representative or assignee or to the Hospital, as the case may be, for any benefit under the policy shall be a valid discharge towards payment of claim by the Company to the extent of that amount for the particular claim

### 5.Multiple Policies

- i. In case of multiple policies taken by an insured person during a period from one or more insurers to indemnify treatment costs, the insured person shall have the right to require a settlement of his/her claim in terms of any of his/her policies. In all such cases the insurer chosen by the insured person shall be obliged to settle the claim as long as the claim is within the limits of and according to the terms of the chosen policy
- ii. Insured person having multiple policies shall also have the right to prefer claims under this policy for the amounts disallowed under any other policy / policies even if the sum insured is not exhausted. Then the insurer shall independently settle the claim subject to the terms and conditions of this policy
- iii. If the amount to be claimed exceeds the sum insured under a single policy, the insured person shall have the right to choose insurer from whom he/she wants to claim the balance amount
- iv. Where an insured person has policies from more than one insurer to cover the same risk on indemnity basis, the insured person shall only be indemnified the treatment costs in accordance with the terms and conditions of the chosen policy

**6.Fraud:** If any claim made by the insured person, is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the insured person or anyone acting on his/her behalf to obtain any benefit under this policy, all benefits under this policy and the premium paid shall be forfeited.

Any amount already paid against claims made under this policy but which are found fraudulent later shall be repaid by all recipient(s)/policyholder(s), who has made that particular claim, who shall be jointly and severally liable for such repayment to the insurer.

For the purpose of this clause, the expression "fraud" means any of the following acts committed by the insured person or by his agent or the hospital/doctor/any other party acting on behalf of the insured person, with intent to deceive the insurer or to induce the insurer to issue an insurance policy:

- a) the suggestion, as a fact of that which is not true and which the insured person does not believe to be true;
- b) the active concealment of a fact by the insured person having knowledge or belief of the fact;
- c) any other act fitted to deceive; and
- d) any such act or omission as the law specially declares to be fraudulent

The Company shall not repudiate the claim and / or forfeit the policy benefits on the ground of Fraud, if the insured person / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such misstatement of or suppression of material fact are within the knowledge of the insurer.

### 7.Cancellation

i. The policyholder may cancel this policy by giving 15 days' written notice and in such an event, the Company shall refund premium for the unexpired policy period as detailed below;

PERIOD ON RISK	RATE OF PREMIUM TO BE RETAINED
Up to one-month	25% of annual premium
Exceeding one month and Up to three months	40% of annual premium
Exceeding three months and Up to six months	60% of annual premium
Exceeding six months and Up to nine months	80% of annual premium
Exceeding nine months	Full annual premium

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the insured person under the policy.

ii. The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the insured person by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud

**8.Renewal of policy:** The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the Insured Person.

1. The Company shall endeavor to give notice for renewal. However, the Company is not under obligation to give any notice for renewal.
2. Renewal shall not be denied on the ground that the insured person had made a claim or claims in the preceding policy years.
3. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.
4. At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy.
5. Coverage is not available during the grace period.
6. In the event of the group policy being discontinued or not renewed or when the members of the group leave the group on account of resignation/retirement/termination or otherwise, the following provision shall apply.
  - a. The insured person/s covered under this group policy will be granted cover under Indemnity based Individual Health Policy. In respect of persons who have been covered continuously for a period of one year under this group policy with the Company, exclusion Code Excl - 03 shall be waived.
  - b. In respect of persons who have been covered continuously for a period of two years under this group policy with the Company, exclusions Code Excl-03 and Code Excl-02 shall be waived
  - c. In respect of persons who have been covered continuously for a period of four years under this group policy with the Company, exclusions Code Excl-03, Code Excl-02 and Code Excl-03 shall be waived.

## 9. Withdrawal of policy

- i. In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy
- ii. Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period as per IRDAI guidelines, provided the policy has been maintained without a break

**10. Moratorium Period:** After completion of eight continuous years under the policy no look back to be applied. This period of eight years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of 8 continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no health insurance claim shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the policy contract.

**11. Redressal of Grievance:** In case of any grievance the insured person may contact the Company through

**Website :** [www.starhealth.in](http://www.starhealth.in)

**Toll free :** 1800 425 2255/1800 102 4477

**Senior Citizens may call at 044-28243923**

**E-mail :** [grievances@starhealth.in](mailto:grievances@starhealth.in); [gro@starhealth.in](mailto:gro@starhealth.in)

**Ph. No. :** 04428319100

**Courier :** No.1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai 600034

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.

If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at 044-28243921.

For updated details of grievance officer, kindly refer the link

<https://www.starhealth.in/grievance-redressal>

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017.

Grievance may also be lodged at IRDAI Integrated Grievance Management System - <https://igms.irda.gov.in/>

**12. Nomination:** The policyholder is required at the inception of the policy to make a nomination for the purpose of payment of claims under the policy in the event of death of the policyholder. Any change of nomination shall be communicated to the company in writing and such change shall be effective only when an endorsement on the policy is made. In the event of death of the policyholder, the Company will pay the nominee {as named in the Policy Schedule/Policy Certificate/Endorsement (if any)} and in case there is no subsisting nominee, to the legal heirs or legal representatives of the policyholder whose discharge shall be treated as full and final discharge of its liability under the policy.

### **Specific Conditions**

**13.** The Insured Person shall obtain and furnish the Company with all original bills, receipts and other documents upon which a claim is based and shall also give the Company such additional information and assistance as the Company may require in dealing with the claim

**14.** All claims under this policy shall be payable in Indian currency.

**15.** The premium payable under this policy shall be payable in advance. No receipt of premium shall be valid except acknowledged on the official form of the company signed by a duly authorized official of the company. The due payment of premium and the observance of fulfillment of the terms, provision, conditions and endorsements of this policy by the Insured Person/s, in so far as they relate to anything to be done or complied with by the Insured Person/s, shall be a condition precedent to admission any liability of the Company to make any payment under this policy. No waiver of any terms, provisions, conditions, and endorsements of this policy shall be valid unless made in writing and signed by an authorized official of the Company.

**16.** Any medical practitioner authorized by the company shall be allowed to examine the Insured Person/s in case of any alleged injury or diseases requiring hospitalization when and as often as the same may reasonably be required on behalf of the Company at the Company's cost.

## 17. Addition / Deletion

1. **Addition : Enrolment of new insured persons / beneficiary** will be made during the period of insurance stated in the master policy schedule. The period of insurance for such newly enrolled insured person / beneficiary will be for a period of one year as stated in the certificate of insurance issued to the insured person / beneficiary.
2. **Deletion of insured persons / beneficiary** from the Group can be made and refund will be effected on pro-rata basis from the date of request for deletion of the insured person(s) / beneficiary subject to NO claim being made in respect of that insured



person(s) / beneficiary or his/her family member(s).

**18. Notices :** Any notice, direction or instruction given under this policy shall be in writing and delivered by hand, post, or facsimile/email to Star Health and Allied Insurance Company Limited, No 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai-600034. Fax no: 044-28302200, Toll free no: 1800-425-2255, Toll free fax no: 1800-425-5522 Email: support@starhealth.in Notice and instructions will be deemed served 7 days after posting or **immediately** upon receipt in the case of hand delivery, facsimile or e-mail.

**19. Territorial Limit :** All medical/surgical treatments under this policy shall have to be taken in India.

**20. Automatic Termination:** The insurance under this policy with respect to each relevant insured person / family shall terminate immediately on the earlier of the following events:

1. Upon the death of the Insured Person. This also means that in case of family floater policy, cover for the other surviving members of the family will continue, subject to other terms of the policy.
2. Upon exhaustion of the sum insured

**21. Policy disputes:** Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein is understood and agreed to by both the Insured and the Company to be subject to Indian Law.

**22. Arbitration** If any dispute or difference shall arise as to the quantum to be paid under this policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to the dispute/difference, or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators. Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration, as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

It is also further expressly agreed and declared that if the Company shall disclaim liability to the Insured for any claim hereunder and such claim shall not, within three years from the date of such disclaimer have been made the subject matter of a suit in a Court of Law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

**23. Automatic Termination of Individual Certificate of Insurance.** The Certificate of Insurance will terminate on the earliest of the following dates:

1. The date of expiry of certificate of insurance or
2. The date the Insured Person / beneficiary is no longer eligible to be within the classification of Insured Person(s) described in the Policy Schedule or
3. The Insured person / beneficiary ceases to be a resident of India or
4. From the date the Certificate of Insurance is cancelled either by the Company

**24.** All claims under this policy shall be payable in Indian currency. All medical /surgical treatments under this policy shall have to be taken in India.

**25. Important Note:**

- a. Where the policy is on floater basis the sum insured and sub-limits float amongst family members covered
- b. The Policy Schedule, Certificate of Insurance and Endorsement are to be read together and any word or such meaning wherever it appears shall have the meaning as stated in the Act / Indian Laws. The Special Conditions if any stated in the Schedule supersede these policy wordings.
- c. The terms conditions and exceptions that appear in the Policy or in any Endorsement are part of the contract, must be complied with. Failure to comply may result in the claim being denied.
- d. The attention of the policy holder / Insured Person is drawn to our website [www.starhealth.in](http://www.starhealth.in) for anti fraud policy of the company for necessary compliance by all stake holders

**26. Role of Group Administrator / Proposer**

The Group administrator / Proposer shall play a facilitative role between the Insurer and the Insured Person. Such role includes

- 1) Furnish to the Company detailed list of Insured Person/s for preparation of Individual Certificate and ID cards
- 2) Distribute Individual Certificate and ID cards received from the Company. (However, where the Company issues ID card / Individual Certificates in electronic form directly to the Insured Person/s this will not apply).
- 3) To facilitate Insured Person / s in availing all insurance related services including cashless facility wherever required.
- 4) If a member leaves the group as per group rules, group administrator should facilitate to provide option to migrate to another policy at premium as applicable for such individual insurance. In such event :-
  - a. Members who have been covered continuously for a period of one year under this Star Group Health Insurance Policy with the Company, 30 days waiting period and First year exclusions shall be waived.
  - b. Members who have been covered continuously for a period of two years under this Star Group Health Insurance Policy with the Company, 30 days waiting period, First year exclusions and First two year exclusions / First two year waiting period shall be waived.
  - c. In respect of members who have been covered continuously for a period a four years under this Star Group Health Insurance Policy with the Company, 30 days waiting period, First year, First two year exclusions, 48 months waiting period with reference to Pre Existing diseases shall be waived.

**27.Customer Service:** If at any time the Insured Person- requires any clarification or assistance, the insured may contact No.1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai 600034, during normal business hours.

## List of Insurance Ombudsman

CONTACT DETAILS	JURISDICTION
<p><b>AHMEDABAD</b> Office of the Insurance Ombudsman, 6th floor, Jeevan Prakash Building, Near S.V. College, Relief Road, Ahmedabad 380001, Tel 079-25501201-02-05-06. Email:- <a href="mailto:bimalokpal.ahmedabad@cioins.co.in">bimalokpal.ahmedabad@cioins.co.in</a> <b>Website :</b> <a href="http://www.ecoi.co.in">www.ecoi.co.in</a></p>	<p>Gujarat, Dadra &amp; Nagar Haveli, Daman and Diu</p>
<p><b>BENGALURU</b> Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No.57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru-560 078. Tel.:-080-26652048/26652049 Email:- <a href="mailto:bimalokpal.bengaluru@cioins.co.in">bimalokpal.bengaluru@cioins.co.in</a></p>	<p>Karnataka.</p>
<p><b>BHOPAL</b> Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp.Airtel Office, Near New Market, Bhopal - 462 033. Tel.:- 0755-2769201/202 Fax:- 0755-2769203 Email:- <a href="mailto:bimalokpal.bhopal@cioins.co.in">bimalokpal.bhopal@cioins.co.in</a></p>	<p>States of Madhya Pradesh and Chattisgarh.</p>
<p><b>BHUBANESHWAR</b> Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar - 751 009. Tel.:- 0674-2596461 / 2596455 Fax:- 0674-2596429 Email:- <a href="mailto:bimalokpal.bhubaneswar@cioins.co.in">bimalokpal.bhubaneswar@cioins.co.in</a></p>	<p>State of Orissa.</p>
<p><b>CHANDIGARH</b> Office of the Insurance Ombudsman, S.C.O. No. 101, 102 &amp; 103, 2nd Floor, Batra Building, Sector 17 - D, Chandigarh - 160 017. Tel.:- 0172-2706196/ 2706468 Fax:- 0172-2708274 Email:-<a href="mailto:bimalokpal.chandigarh@cioins.co.in">bimalokpal.chandigarh@cioins.co.in</a></p>	<p>States of Punjab, Haryana, Himachal Pradesh, Jammu &amp; Kashmir and Union territory of Chandigarh</p>
<p><b>DELHI</b> Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi - 110 002. Tel.:- 011-23239633/23237532 Fax:- 011-23230858 Email:- <a href="mailto:bimalokpal.delhi@cioins.co.in">bimalokpal.delhi@cioins.co.in</a></p>	<p>State of Delhi</p>

**ERNAKULAM**

Office of the Insurance Ombudsman,  
2nd floor, Pulinat Building, Opp. Cochin Shipyard,  
M.G. Road, Ernakulam - 682 015. Tel.:- 0484-  
2358759/2359338 Fax:- 0484-2359336  
Email:- bimalokpal.ernakulam@gbic.co.in

Kerala, Lakshadweep, Mahe-a part of  
Pondicherry

**GUWAHATI**

Office of the Insurance Ombudsman,  
'Jeevan Nivesh', 5th Floor, Nr. Panbazar over bridge, S.S. Road,  
Guwahati - 781001(ASSAM). Tel.:- 0361- 2132204 / 2132205  
Fax:- 0361-2732937 Email:- **bimalokpal.guwahati@cioins.co**

States of Assam, Meghalaya, Manipur, Mizoram,  
Arunachal Pradesh, Nagaland and Tripura.

**HYDERABAD**

Office of the Insurance Ombudsman,  
6-2-46, 1st floor, "Moin Court" Lane Opp. Saleem Function  
Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004.  
Tel.:- 040-65504123/23312122 Fax:- 040-23376599  
Email:-**bimalokpal.hyderabad@cioins.co.in**

States of Andhra Pradesh, Telangana and Union  
Territory of Yanam - a part of the Union Territory  
of Pondicherry.

**JAIPUR**

Office of the Insurance Ombudsman,  
Jeevan Nidhi-II Bldg., Ground Floor,  
Bhawani Singh Marg, Jaipur - 302005.  
Tel.:- 0141-2740363 Email:-  
**bimalokpal.jaipur@cioins.co.in**

State of Rajasthan.

**KOLKATA**

Office of the Insurance Ombudsman,  
Hindustan Building Annexe, 4th floor, 4, CR Avenue,  
Kolkata - 700 072. Tel.:- 033-22124339 / 22124340  
Fax:- 033-22124341 Email:-**bimalokpal.kolkata@cioins.co.in**

States of West Bengal, Bihar, Sikkim and Union  
Territories of Andaman and Nicobar Islands.

**LUCKNOW**

Office of the Insurance Ombudsman,  
6th Floor, Jeevan Bhawan,  
Phase-II, Nawal Kishore Road,  
Hazratganj,  
Lucknow-226 001.  
Tel.:- 0522-2231330 / 2231331  
Fax:- 0522-2231310.  
Email:- bimalokpal.lucknow@cioins.co.in

District of Uttar Pradesh: Lalitpur, Jhansi,  
Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad,  
Mirzapur, Sonbhadra, Fatehpur, Pratapgarh,  
Jaunpur, Varansi, Gazipur, Jalaun, Kanpur,  
Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich,  
Barabanki, Raebareli, Sravasti, Gonda, Faizabad,  
Amethi, Kaushambi, Balrampur, Basti,  
Ambedkarnagar, Sulanpur, Maharajganj,  
Santkabirnagar, Azamgarh, Kaushinagar, Gorkhpur,  
Deoria, Mau, Chandauli, Ballia, Sidharathnagar.

<p><b>MUMBAI</b> Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.:- 022-26106552/26106960 Fax:- 022-26106052 Email:- <b>bimalokpal.mumbai@cioins.co.in</b></p>	<p>States of Goa, Mumbai Metropolitan Region excluding Navi Mumbai &amp; Thane.</p>
<p><b>NOIDA</b> Office of the Insurance Ombudsman, Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector-15, Distt: Gautam Budh Nagar, U.P- 201301 Tel: 0120-2514250 / 2514252 / 2514253 Email:- <b>bimalokpal.noida@cioins.co.in</b></p>	<p>States of Uttaranchal and the following Districts of Uttar Pradesh:. Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozabad, Gautam Budh Nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.</p>
<p><b>PATNA</b> Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna - 800 006.Tel:0612-2680952 Email:- <b>bimalokpal.patna@cioins.co.in</b></p>	<p>States of Bihar and Jharkhand.</p>
<p><b>PUNE</b> Office of the Insurance Ombudsman, Jeevan Darshan Building, 3rd Floor, CTS Nos. 195 to 198, NC Kelkar Road, Narayan Peth, Pune - 411 030 Tel: 020 -41312555 Email:- <b>bimalokpal.pune@cioins.co.in</b></p>	<p>States of Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region</p>

<b><u>Items that are to be subsumed into Room Charges</u></b>	
<b>Sl. No.</b>	<b>Item</b>
1	BABY CHARGES (UNLESS SPECIFIED/INDICATED)
2	HAND WASH
3	SHOE COVER
4	CAPS
5	CRADLE CHARGES
6	COMB
7	EAU-DE-COLOGNE / ROOM FRESHNERS
8	FOOT COVER
9	GOWN
10	SLIPPERS
11	TISSUE PAPER
12	TOOTH PASTE
13	TOOTH BRUSH
14	BED PAN
15	FACE MASK
16	FLEXI MASK
17	HAND HOLDER
18	SPUTUM CUP
19	DISINFECTANT LOTIONS
20	LUXURY TAX
21	HVAC
22	HOUSE KEEPING CHARGES
23	AIR CONDITIONER CHARGES
24	IM IV INJECTION CHARGES
25	CLEAN SHEET
26	BLANKET/WARMER BLANKET

27	ADMISSION KIT
28	DIABETIC CHART CHARGES
29	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES
30	DISCHARGE PROCEDURE CHARGES
31	DAILY CHART CHARGES
32	ENTRANCE PASS / VISITORS PASS CHARGES
33	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE
34	FILE OPENING CHARGES
35	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)
36	PATIENT IDENTIFICATION BAND / NAME TAG
37	PULSEOXYMETER CHARGES

<b><u>Items that are to be subsumed into Procedure Charges</u></b>	
<b>Sl. No.</b>	<b>Item</b>
1	HAIR REMOVAL CREAM
2	DISPOSABLES RAZORS CHARGES (for site preparations)
3	EYE PAD
4	EYE SHEILD
5	CAMERA COVER
6	DVD, CD CHARGES
7	GAUSE SOFT
8	GAUZE
9	WARD AND THEATRE BOOKING CHARGES
10	ARTHROSCOPY AND ENDOSCOPY INSTRUMENTS
11	MICROSCOPE COVER
12	SURGICAL BLADES, HARMONICSCALPEL,SHAVER
13	SURGICAL DRILL
14	EYE KIT
15	EYE DRAPE
16	X-RAY FIL
17	BOYLES APPARATUS CHARGES
18	COTTON
19	COTTON BANDAGE
20	SURGICAL TAPE
21	APRON
22	TORNIQUET
23	ORTHOBUNDLE, GYNAEC BUNDLE

<b><u>Items that are to be subsumed into costs of treatment</u></b>	
<b>Sl. No.</b>	<b>Item</b>
1	ADMISSION/REGISTRATION CHARGES
2	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE
3	URINE CONTAINER
4	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGE
5	BIPAP MACHINE
6	CPAP/ CAPD EQUIPMENTS
7	INFUSION PUMP & COST
8	HYDROGEN PEROXIDE \ SPIRIT \ DISINFECTANTS ETC
9	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES - DIET CHARGE
10	HIV KIT
11	ANTISEPTIC MOUTHWASH
12	LOZENGES
13	MOUTH PAINT
14	VACCINATION CHARGE
15	ALCOHOL SWABS
16	SCRUB SOLUTION/STERILLIUM
17	GLUCOMETER & STRIPS
18	URINE BAG





SAIBALAJI EDUCATIONAL SOCIETY  
SAIBALAJI INTERNATIONAL INSTITUTE OF MANAGEMENT SCIENCES **SBIIMS**  
SBIIMS PUNE  
Affiliated to Savitribai Phule Pune University  
Approved by AICTE, Ministry of HRD, Govt. of India

## **Staff Insurance Policy 2022-2023**

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General Insurance Company Ltd.

DEVELOPMENT HOUSE, 24 Park Street , Kolkata -700016

(www.magmahdi.com)

IRDA REG NO. 149 DATED 22nd MAY,2012

CIN: U66000WB2009PLC136327

In case of any query, assistance or claims, please contact us at 1800 266 3202

UIN: MAGHLGP21234V022021

Date : 29/10/2022

To,  
**SAI BALAJI EDU SOCIETY**  
**S. NO. 54/1/A/1, DUTTAWADI NERE ,PUNE**  
**PUNE**  
**MAHARASHTRA 412206**  
**Mobile:9850995879**



Dear Sir/Madam,

Subject: Risk Assumption Letter

Thank you for choosing Magma-HDI General Insurance Company Limited as your preferred General Insurance Company. Please find attached herewith Policy No: P0023200002/6115/100080 which has been issued based on the information received from you and accordingly, the proposal has been processed.

Coverage of risk is subject to realisation of the full premium post which, insurance coverage under the policy would commence. In case the premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

**If you require any changes in the certificate of insurance cum policy schedule, you are requested to inform us by either writing to us at [customer@magmahdi.co.in](mailto:customer@magmahdi.co.in) or calling our toll free helpline on 1800 266 3202. Absence of any communication from you in this regard within a period of 20 days of date of this letter, would mean that the issued policy is in order and as per your proposal.**

The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered as null and void without the same.

Thanking You,  
 Regards

**For Magma HDI General Insurance Company Ltd**

Authorised Signatory

Group Health Insurance

Key Information Sheet

**Disclaimer Note:** The information mentioned below is illustrative and not exhaustive. The information must be read in conjunction with the policy wordings. In case of any conflict between the Key Information Sheet and the policy wordings, the terms and conditions mentioned in the policy wordings shall prevail.

Sl. No.	Title	Description	Refer to Policy Wordings
1.	Product Name	Group Health Insurance	
2.	What is covered under the policy?	The policy provides indemnification of medical expenses incurred by the Insured during the hospitalization or outpatient basis (as the case may be) for any illness or injury suffered during the Policy Period.	Policy Schedule
3.	Optional Add On Covers(As Opted)	<ul style="list-style-type: none"> <li>• Room Rent Capping</li> <li>• Room category Limit</li> <li>• Pre and Post Hospitalisation Expenses</li> <li>• Ambulance Cover</li> <li>• Domiciliary Hospitalisation</li> <li>• AYUSH Treatment</li> <li>• Maternity Cover</li> <li>• Baby Day 1 Cover</li> <li>• Psychiatric treatment Cover</li> <li>• Corporate Floater</li> <li>• 30 day waiting period waiver cover</li> <li>• Specific disease waiting period reduction cover</li> <li>• Pre-existing Diseases cover</li> <li>• Top Up Cover (Aggregate Deductible Cover)</li> <li>• Co-Payment</li> <li>• Disease Sub-limit Cover</li> </ul>	Benefits covered under the policy: Extension Covers
4.	Payout Basis	• Cashless or Reimbursement of covered medical expenses up to specified Sum Insured as per the scope of cover.	Specific Terms and clauses: Claim Procedure
5.	Terms of Renewal	<ul style="list-style-type: none"> <li>• The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.</li> <li>• Renewal shall not be denied on the ground that the insured had made a claim or claims in the preceding policy years</li> </ul>	Standard General Terms and Conditions: Renewal of Policy
6.	Cancellation	<p>The Policyholder may cancel this Policy by giving 15 days' written notice and in such an event, the Company shall refund premium for the unexpired policy period as detailed below: We shall cancel the Policy and refund the premium for the balance of the Policy Period in accordance with the table, after deducting the amount spent on pre-policy medical check up by Us, provided that no claim has been made under the Policy by or on behalf of any Insured Person.</p> <p>We may cancel the Policy and refund the premium for the balance of the Policy Period on pro-rata basis, if specified so in Policy Schedule/Certificate of Insurance.</p> <p>Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any Benefit has been availed by the Insured person under the Policy. The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the Insured Person, by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud.</p>	Standard General Terms and Conditions: Cancellation/ Termination (other than Free Look cancellation)



**DEVELOPMENT HOUSE, 24 Park Street , Kolkata -700016**  
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**IRDA REG NO. 149 DATED 22nd MAY,2012**  
**CIN: U66000WB2009PLC136327**  
**In case of any query, assistance or claims, please contact us at 1800 266 3202**  
**UIN: MAGHLP21234V022021**

**Policy Schedule / TAX INVOICE**

**Group Health Insurance**

**Policy Details**

<b>Policy Issuing Office</b>	5TH FLOOR, BUILDING AMAR AVINASH CORPORATE CITY, BUND GARDEN ROAD, ABOVE HSBC BANK, , PUNE -411001 ,MAHARASHTRA , PH: (1800) 2663202
<b>Policy Number</b>	P0023200002/6115/100080
<b>Name of Insured</b>	SAI BALAJI EDU SOCIETY
<b>Address of the Insured</b>	S. NO. 54/1/A/1, DUTTAWADI NERE ,PUNE PUNE MAHARASHTRA 412206 Mobile:9850995879
<b>GST Number</b>	Unregistered
<b>Policy Period</b>	
<b>Start Date &amp; time</b>	00:01 Hrs on 01/10/2022
<b>End Date &amp; time</b>	23:59 hrs on 30/09/2023

**Intermediary Details**

Intermediary Name	Intermediary Code	Contact Number
INTERLINK INSURANCE & REINSURANCE BROKERS PVT LTD	BRC0000264	7045646596

**Other Basic Details**

<b>No. of lives insured</b>	279
<b>Details of Persons Insured</b>	As per Annexure
<b>Total Sum Insured</b>	26000000
<b>Maximum Sum Insured</b>	400000
<b>Sum Insured Type</b>	Family Floater

**Premium**

Net Premium	590,000.00
CGST @ 9%	53,100.00
SGST @ 9%	53,100.00
Total Premium	696,200.00

**Co-Insurance Details:-**

Insurer	Share (%)
Magma HDI General Insurance Co. Ltd.	100

**Details of Coverage and Sum Insured**

Cover	Coverage Details
Third Party Administrator	MDIndia Health Insurance TPA Private Limited
Service Category	Both Cashless & Reimbursement
Pre-existing Disease	Covered
Specific disease waiting period	Waived off
Initial waiting period	Waived off
Domiciliary Hospitalisation	Not covered
Family Definition	Employee, spouse and 2 children upto the age of 25 years covered under the policy
Age Band	1day - 70 yrs
Sum Insured	Sum Insured of Rs.200000/-, 400000/- Per family during the policy period of one year.
Pre - Post Hospitalisation	Pre and Post Hospitalisation for 30 days & 60 days respectively are covered under the policy.
Room Rent	Room Rent is restricted to 1% of SI for Normal & 2% of SI for ICU (Room rent limit incl. of nursing charges). In case of admission in normal room, if insured is admitted in a higher category, then insured will bear difference of all associated medical expenses as in final hospital bill in same proportion.
Day care procedures	Day care procedures are covered as per Magma HDI Day care list.
Maternity Benefit	

for Normal & C-Section	Maternity not covered
9 Months Waiting Period	Not covered
Baby Day 1	New born baby covered from day one
Mid-Term Inclusion of dependents	Mid term inclusion of dependents will be possible only in case of: a) spouse (on account of marriage during the policy term), b) children (childbirth during the policy term and is covered from day 1) subject to not more than two children being covered in the policy.
Pre/Post Natal Expenses	Pre-post natal expenses not covered
Co-Payment	Copay not applicable
PPN Option	Not applicable
Add-Del of Lives	Premium to be charged on Pro-Rata basis for addition/deletion endorsement.
Ayush treatment	Ayush treatment covered under the policy upto 25% of FSI in govt. recognised hospitals only
Ambulance Service	Ambulance Charges limited to Rs.2500 Per Person.
Corporate Floater	CF not applicable
OPD Cover	OPD Not covered
Wellness services	Following wellness services will be covered under the policy for maximum upto 4 members per family. 1. E consultation: Tele Doctor Consultations for General physician can be availed through our service provider.2. Fitness Pass (Daily Live classes by Fitness experts on our service provider Platform - Yoga, Zumba, Functional fitness etc.) 3. Exclusive Platform Benefits:-up to 50% discounts on Doctor consultation, Health Tests, Health Check-up packages,-Up to 15% discount on prescription medicines online orders via our service provider.
Service provider details	Health Assure is our authorized service provider for Wellness and Value add benefits under this policy. You can avail these benefits through Health Assure's website www.healthassure.in/products Or through mobile Health Assure App that can be downloaded from App store/Google Play store. You can also contact on 022-61676633. You will receive SMS on your registered mobile no. with all these details along with login credentials.
Id cards	E-cards to be issued
Domiciliary Hospitalization	Not covered
Special Condition	Liability for Nasal Sinus Surgeries upto Rs.35,000; Hospitalisation arising out of Psychiatric ailments upto Rs.30,000
Special Condition	Lasik surgery covered above +/- 7.5
Special Condition	50% Co-Pay for cyberknife treatment, Stem Cell Transplantation, Uterine Artery Embolization and HIFU, Balloon Sinuplasty, Deep Brain stimulation, Immunotherapy- Monoclonal Antibody to be given as injection, Robotic surgeries, Stereotactic radio surgeries, Bronchical Thermoplasty, Vaporisation of the prostate (Green laser treatment or holmium laser treatment), IONM - (Intra Operative Neuro Monitoring). Cochlear Implant treatment and Oral chemotherapy shall be restricted to 50% of the Sum Insured(SI). Intra vitreal injection is covered upto 50% of SI maximum upto Rs.50,000 per family.
Special Condition	No Refund for deletion if lives less than minimum required & if insured has claimed during policy.
Special Condition	Internal Congenital disease is covered and external Congenital disease is covered under life threatening situation.
Special Condition	Hospitalization due to terrorism is covered under the policy.
Portability	Portability/Migration benefit can be availed at the time of retirement or resignation from the services (Provided these events are falling within the policy period). Portability option is available as per IRDA guideline under the existing retail health products. Standard coverage, terms & conditions, prevailing underwriting guidelines of retail product would apply.
Claim Intimation and Submission of Documents	All reimbursement claims have to be intimated within 15 days of discharge. Claims have to be submitted for reimbursement within 30 days of date of discharge of the patient. However, the Company may at its absolute discretion consider waiver of this Condition in extreme cases of hardship where it is proved to the satisfaction of the Company that under the circumstances in which the insured was placed it was not possible for him or any other person to give such notice or file claim within the prescribed time-limit. The claims would invite additional 10% co-payment over and above payable amount only in case of delay in submission of claims beyond 30 days.
Diseases Wise Sublimits	Cataract : Metro 20,000/- Non-Metro 20,000/-
Diseases Wise Sublimits	CKD, Cancer, Joint replacement and Heart related: Metro 300,000/- Non-Metro 300,0000/-

**Exclusions**

Exclusion	Exclusion Details
Exclusion	Septoplasty, Infertility & Related Ailments including Male sterility; Treatment on trial/experimental basis; Admin/Registration/Service/Misc. Charges; Expenses on fitting of Prosthesis; Any device/instrument/machine contributing/replacing the function of an organ; Holter Monitoring are outside the scope of the policy.

IN WITNESS WHEREOF the undersigned being duly authorized by and on behalf of the Company has/have here onto set his/their hands

**Premium Collection Details** :- [ReceiptDate - Amount] :- 01/10/2022 , ₹ 696200

**Premium Amount in Word's (₹)** :- Six Lakhs Ninety-Six Thousand Two Hundred Only

**Disclaimer:**

- This Policy shall be null and voidable initio if the Premium cheque / the valid negotiable instrument as receipted by this company bearing the Collection No is dishonored by the bank.
- Issuance of the Premium receipt is not a proof of risk acceptance.

For and behalf of Magma HDI General Insurance Company Limited

*Mayank Tandia*

DULY CONSTITUTED ATTORNEY(S)

GST Number of MHD1 - 27AAGCM1685C1ZJ  
GST Invoice Number - POL2710230031854

Accounting Code for Service - 997133, Accident and health insurance services

Place of Supply: MAHARASHTRA ( 27 )

Whether Tax is payable on Reverse Charge - No  
UIN : MAGHLGP21234V022021

This is a valid Tax invoice in terms of Sub-rule 2 of Rule 54 of CGST Rule 2017. Further, being an Insurance Company, issuing of e-invoice and QR Code are not applicable on us in terms of Notification No 13 and 14 of 2020 dated 21st March 2020 issued from Central Board of Indirect Taxes and Customs. 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.

Consolidated Stamp Duty on the issue of General Insurance Policies Paid vide G.O No. 1380, dated 22.08.2022

**Head Office Address: UNIT NO. 1B & 2B, 2ND FLOOR, EQUINOX BUSINESS PARK, TOWER 3, LBS MARG, KURLA (WEST), MUMBAI, MAHARASHTRA, 400070.**

**Registered Office address: Development House, 24, Park Street, Kolkata, Pincode - 700016  
IRDA REG NO. 149 DATED 22nd MAY, 2012**

**CIN: U66000WB2009PLC136327**

**• 1800-266-3202 • customercare@magma-hdi.co.in • www.magmahdi.com**

## Group Health Insurance

### Preamble

The insurance cover provided under this Policy up to the Sum Insured is and shall be subject to (a) the terms and conditions of this Policy, (b) the receipt of premium, and (c) Disclosure to information and statements which the Policyholder/ Insured person has provided in the proposal form for all persons to be insured. Please inform Us immediately of any change in the address, nature of job, state of health, or of any other changes affecting any Insured Person. If any claim arising as a result of an Illness or Injury that occurred during the Policy Period becomes payable, then We shall pay the Benefits in accordance with the terms, conditions and exclusions of the Policy subject to availability of Sum Insured.

### Definitions

The terms defined below have the meaning ascribed to them wherever they appear in this Policy and, where appropriate, references to the singular include references to the plural, references to male include female and references to any statutory enactment include subsequent changes, replacements or amendments to the same:

#### i. Standard Definitions

**Accident:** An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

**AYUSH Hospital** is a healthcare facility wherein medical/surgical/para-surgical treatment procedures and interventions are carried out by AYUSH Medical Practitioner(s) comprising of any of the following:

- a. Central or State Government AYUSH Hospital or
- b. Teaching hospital attached to AYUSH College recognized by the Central Government/Central Council of Indian Medicine/ Central Council for Homeopathy; or
- c. AYUSH Hospital, standalone or co-located with in-patient healthcare facility of any recognized system of medicine, registered with the local authorities, wherever applicable, and is under the supervision of a qualified registered AYUSH Medical Practitioner and must comply with the following criterion:

- i) Having at least 5 in-patient beds;
- ii) Having qualified AYUSH Medical Practitioner in charge round the clock;
- iii) Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out;
- iv) Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative.

**AYUSH Day Care Centre** means and includes Community Health Centre (CHC), Primary Health Centre (PHC), Dispensary, Clinic, Polyclinic or any such health centre which is registered with the local authorities, wherever applicable and having facilities for carrying out treatment procedures and medical or surgical/ para-surgical interventions or both under the supervision of registered AYUSH Medical Practitioner(s) on day care basis without in-patient services and must comply with all the following criterion:

- i) Having qualified registered AYUSH Medical Practitioner(s) in charge;
- ii) Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out;
- iii) Maintaining daily records of patient and making them accessible to the insurance company's authorized representative

**Any One Illness:** Any one illness means continuous period of illness and includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment was taken.

**Cashless facility:** Cashless facility means a facility extended by the insurer to the insured where the payments, of the costs of treatment undergone by the insured in accordance with the policy terms and conditions, are directly made to the network provider by the insurer to the extent pre-authorization is approved.

**Condition Precedent:** Condition Precedent means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.

**Congenital Anomaly:** Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

#### a) Internal Congenital Anomaly

Congenital anomaly which is not in the visible and accessible parts of the body.

#### b) External Congenital Anomaly

Congenital anomaly which is in the visible and accessible parts of the body

**Co-Payment:** Co-payment means a cost sharing requirement under a health insurance policy that provides that the policyholder/insured will bear a specified percentage of the admissible claims amount. A co-payment does not reduce the Sum Insured.

**Day Care Centre** A day care centre means any institution established for day care treatment of illness and/or injuries or a medical setup with a hospital and which has been registered with the local authorities, wherever applicable, and is under supervision of a registered and qualified medical practitioner and must comply with all minimum criteria as under:-

- i) has qualified nursing staff under its employment;
- ii) has qualified medical practitioner/s in charge;
- iii) has fully equipped operation theatre of its own where surgical procedures are carried out;
- iv) maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.

**Day Care Treatment** Day care treatment means medical treatment, and/or surgical procedure which is:

- i. undertaken under General or Local Anaesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
- ii. which would have otherwise required hospitalization of more than 24 hours.

Treatment normally taken on an out-patient basis is not included in the scope of this definition.

**Dental Treatment** Dental treatment means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.

**Disclosure to information norm** The policy shall be void and all premium paid hereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact.

**Domiciliary Hospitalization** Domiciliary hospitalization means medical treatment for an illness/disease/injury which in the normal course would require care and treatment at a hospital but is actually taken while confined at home under any of the following circumstances:

- i) the condition of the patient is such that he/she is not in a condition to be removed to a hospital, or
- ii) the patient takes treatment at home on account of non-availability of room in a hospital.

**Emergency Care** Emergency care means management for an illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a medical practitioner to prevent death or serious long term impairment of the insured person's health.

**Grace Period** Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.

**Hospital** A hospital means any institution established for in-patient care and day care treatment of illness and / or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) of the said act Or complies with all minimum criteria as under:

- i) Has qualified nursing staff under its employment round the clock;
- ii) has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
- iii) has qualified medical practitioner(s) in charge round the clock;
- iv) has a fully equipped operation theatre of its own where surgical procedures are carried out;
- v) maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.

**Hospitalization** Hospitalization means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

**Illness** Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.

(a) Acute condition - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery

(b) Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

1. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests

2. it needs ongoing or long-term control or relief of symptoms
3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
4. it continues indefinitely
5. it recurs or is likely to recur

**Injury** Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

**Inpatient Care** Inpatient care means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.

**Intensive Care Unit** Intensive care unit means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

**ICU Charges** ICU (Intensive Care Unit) Charges means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.

**Maternity expenses** Maternity expenses means:

- a) medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization);
- b) expenses towards lawful medical termination of pregnancy during the policy period.

**Medical Advice** Medical Advice means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.

**Medical Expenses** Medical Expenses means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.

**Medical Practitioner** Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy setup by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of licence.

**Medically Necessary Treatment** Medically necessary treatment means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:

- i) is required for the medical management of the illness or injury suffered by the insured;
- ii) must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- iii) must have been prescribed by a medical practitioner;
- iv) must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

**Migration** means the right accorded to health insurance policyholders (including all members under family cover and members of group health policy), to transfer the credit gained for pre-existing conditions and time bound exclusions, with the same insurer.

**Network Provider** Network Provider means hospitals enlisted by an insurer, TPA or jointly by an Insurer and TPA to provide medical services to an insured by a cashless facility.

**New Born Baby** New born baby means baby born during the Policy Period and is aged up to 90 days.

**Notification of Claim** Notification of claim means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.

**Non-Network Provider** Non-Network means any hospital, day care centre or other provider that is not part of the network.

**OPD treatment** OPD treatment means the one in which the Insured visits a clinic/ hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.

**Pre-Existing Disease** Pre-Existing Disease means any condition, ailment, injury or disease:

- a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement;
- or
- b) For which medical advice or treatment was recommended by, or received from, a Physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement.

**Pre-hospitalization Medical Expenses** Pre-hospitalization Medical Expenses means medical expenses incurred during pre-defined number of days preceding the hospitalization of the Insured Person, provided that:

- i. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
- ii. The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company.

**Post-hospitalization Medical Expenses** Post-hospitalization Medical Expenses means medical expenses incurred during pre-defined number of days immediately after the insured person is discharged from the hospital provided that:

- i. Such Medical Expenses are for the same condition for which the insured person's hospitalization was required, and
- ii. The inpatient hospitalization claim for such hospitalization is admissible by the insurance company.

**Qualified Nurse** means a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

**Reasonable and Customary Charges** Reasonable and Customary charges means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.

**Renewal** Renewal means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.

**Room Rent** means the amount charged by a Hospital towards Room and Boarding expenses and shall include the associated medical expenses.

**Surgery or Surgical Procedure** Surgery or Surgical Procedure means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.

**Unproven/Experimental treatment** Unproven/Experimental treatment means the treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.

**Critical Illness** for the purpose of this policy means

#### 1. Cancer of Specified Severity

A malignant tumour characterised by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukaemia, lymphoma and sarcoma.

The following are excluded-

- All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behaviour, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN - 2 and CIN-3.
- Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- Chronic lymphocytic leukaemia less than RAI stage 3
- Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification
- All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;
- All tumors in the presence of HIV infection.

#### 2. Kidney Failure Requiring Regular Dialysis

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or



peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

### 3. Multiple Sclerosis with Persisting Symptoms

The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:

- Investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
- There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

### 4. Major Organ/Bone Marrow Transplant

The actual undergoing of a transplant of:

- One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
- Human bone marrow using haematopoietic stem cells.

The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded:

- Other stem-cell transplants
- Where only islets of langerhans are transplanted

### 5) Open Heart Replacement or Repair of Heart Valves

The actual undergoing of open-heart valve surgery to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease-affected cardiac valve(s).

The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner.

Catheter based techniques including but not limited to, balloon valvotomy /valvuloplasty are excluded.

### 6) Open Chest CABG (Coronary Artery Bypass Graft)

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

The following are excluded:

- Angioplasty and/or any other intra-arterial procedures

### 7) Stroke resulting in Permanent Symptoms

Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intra-cranial vessel, haemorrhage and embolisation from an extra cranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.

The following are excluded:

- Transient Ischemic Attacks (TIA)
- Traumatic injury of the brain
- Vascular disease affecting only the eye or optic nerve or vestibular functions.

### 8. Permanent Paralysis of Limbs

Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

### 9. First Heart Attack of Specified Severity (Myocardial Infarction)

The first occurrence of heart attack or myocardial infarction which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area.

The diagnosis should be evidenced by all of the following criteria:

- A history of typical clinical symptoms consistent with the diagnosis of Acute Myocardial Infarction (for e.g. typical chest pain).
- New characteristic electrocardiogram changes
- Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponins I or T
- Other acute Coronary Syndromes
- Any type of Angina Pectoris
- A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

## ii. Specific Definitions

**Act of God Perils** means and includes lightning, storm, tempest, flood, inundation, subsidence, landslide, earthquake, cyclone, tsunami, volcano and other similar calamities.

**Adventure Sport** means any sport or activity, which is potentially dangerous to the Insured Person whether he is trained in such sport or activity or not. Such sport/activity includes without limitation stunt activities of any kind, adventure racing, base jumping, biathlon, big game hunting, black water rafting, BMX stunt/obstacle riding, bobsledding/using skeletons, bouldering, boxing, canyoning, cavin/pot holing, cave tubing, rock climbing/trekking/mountaineering, cycle racing, cyclo cross, drag racing, endurance testing, hand gliding, harness racing, skiing, high diving (above 5 meters), hunting, ice hockey, ice speedway, jousting, judo, karate, kendo, lugging, risky manual labour, marathon running, martial arts, micro-lighting, modern pentathlon, motor cycle racing, motor rallying, parachuting, paragliding/parapenting, piloting aircraft, polo, power lifting, power boat racing, quad biking, river boarding, scuba diving, river bugging, rodeo, roller hockey, rugby, ski acrobatics, ski doo riding, ski jumping, ski racing, sky diving, small bore target shooting, speed trials/ time trials, triathlon, water ski jumping, weight lifting or wrestling any type and Professional Sports (Professional sports mean Athletics, Bowling, Cycling, Football, Weightlifting, Cricket or any other sport for which a person getting compensated).

**Age or Aged** means age as on last birthday

**Annexure** means the document attached and marked as Annexure to this Policy

**Cover Start Date** means the date on which the coverage under the Policy starts for respective Insured person.

**Certificate of Insurance** means the certificate issued by Us to the insured person confirming the coverage under the Policy.

**Diagnostic Tests:** Investigations, such as X-Ray or blood tests, to find the cause of the Insured Person's symptoms and medical condition.

**Emergency** means a severe Illness or Injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a Medical Practitioner to prevent death or serious long term impairment of the Insured Person's health.

**Family Floater Policy** means a policy named as a Family Floater Policy in the Policy Schedule in terms of which, two or more persons of Insured Person's family are covered as dependents to Insured Person. The definition of Family shall be as mentioned in Policy Schedule/Certificate of Insurance. For a Floater policy, Sum Insured is available on Floater basis for the covered family members. Insurer's liability for any and all claims with respect to all family members is limited to the Sum Insured.

**Hospital** Only for the purposes of any claim or treatment permitted to be made or taken outside India Hospital (outside India) means an institution (including nursing homes) established outside India for indoor medical care and treatment of Illness and/or Injuries which has been registered and licensed as such with the appropriate local or other authorities in the relevant area, wherever applicable, and is under the constant supervision of a medical practitioner. The term Hospital shall not include a clinic, rest home, or convalescent home for the addicted, detoxification centre, sanatorium, and old age home.

**IRDAI** means the Insurance Regulatory and Development Authority of India.

**Insured Person** means the person(s) named in the Policy Schedule/ Certificate of Insurance who are covered under this Policy and in respect of whom the appropriate premium has been received.

**Policy** means this Policy document, any annexures thereto and the Policy Schedule including endorsements, if any, Your statements in the proposal form and the Information Summary Sheet as applicable.

**Policy Start Date** means the start date of the Policy as specified in the Policy Schedule.

**Policy Expiry Date** means the date on which the Policy expires as specified in the Policy Schedule.

**Policy Period** means the period between the Policy Start Date and the Policy Expiry Date as shown in the Policy Schedule.

**Policy Year** means a period of twelve consecutive months commencing from the Policy Start Date as specified in the Policy Schedule or any anniversary thereof.

**Policy holder** means the person named in the Policy Schedule as the policyholder and who has concluded this Policy with Us.

**Primary Insured** member means Policyholder's employee or a member of covered group who satisfies and continues to satisfy the eligibility criteria as specified in Policy Schedule and Certificate of Insurance.

**Rehabilitation** includes treatment aimed at restoring health or mobility, or to allow a person to live an independent life, such as after a stroke.

**Policy Schedule** means the schedule issued by Us along with this Policy mentioning the details of the Policyholder and Insured person, period of Policy and other details. Any changes made to it shall be issued as Endorsement Schedule and shall be considered a part of this Policy.

**Shared Accommodation** means a Hospital room with two or more patient beds

**Sum Insured** means :

i) For an Individual Policy, the sum shown in the Policy Schedule/ Product Benefits Table against an Insured Person which represents Our maximum, total and cumulative liability for any and all claims under the Policy during a Policy Year in respect of that Insured Person.

ii) For a Family Floater Policy, the sum shown in the Policy Schedule/ Product Benefits Table which represents Our maximum, total and cumulative liability for any and all claims under the Policy during a Policy Year in respect of any and all Insured Persons.

**Terrorism/Terrorist Activity** means an act, including, but not limited to, the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or Government(s), committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

**TPA or Third Party Administrator** means a company registered with the Authority, and engaged by an insurer, for a fee, by whatever name called and as may be mentioned in the agreement, for providing health services

**We/Our/Us** means MAGMA HDI General Insurance Company Ltd.

**You/Your/Policyholder** means the employer or legally constituted group named in the Schedule who has concluded this Policy with Us.

## Benefits covered under the policy

### Base Covers:

The Benefits under this Policy are subject always to the Sum Insured, any subsidiary limit specified in the Policy Schedule/ Certificate of Insurance, the terms, conditions, limitations and exclusions mentioned in the Policy and eligibility as per the insurance plan opted for or as shown in the Policy Schedule/Certificate of Insurance.

Following covers are available as Base covers under the policy. Following Base covers are applicable to your Policy as mentioned in Policy Schedule/ Certificate of Insurance.

Our maximum liability under each of the opted Base Covers will be a part of and up to Sum Insured as specified in Policy Schedule/Certificate of Insurance for these covers.

### 1. Inpatient Care

We shall cover the Reasonable and Customary Charges for the following Medical Expenses incurred by Insured Person if during the Policy Period, he/she requires Hospitalization on the written Medical Advice of a Medical Practitioner, for any Illness or Injury which is contracted or sustained during the Policy Period and is covered under this Policy:

- a) Medical Practitioners' fees
- b) Room Rent and other boarding charges
- c) ICU Charges
- d) Operation theatre charges
- e) Diagnostic procedures' charges
- f) Medicines, drugs and other consumables as prescribed by the Medical Practitioner
- g) Qualified Nurses' charges
- h) Intravenous fluids, blood transfusion, injection administration charges
- i) Anaesthesia, Blood, Oxygen, operation theatre charges, surgical appliances
- j) The cost of prosthetics and other devices or equipment if implanted internally during a Surgical Procedure

### Day Care Treatment

Under this section, We will also cover the Medical Expenses incurred for Day Care Treatment on the written medical advice of a Medical Practitioner following an Illness or Injury which occurs during the Policy Period, up to the limits specified in the Policy Schedule/Certificate of Insurance. Any OPD treatment undertaken in a Hospital/Day Care Centre will not be covered under this Benefit. Please refer to Annexure for list of Day Care Treatments.

### 2. Hospital Cash

If an Insured Person is Hospitalized during the Policy Period then We shall pay the daily cash amount specified in the Policy Schedule /Certificate of Insurance for each continuous and completed period of 24 hours of Hospitalization provided that:

- a. We shall not make any payment under this Benefit to You for more than the number of days of Hospitalisation as specified in Policy Schedule /Certificate of Insurance
- b. A deductible in terms of number of days per Hospitalization event will be applicable if and as specified in Policy Schedule /Certificate of Insurance
- c. We shall not make any payment under this Benefit for any diagnosis or treatment arising from or related to pregnancy (whether uterine or extra uterine), childbirth including caesarean section, medical termination of pregnancy and/or any treatment related to pre and post-natal care of the New Born Baby.

### 3. Outpatient Cover

We will cover the Reasonable and Customary Charges incurred for availing following services on an out-patient basis to assess Insured Person's health condition for any Illness or injury as specified in Policy Schedule/Certificate of Insurance

- medically necessary consultations with a Medical Practitioner
- undergoing any Diagnostic Tests prescribed by the Medical Practitioner
- medicines purchased under and supported with a Medical Practitioner's prescription.
- Non surgical and minor surgical procedures which are neither in-patient nor day care procedures

The waiting periods as defined in Section III of this Policy will not be applicable for this Cover. The amount payable under this Benefit shall be up to the limit shown in the Policy Schedule/Certificate of Insurance.

### Extension covers:

Following extension covers are applicable to each insured person under this Policy. The coverage limits are specified in the Policy Schedule/ Certificate of Insurance. The limits for these covers are applicable for each Insured Person and are included within the Sum Insured limit, unless specified otherwise. All the waiting periods and Exclusions are applicable to these Extension Covers as well unless specified otherwise.

### Corporate Floater:

We will provide coverage for any and all claims in aggregate, under this Policy, up to the amount specified against this Extension Cover, subject to following:

1. This Sum insured can be utilized only after exhaustion of individual member's sum insured
2. The maximum aggregate payable amount to an Insured Person from this Extension Cover will be as specified in Policy Schedule/certificate of Insurance
3. Only the medical condition and/or injuries as defined in Policy Schedule/Certificate of Insurance will be covered under this Extension Cover
4. Any sub-limit if and as applicable to Extension Cover and Base covers will also be applicable for payment of claim under this Extension Cover

#### Exclusions

##### i. Standard Exclusions

**Waiting Periods: Following waiting periods will be applicable to each Insured Person under this Policy.**

● **First Thirty Days Waiting Period (Code- Excl03)**

- i. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the same are covered.
- ii. This exclusion shall not, however, apply if the Insured Person has Continuous Coverage for more than twelve months.
- iii. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently.

● **Specific Diseases Waiting Period (Code- Excl02):**

- a) Expenses related to the treatment of the following listed conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage, as may be the case after the date of inception of the first policy with the Insurer. This exclusion shall not be applicable for claims arising due to an accident.
- b) In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- c) If any of the specified disease/procedure falls under the waiting period specified for pre-Existing diseases, then the longer of the two waiting periods shall apply.
- d) The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.
- e) If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.

List of these diseases is:

1. Cataract
2. Stones in biliary and urinary systems
3. Hernia / Hydrocele
4. Hysterectomy for any benign disorder
5. Lumps / cysts / nodules / polyps / internal tumours
6. Gastric and Duodenal Ulcers
7. Surgery on tonsils / adenoids
8. Osteoarthritis / Arthritis / Gout / Rheumatism / Spondylosis / Spondylitis / Intervertebral Disc Prolapse
9. Fissure / Fistula / Haemorrhoid
10. Sinusitis / Deviated Nasal Septum / Tympanoplasty / Chronic Suppurative Otitis Media
11. Benign Prostatic Hypertrophy
12. Knee/Hip Joint replacement
13. Dilatation and Curettage
14. Varicose veins
15. Dysfunctional Uterine Bleeding / Fibroids / Prolapse Uterus / Endometriosis
16. Chronic Renal Failure or end stage Renal Failure
17. Internal congenital anomalies/diseases/defects
18. HIV, AIDS

● **Pre Existing disease (Code- Excl01):**

- a) Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first policy with us.
- b) In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- c) If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations then waiting period for the same would be reduced to the extent of prior coverage.
- d) Coverage under the policy after the expiry of above defined months for any pre-existing disease is subject to the same being declared at the time of application and accepted by us.

We will not be liable to make any payment under this Policy under any circumstances, for any claim in respect of any Insured Person, directly or indirectly for, caused by or arising from or in any way attributable to any of the following permanent exclusions. In case extension covers are opted, respective permanent exclusion(s) stand deleted to the extent of coverage as per terms and conditions of that Extension cover.

● **Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof.(Code- Excl12)**

● **Hazardous or Adventure sports: (Code- Excl09):** Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.

● **Obesity/ Weight Control: Code- Excl06**

Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions:

1. Surgery to be conducted is upon the advice of the Doctor
2. The surgery/Procedure conducted should be supported by clinical protocols
3. The member has to be 18 years of age or older and
4. Body Mass Index (BMI);
  - a) greater than or equal to 40 or
  - b) greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
    - i. Obesity-related cardiomyopathy
    - ii. Coronary heart disease
    - iii. Severe Sleep Apnea
    - iv. Uncontrolled Type2 Diabetes

● **Cosmetic or Plastic Surgery (Code Excl08)**

Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.

● **Refractive Error (Code Excl15)**

Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres.

● **Treatment received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. Code- Excl13.**

● **Sterility and Infertility (Code Excl17)**

Expenses related to sterility and infertility. This includes:

- i) Any type of contraception, sterilization
- ii) Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
- iv) Gestational Surrogacy
- iv) Reversal of sterilization

● **Maternity expenses (Code Excl18)**

- i. medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy;
- ii. expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the policy period.

● **Change of Gender treatment (Code Excl07):**

Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.

● **Excluded Providers (Code Excl11):**

Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the policyholders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim.

List of these have been provided on Our website

● **Investigation & Evaluation (Code Excl04):**

- a) Expenses related to any admission primarily for diagnostics and evaluation purposes only are excluded.
- b) Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.

● **Rest Cure, Rehabilitation and respite Care (Code Excl05)**

Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:

- i. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons.
- ii. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.

● **Breach of Law (Code Excl10)**

Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.

● Dietary supplements and substances that can be purchased without prescription including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure. **Code- Excl14**

● **Unproven treatments (Code Excl16):** Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness

**ii. Specific Exclusions**

- Treatment provided by a Medical Practitioner who is not recognized by the Medical Council of India.
- Treatment of any sexual problem including impotence (irrespective of the cause) or erectile dysfunction.
- Treatment for any sexually transmitted disease, including Genital Warts, Syphilis, Gonorrhoea, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis.
- Treatment for sleep apnea, snoring, or any other sleep-related breathing problem.
- Any treatment received outside India.
- Treatment provided by anyone with the same residence as the Insured Person or who is a member of the Insured Person's immediate family.
- X-Ray or laboratory examinations or other diagnostic studies, not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness or Injury, whether or not requiring Hospitalization.
- Treatment for, or arising from, an Injury that is intentionally self-inflicted, including attempted suicide.
- Any treatment arising from and/or taken for Crohn's Disease, Ulcerative colitis, Cystic kidneys, Neurofibromatosis, Factor V Leiden Thrombophilia, Familial Hypercholesterolemia, Haemophilia, Hereditary Fructose Intolerance, Hereditary Hemochromatosis, Hereditary Spherocytosis.
- Private nursing/attendant's charges incurred during pre-hospitalization or post-hospitalization.
- Drugs or treatment not supported by prescription.
- Issue of fitness certificate and fitness examinations
- External and/ or durable medical/non-medical equipment of any kind used for diagnosis and/ or treatment, CPAP, CAPD, infusion pump.
- Ambulatory devices, walkers, crutches, belts, collars, caps, splints, slings, braces, stockings of any kind, diabetic foot wear, glucometer/thermometer and also any medical equipment which is subsequently used at home.
- OPD treatment is not covered. However this exclusion does not apply for Outpatient Cover.
- All preventive care, vaccination including inoculation and immunizations, except if it is certified and recommended by the attending Medical Practitioner as part of in-patient treatment. However this exclusion does not apply for Outpatient Cover.
- Dental Treatment including Surgical Procedures for the treatment of bone disease when related to gum disease or damage, or treatment for, or treatment arising from, disorders of the temporomandibular joint. This exclusion does not apply for Outpatient Cover  
EXCEPTION: We will pay for a Surgical Procedure wherein the Insured Person Hospitalized as a result of an Accident and which is undertaken for Inpatient Care in a Hospital and carried out by a Medical Practitioner.
- Any expenses for OPD treatment, or any expenses for drugs or dressings not prescribed for Insured Person's intake within hospitalization period, except as included in Post-hospitalization Medical Expenses Extension cover. This exclusion does not apply to Outpatient Cover.
- We will not pay for routine eye examinations, contact lenses spectacles, hearing aids, dentures and artificial teeth. This exclusion does not apply for Outpatient Cover.
- Any treatment modality other than Allopathic Treatment
- Charges related to a Hospital stay not expressly mentioned as being covered. Service charges levied by the Hospital under whatever head. Complete list of these excluded expenses are mentioned in Annexure II of this Policy. The list is available on our website www.magmahdi.com
- Artificial life maintenance, including life support machine used to sustain a person, incurred after confirmation by the treating doctor that the patient is in vegetative state.
- Any charges incurred to procure any medical certificate, medical records, treatment or Illness/Injury related documents pertaining to any period of Hospitalization/Day Care Treatment undertaken for any Illness or Injury.
- Circumcision unless necessary for the treatment of an Illness or disease or necessitated by an Accident.
- Treatment for any Illness or Injury resulting from nuclear or chemical contamination, war, participation in riot, revolution, acts of terrorism or any similar event (other than natural disaster or calamity)
- Treatment for any External Congenital Anomaly.

**General Terms and clauses**

**Standard General Terms and Conditions**

● **Disclosure to Information**

The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or non-disclosure of any material fact by the policyholder.

(Explanation: "Material facts" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk)

● **Condition Precedent to admission of Liability**

The terms and conditions of the policy must be fulfilled by the insured person for the Company to make any payment for claim(s) arising under the policy

● **Claim Settlement (Provision for penal interest)**

- (i) The Company shall settle or reject a claim, as may be the case, within 30 days from the date of receipt of last necessary document.
- (ii) In the case of delay in the payment of a claim, the Company shall be liable to pay interest to the policyholder from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate.
- (iii) However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document. In such cases, the Company shall settle or reject the claim within 45 days from the date of receipt of last necessary document.
- (iv) In case of delay beyond stipulated 45 days, the Company shall be liable to pay interest to the Policyholder at a rate 2% above the bank rate from the date of receipt of last necessary document to the date of payment of claim.

(Explanation: "Bank rate" shall mean the rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.

● **Material Change**

It is a Condition Precedent to the Our liability under the Policy that the Policyholder/ Insured Person shall immediately notify Us in writing of any material change in the risk on account of change in the nature of occupation or business at his/her own expense. We may, in Our discretion, adjust the scope of cover and/or the premium payable, accordingly, in line with our board approved underwriting policy. The Policyholder/Insured Person must exercise the same duty to disclose those matters to Us before the Renewal, extension, variation, endorsement or reinstatement of the Policy. The Policy terms and conditions may be altered accordingly.

● **Multiple Policies**

In case of multiple policies which provide fixed benefits, on the occurrence of insured event in accordance with the terms & conditions of the policies, each insurer shall make the claim payment independent of payment received under similar health policies.

1. In case of multiple policies taken by an Insured Person during a period from one or more insurers to indemnify treatment costs, the Insured Person shall have the right to require a settlement of his/her claim in terms of any of his/her policies.  
In all such cases the insurer chosen by the insured person shall be obliged to settle the claim as long as the claim is within the limits of and according to the terms of the chosen policy.

2. Insured Person having multiple policies shall also have the right to prefer claim under this policy for the amounts disallowed under any other policy/policies, even if the sum insured is not exhausted. Then the insurer shall independently settle the claim subject to the terms and conditions of this policy.

3. If the amount to be claimed exceeds the sum insured under a single policy the insured Person shall have the right to choose insurers from whom he/she wants to claim the balance amount.

4. Where an Insured Person has policies from more than one insurer to cover the same risk on indemnity basis, the Insured Person shall only be indemnified the treatment costs in accordance with the terms and conditions of the chosen policy.

**• Free Look Provision**

The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.

The insured shall be allowed a free look provision of fifteen days from date of receipt of the Policy document to review the terms and conditions of the Policy, and to return the same if not acceptable.

If the insured has not made any claim during the Free Look Period, the insured shall be entitled to

- a refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges; or
- where the risk has already commenced and the option of return of the Policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or

Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period;

**• Cancellation/ Termination (other than Free Look cancellation)**

a. The Policyholder may cancel this Policy by giving 15 day's written notice and in such an event, the Company shall refund premium for the unexpired policy period as detailed below.:

We shall cancel the Policy and refund the premium for the balance of the Policy Period in accordance with the table below, after deducting the amount spent on pre-policy medical check up by Us, provided that no claim has been made under the Policy by or on behalf of any Insured Person.

We may cancel the Policy and refund the premium for the balance of the Policy Period on pro-rata basis, if specified so in Policy Schedule/Certificate of Insurance.

**Cancellation refund grid for non-credit linked Policy:**

Covered up to Days	Refund of Premium
7	Up to 90.00%
30	Up to 75.00%
60	Up to 65.00%
90	Up to 50.00%
120	Up to 40.00%
180	Up to 25.00%
240	Up to 15.00%
Exceeding 240	Nil

**Cancellation refund grid for credit linked Policy :** If policy is taken as linked to loan, following grid will be applicable

Policy Tenure 1 Yr		Policy Tenure 2 Yrs		Policy Tenure 3 Yrs		Policy Tenure 4 Yrs		Policy Tenure 5 Yrs	
Time of cancellation	Refund %	Time of cancellation	Refund %	Time of cancellation	Refund %	Time of cancellation	Refund %	Time of cancellation	Refund %
Up to 1 month	75%	Up to 3 month	75%	Up to 6 month	75%	Up to 1 yr	75%	Up to 1 yr	80%
> 1 month to 3 months	50%	> 3 months to 6 months	50%	> 6 months to 1 year	50%	> 1 year to 2 years	50%	> 1 year to 2 years	60%
>3 months to 6 months	25%	>6 months to 1 year	25%	> 1 year to 2 years	25%	> 2 years to 3 years	25%	> 2 years to 3 years	40%
>6 months	Nil	> 1 year	Nil	> 2 year	Nil	> 3 year	Nil	> 3 years to 4 years	20%
								> 4 years	Nil

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any Benefit has been availed by the Insured person under the Policy.

(ii) The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the Insured Person, by giving 15 day's written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud.

**• Fraud**

If any claim made by the insured person, is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the Insured Person or anyone acting on his/her behalf to obtain any Benefit under this Policy, all benefits under this Policy and the premium paid shall be forfeited. .

Any amount already paid against claims made under this Policy but which are found fraudulent later shall be repaid by all recipient(s)/ policyholder(s), who has made that particular claim, who shall be jointly and severally liable for such repayment to the insurer.

For the purpose of this clause, the expression "fraud" means any of the following acts committed by the insured person or by his agent, or the hospital/doctor/any other party acting on behalf of the insured person with intent to deceive the insurer or to induce the insurer to issue an insurance policy:

- the suggestion, as a fact of that which is not true and which the insured person does not believe to be true;
- the active concealment of a fact by the insured person having knowledge or belief of the fact;
- any other act fitted to deceive; and
- any such act or omission as the law specially declares to be fraudulent

The Company shall not repudiate the claim and/or forfeit the policy benefits, on the ground of Fraud, if the insured person / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of material fact are within the knowledge of the insurer.

**• Renewal of Policy**

The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.

- The Company shall endeavour to give notice for renewal. However, the Company is not under obligation to give any notice for renewal.
- Renewal shall not be denied on the ground that the insured had made a claim or claims in the preceding policy years
- Request for renewal along with requisite premium shall be received by the Company before the end of the Policy Period.
- At the end of the Policy Period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits with Break in Policy. Coverage is not available during the grace period.
- No loading shall apply on renewals based on individual claim experience.

**• Withdrawal of Policy;**

i. In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the Policy.

ii. Insured person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period, as per IRDAI guidelines, provided the policy has been maintained without a break.

**• Redressal of Grievance**

In case of any grievance, the insured person may contact the Company through

Website: [www.magma-hdi.com](http://www.magma-hdi.com)

Toll free: 1800 266 3202

E-mail: [Gro@magma-hdi.co.in](mailto:Gro@magma-hdi.co.in)

Fax: 91 033 4401 7471

Courier: Any of Our branch offices or corporate office during business hours

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.

If Insured Person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at:

Magma HDI General Insurance Co Ltd  
EQUINOX BUSINESS PARK,  
UNIT NO. 1B & 2B, 2ND FLOOR,  
TOWER 3, LBS MARG, KURLA (WEST),  
Mumbai - Maharashtra 400070

For updated details of grievance officer, kindly refer the link <https://www.magmahdi.com/grievance-redressal>.

If Insured Person is not satisfied with the redressal of grievance through above methods, insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules, 2017. The contact details of the Insurance Ombudsman offices have been provided as Annexure-I

Grievance may also be logged at IRDAI Integrated Grievance management system: <https://igms.irda.gov.in/>

● **Complete Discharge**

Any payment to the Insured Person or his/ her nominees or his/ her legal representative or assignee or to the Hospital, as the case may be, for any benefit under the Policy shall be a valid discharge towards payment of claim by the Company to the extent of that amount for the particular claim.

● **Nomination**

The policyholder is required at the inception of the policy to make a nomination for the purpose of payment of claims under the policy in the event of death of the policyholder. Any change of nomination shall be communicated to the company in writing and such change shall be effective only when an endorsement on the policy is made. In the event of death of the policyholder, the Company will pay the nominee (as named in the Policy Schedule/Policy Certificate/Endorsement (if any)) and in case there is no subsisting nominee, to the legal heirs or legal representatives of the Policyholder whose discharge shall be treated as full and final discharge of its liability under the Policy.

● **Possibility of Revision of Terms of the Policy Including the Premium Rates**

The Company, with prior approval of IRDAI, may revise or modify the terms of the policy including the premium rates. The insured person shall be notified three months before the changes are effected.

● **Moratorium Period:**

After completion of eight continuous years under the policy no look back to be applied. This period of eight years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of eight continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no health insurance claim shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the policy contract.

● **Migration:**

The insured person will have the option to migrate the policy to other health insurance products/plans offered by the company by applying for migration of the policy at least 30 days before the policy renewal date as per IRDAI guidelines on Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the company, the insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on Migration.

For Detailed Guidelines on migration, kindly refer the link [https://www.irdai.gov.in/ADMINCMS/cms/whatsNew\\_Layout.aspx?page=PageNo3987&flag=1](https://www.irdai.gov.in/ADMINCMS/cms/whatsNew_Layout.aspx?page=PageNo3987&flag=1)

● **Portability**

The insured person will have the option to port the policy to other insurers by applying to such insurer to port the entire policy along with all the members of the family, if any, at least 45 days before, but not earlier than 60 days from the policy renewal date as per IRDAI Guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on portability.

For Detailed Guidelines on portability, kindly refer the link [https://www.irdai.gov.in/ADMINCMS/cms/whatsNew\\_Layout.aspx?page=PageNo3987&flag=1](https://www.irdai.gov.in/ADMINCMS/cms/whatsNew_Layout.aspx?page=PageNo3987&flag=1)

● **Premium payment in Instalments:**

If the Insured Person has opted for Payment of Premium on an instalment basis i.e. Half Yearly, Quarterly or Monthly, as mentioned in the Policy Schedule/Certificate of Insurance, the following Conditions shall apply (notwithstanding any terms contrary elsewhere in the Policy)

- i. Grace Period of 15 Days would be given to pay the instalment premium due for the Policy.
- ii. During such grace period, coverage will not be available from the due date of instalment premium payment till the date of receipt of premium by Company.
- iii. The insured person will get the accrued continuity benefits in respect of the "Waiting Periods", "Specific Waiting Periods" in the event of payment of premium within the stipulated grace Period.
- iv. No interest will be charged If the instalment premium is not paid on due date.
- v. In case of instalment premium due not received within the grace period, the policy will get cancelled.
- vi. In the event of a claim, all subsequent premium instalments shall immediately become due and payable.
- vii. The Company has right to recover and deduct all the pending instalments from the claim amount due under the policy.

**ii. Specific Terms and clauses**

● **Endorsements:**

Insured Person/the Policyholder should request for any endorsement in writing. Any endorsement that is accepted by Us shall be effective from the date of the request as received from Insured Person /the Policyholder, or the date of receipt of premium, whichever is later.

We reserve the rights to do underwriting in case of any such endorsement requests which has a bearing on the premium and/or material risk.

● **Communications & Notices**

Any communication or notice or instruction under this Policy shall be in writing and will be sent to:

- a. To Us, at the address as specified in Policy Schedule and Certificate of Insurance
- b. The Policyholder's, at the address as specified in Policy Schedule OR to the Insured Person, at the address as specified in Certificate of Insurance
- c. No insurance agents, brokers, other person or entity is authorized to receive any notice on behalf of Us unless explicitly stated in writing by Us
- d. Notice and instructions will be deemed served 10 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail.

● **Limitation of Liability**

If a claim is rejected or partially settled and is not the subject of any pending suit or other proceeding or arbitration, as the case may be, within twelve months from the date of such rejection or settlement the claim shall be deemed to have been abandoned and Our liability shall be extinguished and shall not be recoverable thereafter.

● **Records to be maintained**

The Policyholder or the Insured Person, as the case may be shall keep an accurate record containing all relevant and accurate medical records like in-patient records, Discharge summary, medical certificates, medical prescriptions, diagnostic reports and reports confirming the need for treatment (if any) and shall allow Us or our representative(s) to inspect such records. The Policyholder or the Insured Person as the case may be, shall furnish such information as may be required by Us under this Policy at any time during the Policy Period or until final adjustment (if any) and resolution of all claims under this Policy.

● **Geographical Scope**

The geographical scope of this Policy applies to events within India unless specified otherwise for any of the Base and/or Extension Covers.

• **Policy Disputes**

Any and all disputes or differences under or in relation to this Policy herein shall be determined by Indian law and shall be subject to the jurisdiction of the Indian Courts.

• **Assignment**

The payment due under any Benefit under this Policy can be assigned in accordance with provisions of applicable law.

• **Alteration to the Policy**

This Policy constitutes the complete contract of insurance. Subject to the provisions of applicable law, no change or alteration will be effective or valid unless approved in writing which will be evidenced by a written endorsement signed and stamped by Us. No one except Us can change or vary this Policy.

• **No Constructive Notice**

Any knowledge or information of any circumstances or condition in relation to the Policyholder/Insured Person which is in Our possession and not specifically informed by the Policyholder/ Insured Person shall not be held to bind or prejudicially affect Us notwithstanding subsequent acceptance of any premium.

**Claim Procedure**

Provided that due adherence/observance and fulfilment of the terms and conditions of this Policy (conditions and all endorsements, Annexures hereon are to be read as part of this Policy) shall so far as they relate to anything to be done or not to be done by You and / or any Insured Person be a Condition Precedent to admission of Our liability under this Policy.

On the occurrence or the discovery of any Illness or Injury that may give rise to a claim under this Policy, then as a Condition Precedent to Our liability under the Policy, the following procedure shall be complied with:

**1. For Availing Cashless Facility (Procedure for Domestic Claims )**

Cashless facility can be availed only at Our Network Providers. The complete list of Network Providers is available on Our website and can also be obtained by contacting Us over the telephone. The updated list of TPA containing complete details is available on Our website [www.magmahdi.com](http://www.magmahdi.com).

Cashless facility will be availed through the TPA. The TPA will be contacted on its helpline and must be provided with the membership number, Policy Number and the name of the Insured Person at least 72 hours before admission to the Hospital for planned Hospitalization and within 24 hours of admission to the Hospital in case of Emergency Hospitalization. The TPA will also, by fax or e-mail, be provided with details of Hospitalization like diagnosis, name of the Hospital, duration of stay in the Hospital, estimated expenses of Hospitalization etc. in the prescribed form available with the insurance help desk at the Hospital. Any additional information as may be required by the medical panel of the TPA must also be furnished. After establishing the admissibility of the claim under the Policy, the TPA shall provide a pre-authorization to the Hospital guaranteeing payment of the Hospitalization expenses subject to the Sum Insured, terms conditions and limitations of the Policy. The authorization shall be issued to the Network Provider within 24 hours of receiving the complete information.

**2. For admission in Non-Network Provider or into Network Provider if Cashless facility is not availed (Re-imburement Claims)**

**a. Intimation of claim:** Preliminary intimation of claim with particulars relating to Policy Number, name of the Insured Person in respect of whom claim is made, nature of Illness/Injury and name and address of the attending Hospital, must be provided to Us at least 72 hours before admission to the Hospital in case of planned Hospitalization, and within 24 hours of admission in the Hospital, in case of Emergency Hospitalization

**3. Submission of claim:** The claim form along with the attending Medical Practitioner's certificate duly filled and signed in all respects with the following claim documents will be submitted to Us not later than 30 days from the date of discharge from the Hospital.

**Mandatory documents**

a. Duly completed claim form

b. Test reports and prescriptions relating to first / previous consultations for the same or related illness.

c. Case history / admission-discharge summary describing the nature of the complaints and its duration, treatment given, advice on discharge etc. issued by the Hospital.

d. Death summary in case of death of the Insured Person at the Hospital.

e. Post Mortem Report, if applicable & if conducted

f. Hospital receipts / bills / cash memos in original (including advance and final Hospital settlement receipts).

g. All test reports for X-rays, ECG, Scan, MRI, Pathology etc., including the Medical Practitioner's prescription advising such tests/investigations (CDs of angiogram, surgery etc. need not be sent unless specifically sought).

h. Medical Practitioner's prescriptions with cash bills for medicines purchased from outside the Hospital.

i. F.I.R./MLC. in the case of Accidental Injury and English translation of the same, if in any other language.

j. Legal heir certificate in the absence of nomination under the Policy, in case of death of the Insured Person. In the absence of legal heir certificate, evidence establishing legal heirship may be provided as required by Us.

k. For a) maternity claims, discharge summary mentioning LMP, EDD & Gravida b) Cataract claims - IOL sticker c) PTCA claims - Stent sticker.

l. Copies of health insurance policies held with any other insurer covering the Insured Person(s).

m. If a claim is partially settled by any other insurer, a certificate from the other insurer confirming the final claim amount settled by them and that original claim documents are retained at their end.

**Documents to be submitted if specifically sought:**

a. Copy of indoor case records (including Qualified Nurse's notes, OT notes and anaesthetists' notes, vitals chart).

b. Copy of extract of inpatient register.

c. Attendance records of employer/educational institution.

d. Complete medical records (including indoor case records and OP records) of past Hospitalization/treatment, if any.

e. Attending Medical Practitioner's certificate clarifying.

i. reason for Hospitalization and duration of Hospitalization

ii. history of any self-inflicted Injury

iii. history of alcoholism, smoking

iv. history of associated medical conditions, if any

f. Previous master health check-up records/pre-employment medical records, if any.

g. Any other document necessary in support of the claim on case to case basis.

The claim documents should be sent to:

Magma HDI General Insurance Co Ltd  
Office No. 516 and 517, 5th Floor,  
Neelkanth Corporate Park,  
Plot no. 240, 2401/1-8,  
Kirod Road, Vidyavihar (West),  
Mumbai, Maharashtra 400086

**Payment of Claim**

• No liability under the Policy will be admitted, if the claim is fraudulent or supported by fraudulent means.

• The Insured Person or any person acting on behalf of the Insured Person, as the case may be, must provide at his/her expense, all the information asked by Us in relation to the claim and he/she must provide all reasonable cooperation and assistance to Us as may be required.

• If required, the Insured Person or any person acting on behalf of the Insured Person, as the case may be, must give consent to obtain medical reports from the Medical Practitioner at Our expense.

• If requested by Us, the Insured Person must agree to be examined by a Medical Practitioner of Our choice and at Our expense.

• All claims under this Policy shall be payable in Indian Currency.

• Claims under this Policy shall be settled or rejected, as the case may be, within 30 days of the receipt of the last necessary document.

Office of the Ombudsman	Contact Details	JURISDICTION
<b>AHMEDABAD</b>	Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad - 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@ecoi.co.in	Gujarat and Union Territories of Dadra & Nagar Haveli, Daman and Diu.
<b>BENGALURU</b>	Office of the Insurance Ombudsman,	Karnataka

	Jeevan Soudha Building,PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru - 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@ecoi.co.in	
<b>BHOPAL</b>	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal - 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@ecoi.co.in	Madhya Pradesh and Chattisgarh.
<b>BHUBANESHWAR</b>	Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar - 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in	Orissa
<b>CHANDIGARH</b>	Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 - D, Chandigarh - 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@ecoi.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union territory of Chandigarh.
<b>CHENNAI</b>	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI - 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@ecoi.co.in	Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).
<b>DELHI</b>	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi - 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@ecoi.co.in	Delhi
<b>GUWAHATI</b>	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati - 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@ecoi.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
<b>HYDERABAD</b>	Office of the Insurance Ombudsman, 6-2-46, 1st floor, ""Moin Court"" , Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 67504123 / 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@ecoi.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry
<b>JAIPUR</b>	Office of the Insurance Ombudsman, Jeevan Nidhi - II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal.jaipur@ecoi.co.in	Rajasthan
<b>ERNAKULAM</b>	Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@ecoi.co.in	Kerala and Union Territory of (a) Lakshadweep (b) Mahe-a part of Union Territory of Pondicherry.
<b>KOLKATA</b>	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@ecoi.co.in	West Bengal, Sikkim and Union Territories of Andaman and Nicobar Islands.
<b>LUCKNOW</b>	Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@ecoi.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
<b>MUMBAI</b>	Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe,	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.



	S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@ecoi.co.in	
<b>NOIDA</b>	Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal.noida@ecoi.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur
<b>PATNA</b>	Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@ecoi.co.in	Bihar, Jharkhand
<b>PUNE</b>	Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune - 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@ecoi.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region

## Annexure

**List I - Item for which coverage is not available in the policy**

SI No	Item
1	BABY FOOD
2	BABY UTILITIES CHARGES
3	BEAUTY SERVICES
4	BELTS/ BRACES
5	BUDS
6	COLD PACK/HOT PACK
7	CARRY BAGS
8	EMAIL / INTERNET CHARGES
9	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)
10	LEGGINGS
11	LAUNDRY CHARGES
12	MINERAL WATER
13	SANITARY PAD
14	TELEPHONE CHARGES
15	GUEST SERVICES
16	CREPE BANDAGE
17	DIAPER OF ANY TYPE
18	EYELET COLLAR
19	SLINGS
20	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES
21	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED
22	TELEVISION CHARGES
23	SURCHARGES
24	ATTENDANT CHARGES
25	EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)
26	BIRTH CERTIFICATE
27	CERTIFICATE CHARGES
28	COURIER CHARGES
29	CONVEYANCE CHARGES
30	MEDICAL CERTIFICATE
31	MEDICAL RECORDS
32	PHOTOCOPIES CHARGES
33	MORTUARY CHARGES
34	WALKING AIDS CHARGES
35	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)
36	SPACER
37	SPIROMETRE
38	NEBULIZER KIT
39	STEAM INHALER
40	ARMSLING
41	THERMOMETER
42	CERVICAL COLLAR
43	SPLINT
44	DIABETIC FOOT WEAR
45	KNEE BRACES (LONG/ SHORT/ HINGED)
46	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER
47	LUMBO SACRAL BELT
48	NIMBUS BED OR WATER OR AIR BED CHARGES
49	AMBULANCE COLLAR
50	AMBULANCE EQUIPMENT
51	ABDOMINAL BINDER
52	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES
53	SUGAR FREE Tablets
54	CREAMS POWDERS LOTIONS (Toiletries are not payable, only prescribed medical pharmaceuticals payable)
55	ECG ELECTRODES
56	GLOVES
57	NEBULISATION KIT

58	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
59	KIDNEY TRAY
60	MASK
61	OUNCE GLASS
62	OXYGEN MASK
63	PELVIC TRACTION BELT
64	PAN CAN
65	TROLLY COVER
66	UROMETER, URINE JUG
67	AMBULANCE
68	VASOFIX SAFETY

**List II - Items that are to be subsumed into Room Charges**

SI No	Item
1	BABY CHARGES (UNLESS SPECIFIED/INDICATED)
2	HAND WASH
3	SHOE COVER
4	CAPS
5	CRADLE CHARGES
6	COMB
7	EAU-DE-COLOGNE / ROOM FRESHNERS
8	FOOT COVER
9	GOWN
10	SLIPPERS
11	TISSUE PAPER
12	TOOTH PASTE
13	TOOTH BRUSH
14	BED PAN
15	FACE MASK
16	FLEXI MASK
17	HAND HOLDER
18	SPUTUM CUP
19	DISINFECTANT LOTIONS
20	LUXURY TAX
21	HVAC
22	HOUSE KEEPING CHARGES
23	AIR CONDITIONER CHARGES
24	IM IV INJECTION CHARGES
25	CLEAN SHEET
26	BLANKET/WARMER BLANKET
27	ADMISSION KIT
28	DIABETIC CHART CHARGES
29	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES
30	DISCHARGE PROCEDURE CHARGES
31	DAILY CHART CHARGES
32	ENTRANCE PASS / VISITORS PASS CHARGES
33	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE
34	FILE OPENING CHARGES
35	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)
36	PATIENT IDENTIFICATION BAND / NAME TAG
37	PULSEOXYMETER CHARGES

**List III - Items that are to be subsumed into Procedure Charges**

SI No	Item
1	HAIR REMOVAL CREAM
2	DISPOSABLES RAZORS CHARGES (for site preparations)
3	EYE PAD
4	EYE SHEILD
5	CAMERA COVER
6	DVD, CD CHARGES
7	GAUSE SOFT
8	GAUZE
9	WARD AND THEATRE BOOKING CHARGES

10	ARTHROSCOPY AND ENDOSCOPY INSTRUMENTS
11	MICROSCOPE COVER
12	SURGICAL BLADES, HARMONICSCALPEL,SHAVER
13	SURGICAL DRILL
14	EYE KIT
15	EYE DRAPE
16	X-RAY FILM
17	BOYLES APPARATUS CHARGES
18	COTTON
19	COTTON BANDAGE
20	SURGICAL TAPE
21	APRON
22	TORNIQUET
23	ORTHOBUNDLE, GYNAEC BUNDLE

**List IV - Items that are to be subsumed into costs of treatment**

<b>SI No</b>	<b>Item</b>
1	ADMISSION/REGISTRATION CHARGES
2	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE
3	URINE CONTAINER
4	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES
5	BIPAP MACHINE
6	CPAP/ CAPD EQUIPMENTS
7	INFUSION PUMP- COST
8	HYDROGEN PEROXIDE\SPIRIT\ DISINFECTANTS ETC
9	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES- DIET CHARGES
10	HIV KIT
11	ANTISEPTIC MOUTHWASH
12	LOZENGES
13	MOUTH PAINT
14	VACCINATION CHARGES
15	ALCOHOL SWABES
16	SCRUB SOLUTION/STERILLIUM
17	Glucometer& Strips
18	URINE BAG

Name Of Insured :

SAI BALAJI EDU SOCIETY

## Details of Lives and Sum Insured:

S No.	Emp ID / Member ID	Insured Name	DOB	Age	Gender	Relationship	DOJ	DOC	Sum Insured	Plan Name
1	E01	Mr.Misharilal R Mundada	05/02/1977	45	Male	Self	01/10/2022	01/10/2022	400000	
2	E02	Mr.Vijay Nimbalkar	27/01/1969	53	Male	Self	01/10/2022	01/10/2022	400000	
3	E02	Ms.Karuna V . Nimbalkar	25/01/1977	45	Female	Wife	01/10/2022	01/10/2022	0	
4	E02	Ms.Titiksha V. Nimbalkar	19/04/2011	11	Female	Daughter	01/10/2022	01/10/2022	0	
5	E03	Ms.Akanksha Taunk	13/10/1984	37	Female	Self	01/10/2022	01/10/2022	400000	
6	E03	Mr.Digvijay Taunk	14/08/1984	38	Male	Husband	01/10/2022	01/10/2022	0	
7	E03	Mr.Naman Taunk	12/06/2014	8	Male	Son	01/10/2022	01/10/2022	0	
8	E03	Mr.Nakul Taunk	12/06/2014	8	Male	Son	01/10/2022	01/10/2022	0	
9	E04	Ms.Sangeeta Rajput	09/06/1967	55	Female	Self	01/10/2022	01/10/2022	400000	
10	E04	Mr.Banibrata Das	10/11/1980	41	Male	Husband	01/10/2022	01/10/2022	0	
11	E05	Ms.Dr. Tripti Sahu	28/12/1978	43	Female	Self	01/10/2022	01/10/2022	400000	
12	E05	Mr.Amit Pethiya	01/08/1976	46	Male	Husband	01/10/2022	01/10/2022	0	
13	E05	Mr.Akul Pethiya	31/01/2008	14	Male	Son	01/10/2022	01/10/2022	0	
14	E06	Mr.Dr. Nitin Ranjan	19/05/1982	40	Male	Self	01/10/2022	01/10/2022	400000	
15	E06	Ms.Rituja Verma	08/05/1991	31	Female	Wife	01/10/2022	01/10/2022	0	
16	E06	Bahuleya Verma	05/09/2022	0	Male	Son	01/10/2022	01/10/2022	0	
17	E07	Ms.Ekta Joshi	13/10/1984	37	Female	Self	01/10/2022	01/10/2022	400000	
18	E07	Mr.Manish Joshi	07/02/1985	37	Male	Husband	01/10/2022	01/10/2022	0	
19	E07	Ms.Ishana Joshi	25/03/2015	7	Female	Daughter	01/10/2022	01/10/2022	0	
20	E08	Ms.Dr. Nalini Dixit	28/06/1979	43	Female	Self	01/10/2022	01/10/2022	400000	
21	E08	Mr.Kapil Dixit	03/03/1987	35	Male	Husband	01/10/2022	01/10/2022	0	
22	E08	Mr.Rudransh Dixit	21/10/2017	4	Male	Son	01/10/2022	01/10/2022	0	
23	E09	Mr.Shekhar Verma	14/04/1982	40	Male	Self	01/10/2022	01/10/2022	400000	
24	E09	Mrs.Uma Shekhar Verma	16/03/1986	36	Female	Wife	01/10/2022	01/10/2022	0	
25	E09	Ms.Niva Shekhar Verma	07/10/2016	5	Female	Daughter	01/10/2022	01/10/2022	0	
26	E10	Mr.Laxmidhar Biswal	27/11/1970	51	Male	Self	01/10/2022	01/10/2022	400000	
27	E10	Ms.Babita Biswal	03/03/1976	46	Female	Wife	01/10/2022	01/10/2022	0	
28	E10	Ms.Subhashree L Biswal	25/08/2005	17	Female	Daughter	01/10/2022	01/10/2022	0	
29	E10	Mr.Subham Biswal	05/09/2010	12	Male	Son	01/10/2022	01/10/2022	0	
30	E11	Mr.Ajit Sangale	14/01/1973	49	Male	Self	01/10/2022	01/10/2022	400000	
31	E11	Ms.Sonmati A. Sangale	07/05/1982	40	Female	Wife	01/10/2022	01/10/2022	0	
32	E11	Ms.Neha A. Sangale	27/02/2003	19	Female	Daughter	01/10/2022	01/10/2022	0	
33	E11	Mr.Chinmay A. Sangale	14/08/2008	14	Male	Son	01/10/2022	01/10/2022	0	
34	E12	Smt.Geeta Chitnis	25/01/1956	66	Female	Self	01/10/2022	01/10/2022	400000	
35	E13	Ms.Poonam Soni	19/04/1986	36	Female	Self	01/10/2022	01/10/2022	400000	
36	E13	Mr.Daksh Soni	24/03/2012	10	Male	Son	01/10/2022	01/10/2022	0	
37	E14	Mr.Girish Naik	30/10/1968	53	Male	Self	01/10/2022	01/10/2022	400000	
38	E14	Ms.Anuradha Naik	02/06/1972	50	Female	Wife	01/10/2022	01/10/2022	0	
39	E14	Ms.isha Naik	01/01/2002	20	Female	Daughter	01/10/2022	01/10/2022	0	
40	E15	Ms.Dipti Wanjale	04/01/1982	40	Female	Self	01/10/2022	01/10/2022	200000	
41	E15	Mr.Deepak Wanjale	09/01/1976	46	Male	Husband	01/10/2022	01/10/2022	0	
42	E15	Mr.Omkar Wanjale	24/04/2003	19	Male	Son	01/10/2022	01/10/2022	0	
43	E16	Mr.Mahendra Karanjawane	19/01/1986	36	Male	Self	01/10/2022	01/10/2022	200000	
44	E16	Ms.Yogita Karanjawane	13/03/1990	32	Female	Wife	01/10/2022	01/10/2022	0	
45	E16	Mr.Manyankraj M. Karanjawane	02/02/2016	6	Male	Son	01/10/2022	01/10/2022	0	
46	E16	Yashika Karanjawane	10/07/2022	0	Female	Daughter	01/10/2022	01/10/2022	0	
47	E17	Mr.Sashikant Kamble	19/09/1969	53	Male	Self	01/10/2022	01/10/2022	200000	
48	E17	Ms.Rekha S Kamble	24/09/1972	50	Female	Wife	01/10/2022	01/10/2022	0	
49	E17	Ms.Srushti S Kamble	29/11/2001	20	Female	Daughter	01/10/2022	01/10/2022	0	
50	E17	Mr.Dranav S Kamble	14/07/2004	18	Male	Son	01/10/2022	01/10/2022	0	
51	E18	Ms.Bharti Vinode	15/08/1977	45	Female	Self	01/10/2022	01/10/2022	200000	
52	E18	Mr.Rajendra Vinode	31/03/1972	50	Male	Husband	01/10/2022	01/10/2022	0	
53	E18	Mr.Abhishek Vinode	20/11/1998	23	Male	Son	01/10/2022	01/10/2022	0	
54	E18	Ms.Apurva Vinode	27/10/2005	16	Female	Daughter	01/10/2022	01/10/2022	0	
55	E19	Mr.Dilip Patil	10/04/1981	41	Male	Self	01/10/2022	01/10/2022	200000	
56	E19	Ms. Priyanka Patil	09/04/1988	34	Female	Wife	01/10/2022	01/10/2022	0	
57	E19	Mr.Viraj Patil	14/12/2011	10	Male	Son	01/10/2022	01/10/2022	0	
58	E20	Ms.Rajshree Yogesh Marathe	27/11/1991	30	Female	Self	01/10/2022	01/10/2022	200000	
59	E20	Mr.Yogesh Marathe	19/09/1988	34	Male	Husband	01/10/2022	01/10/2022	0	
60	E20	Mr.Tejas Marathe	24/08/2000	22	Male	Son	01/10/2022	01/10/2022	0	
61	E20	Mr.Sarojit Marathe	24/03/2014	8	Male	Son	01/10/2022	01/10/2022	0	
62	E21	Mr.Dilip Shamrao Chavan	20/01/1991	31	Male	Self	01/10/2022	01/10/2022	200000	
63	E21	Ms.Anusaya Chavan	07/06/1993	29	Female	Wife	01/10/2022	01/10/2022	0	
64	E21	Mr.Mithun Chavan	14/04/2014	8	Male	Son	01/10/2022	01/10/2022	0	
65	E21	Ms.Shreya Chavan	20/08/2015	7	Female	Daughter	01/10/2022	01/10/2022	0	
66	E22	Mr.Sudam Mahadev Daundkar	11/06/1990	32	Male	Self	01/10/2022	01/10/2022	200000	
67	E22	Ms.Sonali Sudam Daundkar	16/04/1994	28	Female	Wife	01/10/2022	01/10/2022	0	
68	E22	Ms.Ishwari Sudam Daundkar	27/08/2013	9	Female	Daughter	01/10/2022	01/10/2022	0	
69	E22	Mr.Arav Sudam Daundkar	05/07/2019	3	Male	Son	01/10/2022	01/10/2022	0	

70	E23	Mr.Sagar maruti Bhondave	02/07/1978	44	Male	Self	01/10/2022	01/10/2022	200000	
71	E23	Ms.Bhagyashree Bhondve	01/12/1985	36	Female	Wife	01/10/2022	01/10/2022	0	
72	E23	Ms.Deeshita Bhondve	27/09/2015	7	Female	Daughter	01/10/2022	01/10/2022	0	
73	E24	Mr.Kochayyat Ramchandran Dattan	28/10/1972	49	Male	Self	01/10/2022	01/10/2022	200000	
74	E24	Ms.Sheeba Dattan Nair	03/11/1976	45	Female	Wife	01/10/2022	01/10/2022	0	
75	E24	Mr.Devamsh Dattan Nair	09/12/2002	19	Male	Son	01/10/2022	01/10/2022	0	
76	E25	Ms.Dr.Lokesh Arora	09/12/1981	40	Female	Self	01/10/2022	01/10/2022	400000	
77	E25	Mr.Sumit Arora	26/05/1978	44	Male	Husband	01/10/2022	01/10/2022	0	
78	E25	Ms.Rakshita Arora	22/07/2007	15	Female	Daughter	01/10/2022	01/10/2022	0	
79	E25	Mr.Kartik Arora	31/03/2012	10	Male	Son	01/10/2022	01/10/2022	0	
80	E26	Mr.Kshirod Chand	24/06/1980	42	Male	Self	01/10/2022	01/10/2022	400000	
81	E26	Ms.Punyatoya Mishra	03/01/1988	34	Female	Wife	01/10/2022	01/10/2022	0	
82	E26	Mr.Priyansh Chand	18/10/2017	4	Male	Son	01/10/2022	01/10/2022	0	
83	E27	Ms.Neha Agarwal	02/02/1978	44	Female	Self	01/10/2022	01/10/2022	400000	
84	E27	Mr.Vikrant Agarwal	13/04/1978	44	Male	Husband	01/10/2022	01/10/2022	0	
85	E27	Ms.Anushka Agarwal	17/04/2008	14	Female	Daughter	01/10/2022	01/10/2022	0	
86	E27	Ms.Amaira Agarwal	24/12/2013	8	Female	Daughter	01/10/2022	01/10/2022	0	
87	E28	Mr.Jitendra Swain	17/06/1977	45	Male	Self	01/10/2022	01/10/2022	200000	
88	E28	Ms.Subhadarshani D Pradhan	07/07/1984	38	Female	Wife	01/10/2022	01/10/2022	0	
89	E28	Mr.Shlok Jitendra Swain	05/06/2009	13	Male	Son	01/10/2022	01/10/2022	0	
90	E28	Mr.Priyanshu Jitendra Swain	28/04/2018	4	Male	Son	01/10/2022	01/10/2022	0	
91	E29	Mr.Rajib Kumar Mohanty	19/07/1988	34	Male	Self	01/10/2022	01/10/2022	200000	
92	E29	Ms.Radha Rani Dey	12/03/1992	30	Female	Wife	01/10/2022	01/10/2022	0	
93	E29	Ms.Ritika Mohanty	28/01/2022	0	Female	Daughter	01/10/2022	01/10/2022	0	
94	E30	Ms.Aishwarya Subhash Hamand	01/09/1994	28	Female	Self	01/10/2022	01/10/2022	200000	
95	E31	Mr.S.Shrinivasan	04/08/1947	75	Male	Self	01/10/2022	01/10/2022	400000	
96	E31	Ms.Radha Shrinivasan	15/06/1951	71	Female	Wife	01/10/2022	01/10/2022	0	
97	E32	Mr.Dhananjay Salunke	24/09/1971	51	Male	Self	01/10/2022	01/10/2022	400000	
98	E32	Ms.Geeta salunke	05/05/1976	46	Female	Wife	01/10/2022	01/10/2022	0	
99	E32	Mr.Neel D salunke	20/02/2001	21	Male	Son	01/10/2022	01/10/2022	0	
100	E32	Ms.Rajlaxmi D salunke	15/09/2009	13	Female	Daughter	01/10/2022	01/10/2022	0	
101	E33	Mr.Vilas Gangaram Navale	07/04/1965	57	Male	Self	01/10/2022	01/10/2022	400000	
102	E33	Ms. Vijaya Navale	23/12/1971	50	Female	Wife	01/10/2022	01/10/2022	0	
103	E33	Mr.Ranjit Navale	02/04/1998	24	Male	Son	01/10/2022	01/10/2022	0	
104	E34	Mr.Rakesh Shirase	17/10/1974	47	Male	Self	01/10/2022	01/10/2022	400000	
105	E34	Ms.Jyoti Shirase	11/12/1979	42	Female	Wife	01/10/2022	01/10/2022	0	
106	E34	Ms.Diksha Shirase	18/08/2005	17	Female	Daughter	01/10/2022	01/10/2022	0	
107	E34	Mr.Arpit Shirase	28/04/2015	7	Male	Son	01/10/2022	01/10/2022	0	
108	E35	Ms.Neha Surve	24/06/1982	40	Female	Self	01/10/2022	01/10/2022	200000	
109	E35	Mr.Nitin Surve	12/12/1975	46	Male	Husband	01/10/2022	01/10/2022	0	
110	E35	Mr.Ritesh Nitin Surve	01/11/2004	17	Male	Son	01/10/2022	01/10/2022	0	
111	E35	Ms.Tanishka Nitin Surve	16/08/2009	13	Female	Daughter	01/10/2022	01/10/2022	0	
112	E36	Mr.Nand Kumar Jadhav	06/11/1984	37	Male	Self	01/10/2022	01/10/2022	200000	
113	E36	Ms.Ratnamala Jadhav	20/01/1988	34	Female	Wife	01/10/2022	01/10/2022	0	
114	E36	Ms.Kavya Jadhav	04/06/2014	8	Female	Daughter	01/10/2022	01/10/2022	0	
115	E37	Mr.Anil Kale	13/04/1986	36	Male	Self	01/10/2022	01/10/2022	200000	
116	E37	Ms.Bhagyashree Kale	20/06/1991	31	Female	Wife	01/10/2022	01/10/2022	0	
117	E37	Ms.Krashnali Kale	15/08/2017	5	Female	Daughter	01/10/2022	01/10/2022	0	
118	E37	Ms.Swara Anil Kale	04/11/2020	1	Female	Daughter	01/10/2022	01/10/2022	0	
119	E38	Mr.POPAT NAMDEV JADHAV	13/09/1987	35	Male	Self	01/10/2022	01/10/2022	200000	
120	E38	Ms.NILAM POPAT JADHAV	14/04/1992	30	Female	Wife	01/10/2022	01/10/2022	0	
121	E38	Ms.DIVYA POPAT JADHAV	23/01/2014	8	Female	Daughter	01/10/2022	01/10/2022	0	
122	E38	Mr.Shri Popat Jadhav	24/03/2019	3	Male	Son	01/10/2022	01/10/2022	0	
123	E39	Mr.Raju Kerba Rathod	01/06/1973	49	Male	Self	01/10/2022	01/10/2022	200000	
124	E39	Ms.Suman Raju Rathod	05/03/1977	45	Female	Wife	01/10/2022	01/10/2022	0	
125	E39	Ms.Reshma Raju Rathod	05/01/2000	22	Female	Daughter	01/10/2022	01/10/2022	0	
126	E40	Mr.Ganesh Nivrutti Gaikwad	05/04/1990	32	Male	Self	01/10/2022	01/10/2022	200000	
127	E40	Ms.Shweta Ganesh Gaikwad	24/10/1998	23	Female	Wife	01/10/2022	01/10/2022	0	
128	E40	Ms.Durva Ganesh Gaikwad	28/08/2021	1	Female	Daughter	01/10/2022	01/10/2022	0	
129	E41	Mr.Pintoo Baban Rode	08/12/1989	32	Male	Self	01/10/2022	01/10/2022	200000	
130	E41	Ms.Prajakta Pintoo Rode	20/05/1995	27	Female	Wife	01/10/2022	01/10/2022	0	
131	E41	Mr.Aarush Pintoo Rode	11/10/2017	4	Male	Son	01/10/2022	01/10/2022	0	
132	E42	Mr.Pradeep Jadhav	19/09/1981	41	Male	Self	01/10/2022	01/10/2022	200000	
133	E42	Ms.Purva Pradeep Jadhav	01/05/1990	32	Female	Wife	01/10/2022	01/10/2022	0	
134	E42	Mr.Pranay Pradeep Jadhav	21/05/2012	10	Male	Son	01/10/2022	01/10/2022	0	
135	E42	Ms.Pritika Pradeep Jadhav	19/03/2019	3	Female	Daughter	01/10/2022	01/10/2022	0	
136	E43	Mr.Israr Ahmed	08/09/1992	30	Male	Self	01/10/2022	01/10/2022	200000	

137	E43	Ms.Priyanka Wankhede	01/05/1991	31	Female	Wife	01/10/2022	01/10/2022	0	
138	E44	Mr.Dnyaneshwar Ramdas Misal	27/05/1992	30	Male	Self	01/10/2022	01/10/2022	200000	
139	E44	Ms.Vaishali Misal	02/10/1996	25	Female	Wife	01/10/2022	01/10/2022	0	
140	E44	Ms.Pratiksha Misal	16/02/2017	5	Female	Daughter	01/10/2022	01/10/2022	0	
141	E45	Mr.Shivraj Shankarrao Magre	19/05/1983	39	Male	Self	01/10/2022	01/10/2022	200000	
142	E45	Ms.Vidhya Shivraj Magre	18/09/1988	34	Female	Wife	01/10/2022	01/10/2022	0	
143	E45	Ms.Tanishka Shivraj Magre	31/03/2015	7	Female	Daughter	01/10/2022	01/10/2022	0	
144	E46	Ms.Nirupama Mundada	02/11/1978	43	Female	Self	01/10/2022	01/10/2022	400000	
145	E46	Ms.Pritha Mundada	30/07/2001	21	Female	Daughter	01/10/2022	01/10/2022	0	
146	E46	Ms.Alekhya Mundada	17/10/2008	13	Female	Daughter	01/10/2022	01/10/2022	0	
147	E47	Ms.Dr.Beena Jiby	07/03/1975	47	Female	Self	01/10/2022	01/10/2022	400000	
148	E47	Mr.Jiby Kuriyan	26/01/1970	52	Male	Husband	01/10/2022	01/10/2022	0	
149	E47	Ms.Binita Jiby	14/09/2000	22	Female	Daughter	01/10/2022	01/10/2022	0	
150	E47	Mr.Bijin Jiby	10/08/2002	20	Male	Son	01/10/2022	01/10/2022	0	
151	E48	Mr.Girish Chavan	14/11/1985	36	Male	Self	01/10/2022	01/10/2022	400000	
152	E48	Ms.Pooja Karekar	29/11/1986	35	Female	Wife	01/10/2022	01/10/2022	0	
153	E48	Mr.Shouraya Girish chavan	13/07/2015	7	Male	Son	01/10/2022	01/10/2022	0	
154	E49	Ms.Sonali Kshirsagar	03/11/1985	36	Female	Self	01/10/2022	01/10/2022	400000	
155	E49	Mr.Dashrath Suryavanshi	08/10/1982	39	Male	Husband	01/10/2022	01/10/2022	0	
156	E49	Ms.Kiyya Suryavanshi	03/07/2017	5	Female	Daughter	01/10/2022	01/10/2022	0	
157	E49	Ms.Stavya Suryavanshi	13/09/2020	2	Female	Daughter	01/10/2022	01/10/2022	0	
158	E50	Mr.Mahesh Jadhav	29/06/1984	38	Male	Self	01/10/2022	01/10/2022	200000	
159	E50	Ms.Gauri Mahesh Jadhav	04/11/1988	33	Female	Wife	01/10/2022	01/10/2022	0	
160	E50	Ms.Siddhi Mahesh Jadhav	25/09/2011	11	Female	Daughter	01/10/2022	01/10/2022	0	
161	E50	Mr.shriraj mahesh jadhav	18/01/2014	8	Male	Son	01/10/2022	01/10/2022	0	
162	E51	Mr.Gajanan Sherkhane	23/07/1973	49	Male	Self	01/10/2022	01/10/2022	200000	
163	E51	Ms.Manisha G Sherkhane	15/05/1986	36	Female	Wife	01/10/2022	01/10/2022	0	
164	E51	Mr.Prathmesh G Sherkhane	25/07/2005	17	Male	Son	01/10/2022	01/10/2022	0	
165	E51	Ms.Sakshi G Sherkhane	14/05/2007	15	Female	Daughter	01/10/2022	01/10/2022	0	
166	E52	Mr.Tukaram Ramesh Telange	06/11/1991	30	Male	Self	01/10/2022	01/10/2022	200000	
167	E52	Ms.Radha Bhagwan Japtap	10/02/1996	26	Female	Wife	01/10/2022	01/10/2022	0	
168	E52	Mr.Dadasaheb Telange	25/11/2020	1	Male	Son	01/10/2022	01/10/2022	0	
169	E53	Mr.SACHIN EKNATH SURVE	08/02/1984	38	Male	Self	01/10/2022	01/10/2022	200000	
170	E53	Ms.ANUJA SACHIN SURVE	06/11/1990	31	Female	Wife	01/10/2022	01/10/2022	0	
171	E53	Ms.SAMRUDDHI SACHIN Surve	04/10/2010	11	Female	Daughter	01/10/2022	01/10/2022	0	
172	E53	Ms.SWARA SACHIN SURVE	29/05/2012	10	Female	Daughter	01/10/2022	01/10/2022	0	
173	E54	Mr.Kiran Balbhim Rathod	25/04/1989	33	Male	Self	01/10/2022	01/10/2022	200000	
174	E54	Ms.Laxmi Kiran Rathod	02/05/1992	30	Female	Wife	01/10/2022	01/10/2022	0	
175	E54	Ms.Kanchan Kiran Rathod	22/04/2013	9	Female	Daughter	01/10/2022	01/10/2022	0	
176	E54	Ms.Kinchan Kiran Rathod	27/12/2014	7	Female	Daughter	01/10/2022	01/10/2022	0	
177	E55	Mr.RamKrishna Balu Chandan	03/07/1987	35	Male	Self	01/10/2022	01/10/2022	200000	
178	E55	Ms.Ashwini Ramkrishna Chandan	20/11/1993	28	Female	Wife	01/10/2022	01/10/2022	0	
179	E55	Ms.Aradhya Ramkrishna Chandan	06/05/2016	6	Female	Daughter	01/10/2022	01/10/2022	0	
180	E55	Mr.Rudransh Ramkrishna Chandan	06/07/2020	2	Male	Son	01/10/2022	01/10/2022	0	
181	E56	Mr.Vishal Tulstdidas Dhupal	01/11/1985	36	Male	Self	01/10/2022	01/10/2022	200000	
182	E56	Ms.Pallavi Vishal Dhupal	08/03/1985	37	Female	Wife	01/10/2022	01/10/2022	0	
183	E56	Mr.Sarthak Vishal Dhupal	11/10/2012	9	Male	Son	01/10/2022	01/10/2022	0	
184	E57	Mr.Rajaram Jadhav	01/06/1973	49	Male	Self	01/10/2022	01/10/2022	200000	
185	E57	Ms.Shakuntala Jadhav	02/06/1977	45	Female	Wife	01/10/2022	01/10/2022	0	
186	E58	Mr.Rahul Rajaram Jadhav	16/04/1995	27	Male	Self	01/10/2022	01/10/2022	200000	
187	E58	Ms.Nikita Rahul Jadhav	03/12/2001	20	Female	Wife	01/10/2022	01/10/2022	0	
188	E59	Mr.Tushar Dnyaneshwar Gaikwad	31/12/1988	33	Male	Self	01/10/2022	01/10/2022	200000	
189	E59	Ms.Sonika Tushar Gaikwad	13/02/1992	30	Female	Wife	01/10/2022	01/10/2022	0	
190	E59	Ms.Sharayu Tushar Gaikwad	22/10/2015	6	Female	Daughter	01/10/2022	01/10/2022	0	
191	E60	Ms.Shraddha Ganesh Bansode	17/05/1990	32	Female	Self	01/10/2022	01/10/2022	400000	

192	E60	Mr.Ganesh Bansode	23/02/1988	34	Male	Husband	01/10/2022	01/10/2022	0	
193	E60	Mr.UTTKARSH GANESH BANSODE	17/07/2012	10	Male	Son	01/10/2022	01/10/2022	0	
194	E60	Ms.MANASVI GANESH BANSODE	16/05/2016	6	Female	Daughter	01/10/2022	01/10/2022	0	
195	E61	Mr.Prashant N Avchare	22/07/1976	46	Male	Self	01/10/2022	01/10/2022	200000	
196	E61	Ms.veena p Avchare	12/06/1978	44	Female	Wife	01/10/2022	01/10/2022	0	
197	E61	Mr.Rithul p Avchare	05/08/2011	11	Male	Son	01/10/2022	01/10/2022	0	
198	E62	Mr.Ambar Asaram Pawar	19/06/1989	33	Male	Self	01/10/2022	01/10/2022	200000	
199	E62	Ms.Shital Ambar Pawar	09/04/1996	26	Female	Wife	01/10/2022	01/10/2022	0	
200	E62	Mr.Aaryan Ambar Pawar	16/03/2015	7	Male	Son	01/10/2022	01/10/2022	0	
201	E62	Ms.Ardhaya Ambar Pawar	13/08/2018	4	Female	Daughter	01/10/2022	01/10/2022	0	
202	E63	Mr.Deepak Dixit	22/12/1980	41	Male	Self	01/10/2022	01/10/2022	400000	
203	E63	Ms.Madhavi Deepak Dixit	03/01/1983	39	Female	Wife	01/10/2022	01/10/2022	0	
204	E63	Ms.Yashada Deepak Dixit	21/09/2012	10	Female	Daughter	01/10/2022	01/10/2022	0	
205	E63	Mr.Jayesh Deepak Dixit	23/09/2015	7	Male	Son	01/10/2022	01/10/2022	0	
206	E64	Mr.Anil Verma	30/04/1968	54	Male	Self	01/10/2022	01/10/2022	400000	
207	E64	Ms.Sabitha Anil Verma	24/11/1973	48	Female	Wife	01/10/2022	01/10/2022	0	
208	E65	Mr.Abhay Mishra	29/07/1979	43	Male	Self	01/10/2022	01/10/2022	400000	
209	E65	Ms.Sheetal Abhay Mishra	02/09/1979	43	Female	Wife	01/10/2022	01/10/2022	0	
210	E66	Mr.Kapil Kapdiya	15/04/1986	36	Male	Self	01/10/2022	01/10/2022	400000	
211	E66	Ms.Swati Kapil Kapdiya	05/10/1987	34	Female	Wife	01/10/2022	01/10/2022	0	
212	E66	Mr.Mayur Kapil Kapdiya	12/07/2016	6	Male	Son	01/10/2022	01/10/2022	0	
213	E67	Pushpa Ramprasad Zavar	01/06/1952	70	Female	Self	01/10/2022	01/10/2022	400000	
214	E68	Mr.Praveen Ramprasad Zavar	02/09/1971	51	Male	Self	01/10/2022	01/10/2022	400000	
215	E68	Mrs.Jayshree Praveen Zavar	03/10/1973	48	Female	Wife	01/10/2022	01/10/2022	0	
216	E68	Ms.Harshali Praveen Zavar	20/05/1999	23	Female	Daughter	01/10/2022	01/10/2022	0	
217	E68	Mr.Sahil Praveen Zavar	04/02/2003	19	Male	Son	01/10/2022	01/10/2022	0	
218	E69	Smt.Archana Deepak Zavar	07/02/1973	49	Female	Self	01/10/2022	01/10/2022	400000	
219	E69	Mr.Tejas Deepak Zavar	18/08/1999	23	Male	Son	01/10/2022	01/10/2022	0	
220	E69	Ms.Vaishnavi Deepak Zavar	08/11/2006	15	Female	Daughter	01/10/2022	01/10/2022	0	
221	E70	Dr.Gitesh Kothari	31/10/1976	45	Male	Self	01/10/2022	01/10/2022	400000	
222	E70	Mrs.Rakhi Kothari	04/06/1979	43	Female	Wife	01/10/2022	01/10/2022	0	
223	E70	Ms.Divya Kothari	25/08/2002	20	Female	Daughter	01/10/2022	01/10/2022	0	
224	E70	Ms.Jiya Kothari	07/03/2005	17	Female	Daughter	01/10/2022	01/10/2022	0	
225	E71	Mr.Sunil Kumar	01/01/1980	42	Male	Self	01/10/2022	01/10/2022	200000	
226	E71	Mrs.Soumya C	11/12/1986	35	Female	Wife	01/10/2022	01/10/2022	0	
227	E71	Ms.Veda S Kumar	09/02/2013	9	Female	Daughter	01/10/2022	01/10/2022	0	
228	E71	Mr.Vedant S Kumar	14/01/2020	2	Male	Son	01/10/2022	01/10/2022	0	
229	E72	Mrs.Shalini Santosh Shende	09/09/1988	34	Female	Self	01/10/2022	01/10/2022	200000	
230	E72	Mr.Santosh Tulshiram Shende	21/06/1980	42	Male	Husband	01/10/2022	01/10/2022	0	
231	E72	Mr.Tanmay Santosh Shende	30/08/2011	11	Male	Son	01/10/2022	01/10/2022	0	
232	E73	Mr.Sambhaji N. Khandve	01/06/1965	57	Male	Self	01/10/2022	01/10/2022	200000	
233	E73	Mrs.Sharda S. khandve	26/10/1968	53	Female	Wife	01/10/2022	01/10/2022	0	
234	E74	Ms.Priti Dewangan	10/08/1996	26	Female	Self	01/10/2022	01/10/2022	200000	
235	E75	Mr.Laxman Kumar Tripathy	12/05/1963	59	Male	Self	01/10/2022	01/10/2022	400000	
236	E75	Mr.Chirag Tripathy	08/04/1997	25	Male	Son	01/10/2022	01/10/2022	0	
237	E76	Mrs.Megha Joshi	28/07/1987	35	Female	Self	01/10/2022	01/10/2022	400000	
238	E76	Mr.Sunny Upadhyay	28/11/1987	34	Male	Husband	01/10/2022	01/10/2022	0	
239	E76	Mr.Advik Upadhyay	24/01/2018	4	Male	Son	01/10/2022	01/10/2022	0	
240	E77	Mr.Roop Kishore Singhal	15/03/1969	53	Male	Self	01/10/2022	01/10/2022	400000	
241	E77	Mrs.Anju Agarwal	02/10/1974	47	Female	Wife	01/10/2022	01/10/2022	0	
242	E78	Mrs.Jigyasaa Thakker	19/09/1987	35	Female	Self	01/10/2022	01/10/2022	200000	
243	E78	Mr.Hiren Thakker	24/11/1983	38	Male	Husband	01/10/2022	01/10/2022	0	
244	E78	Mr.Vedant Thakker	12/08/2012	10	Male	Son	01/10/2022	01/10/2022	0	
245	E78	Mr.Keshavam Thakker	18/02/2016	6	Male	Son	01/10/2022	01/10/2022	0	
246	E79	Mr.Kiran Waghole	30/06/1993	29	Male	Self	01/10/2022	01/10/2022	200000	
247	E79	Mrs.Kajal Kiran Waghole	14/11/1995	26	Female	Wife	01/10/2022	01/10/2022	0	
248	E80	Mr.Anand Thakare	05/03/1964	58	Male	Self	01/10/2022	01/10/2022	200000	
249	E80	Mrs.Suman Thakare	08/11/1967	54	Female	Wife	01/10/2022	01/10/2022	0	
250	E80	Ms.Mayuri Thakare	16/11/1999	22	Female	Daughter	01/10/2022	01/10/2022	0	
251	E81	Mr.Sagar Uttam Bobade	22/11/1974	47	Male	Self	01/10/2022	01/10/2022	200000	
252	E81	Mrs.Arti Sagar Bobade	23/01/1981	41	Female	Wife	01/10/2022	01/10/2022	0	
253	E81	Ms.Rushika Sagar Bobade	31/05/2004	18	Female	Daughter	01/10/2022	01/10/2022	0	
254	E81	Mr.Rudraksh Sagar Bobade	31/05/2004	18	Male	Son	01/10/2022	01/10/2022	0	
255	E82	Mrs.Rohini Uday Nikam	03/01/1977	45	Female	Self	01/10/2022	01/10/2022	400000	



256	E82	Mr.Uday Vasantryo Nikam	11/08/1974	48	Male	Husband	01/10/2022	01/10/2022	0	
257	E82	Ms.Nandini Uday Nikam	13/10/2003	18	Female	Daughter	01/10/2022	01/10/2022	0	
258	E82	Ms.Netra Uday Nikam	02/05/2007	15	Female	Daughter	01/10/2022	01/10/2022	0	
259	E83	Mrs.Ritu Goel	22/02/1992	30	Female	Self	01/10/2022	01/10/2022	400000	
260	E83	Mr.Bharat Bhushan	05/05/1991	31	Male	Husband	01/10/2022	01/10/2022	0	
261	E84	Mr.Nilesh Rathod	05/05/1987	35	Male	Self	01/10/2022	01/10/2022	200000	
262	E84	Mrs.Renuka Nilesh Rathod	24/11/1990	31	Female	Wife	01/10/2022	01/10/2022	0	
263	E84	Mr.Arnab Nilesh Rathod	30/11/2011	10	Male	Son	01/10/2022	01/10/2022	0	
264	E84	Mr.Pranav Nilesh Rathod	09/11/2013	8	Male	Son	01/10/2022	01/10/2022	0	
265	E85	Mr.Pandit Madan Jadhav	26/05/1987	35	Male	Self	01/10/2022	01/10/2022	200000	
266	E85	Mrs.Varsha Pandit Jadhav	01/01/1994	28	Female	Wife	01/10/2022	01/10/2022	0	
267	E85	Ms.Vaishnavi Pandit Jadhav	19/09/2014	8	Female	Daughter	01/10/2022	01/10/2022	0	
268	E85	Ms.Sakshi Pandit Jadhav	06/12/2018	3	Female	Daughter	01/10/2022	01/10/2022	0	
269	E86	Mr.Satish Dashrath Adkar	17/03/1993	29	Male	Self	01/10/2022	01/10/2022	200000	
270	E86	Mrs.Roshni Satish Adkar	27/12/1994	27	Female	Wife	01/10/2022	01/10/2022	0	
271	E86	Mr.Shivaay Satish Adkar	12/10/2017	4	Male	Son	01/10/2022	01/10/2022	0	
272	E86	Mr.Shahuraj Satish Adkar	22/04/2020	2	Male	Son	01/10/2022	01/10/2022	0	
273	E87	Mr.Lavkush Singh	10/06/1977	45	Male	Self	01/10/2022	01/10/2022	400000	
274	E87	Mrs.Priyanka Singh	02/08/1983	39	Female	Wife	01/10/2022	01/10/2022	0	
275	E87	Ms.Sanskriti Singh	02/11/2017	4	Female	Daughter	01/10/2022	01/10/2022	0	
276	E87	Ms.Dhruvika Singh	13/10/2021	0	Female	Daughter	01/10/2022	01/10/2022	0	
277	E88	Smt.Rajashree Dighe	07/01/1978	44	Female	Self	01/10/2022	01/10/2022	400000	
278	E88	Ms.Ashlesha Dighe	23/08/2001	21	Female	Daughter	01/10/2022	01/10/2022	0	
279	E89	Karishma Meshram	09/09/1993	29	Female	Self	01/10/2022	01/10/2022	200000	

## Branch List

ZONE	REGION/STATE	LOCATIONS	MAILING ADDRESS
CENTRAL	CHATTISGARH	BILASPUR	GROUND FLOOR, KIRTI, RAJENDRA NAGAR,BILASPUR,CHATTISGARH,PIN-495001
CENTRAL	TAMILNADU	VELLORE	FIRST FLOOR, NO 13,4TH EAST CROSS ROAD, VELLOREVELLORE,DURG,TAMILNADU,PIN-490001
CENTRAL	CHATTISGARH	BHILAI	2ND FLOOR, BLOCK - 19 , PLOT 1 , DAKHIN GANGOTRI, SUPELA BHILAI- 490023,DURG,CHATTISGARH,PIN-490023
CENTRAL	CHATTISGARH	KORBA	1ST FLOOR, 646/1, ABOVE HDFC BANK, POWER HOUSE ROAD,OPPOSITE SHARDA VIHAR COLONY, KORBA, KORBA,CHATTISGARH,PIN-495677
CENTRAL	MADHYA PRADESH	JABALPUR	BHAWANI PLAZA, 2ND FLOOR, HOUSE NO.1230, FOURTH BRIDGE, NAPIER TOWN,,JABALPUR,MADHYA PRADESH,PIN-482001
CENTRAL	CHATTISGARH	AMBIKAPUR	GROUND FLOOR, NATIONAL HIGHWAY, NEAR STATE BANK OF INDIA ATM,MANENDRAGARH ROAD, NAWAPARA, AMBIKAPUR, DISTRICT-SARGUJA, SURGUJA,CHATTISGARH,PIN-497001
CENTRAL	MADHYA PRADESH	BHOPAL	3RD FLOOR, T-5, CITY CENTER, PLOT NO 1, PRESS COMPLEX,ZONE-I, M. P. NAGAR,BHOPAL,MADHYA PRADESH,PIN-462011
CENTRAL	MADHYA PRADESH	GWALIOR	1ST FLOOR, PLOT NO.45-A, ABOVE VLCC,CITY CENTER, GWALIOR,,GWALIOR,MADHYA PRADESH,PIN-474001
CENTRAL	MADHYA PRADESH	INDORE	2ND FLOOR, PLOT NO-93, SCHEME NO. 47SAPNA SANGEETA, MAIN ROAD,,INDORE,MADHYA PRADESH,PIN-452001
CENTRAL	CHATTISGARH	RAIPUR	OFFICE NO. 501 & 509-512, 5TH FLOOR,DB CITY, CORPORATE PARK, PLOT NO. 1, BLOCK NO. 9, RAJBANDHU MAIDAN, RAIPUR,RAIPUR,CHATTISGARH,PIN-492001
EAST	WEST BENGAL	SILIGURI	1ST FLOOR, ROOM NO-3 & 4, CITY PLAZA, SEVOK ROAD,,DARJEELING, WEST BENGAL,PIN-734001
EAST	WEST BENGAL	KOLKATA-ANUJ CHAMBERS	4TH FLOOR, ANUJ CHAMBER, 24 PARK STREET,KOLKATA, WEST BENGAL,PIN-700016
EAST	WEST BENGAL	KOLKATA ZONE	4TH FLOOR, ANUJ CHAMBER, 24 PARK STREET,KOLKATA, WEST BENGAL,PIN-700016
EAST	WEST BENGAL	KOLKATA-DCPL	4TH FLOOR, DEVELOPMENT HOUSE,24 PARK STREET,KOLKATA, WEST BENGAL,PIN-700016
EAST	WEST BENGAL	MALDA	1A, 1ST FLOOR, NILANJANA APARTMENTS, MAHESHMATI, 62/324, RABINDRA AVENUE, PS- ENGLISH BAZAAR,MALDA, WEST BENGAL,PIN-732101
EAST	WEST BENGAL	KHARAGPUR	1ST FLOOR, NEW SAI COMPLEX, BESIDE KHARAGPUR COLLEGE, INDIA OT ROAD,,WEST MEDINIPUR, WEST BENGAL,PIN-721305
EAST	ASSAM	GUWAHATI	2ND FLOOR, F FORT, SOUTH SARANIAULUBARI, G S ROAD, GUWAHATI, ASSAM,KAMRUP,ASSAM,PIN-781007
EAST	BIHAR	BHAGALPUR	1ST FLOOR, SANJAY ARCADE,MAHATMA GANDHI ROAD, NEAR HEAD POST OFFICE,BHAGALPUR, BIHAR,PIN-812001
EAST	BIHAR	GAYA	2ND FLOOR, SHANTI MARKET COMPLEX, CHURCH ROAD,GAYA, BIHAR,PIN-823001
EAST	BIHAR	MUZAFFARPUR	2ND FLOOR, "GAHILO GALAXY", KALAM BAGH,AGHORIA BAZAR, MUZAFFARPUR,MUZAFFARPUR, BIHAR,PIN-842002
EAST	BIHAR	PATNA	UNIT 508, 5TH FLOOR, PATNA ONE MALL, DAKBUNGLA, CHAURAHA,PATNA, BIHAR,PIN-800001
EAST	ORISSA	BERHAMPUR	1ST FLOOR, "RUPAVATI COMPLEX", OPPOSITE ICICI BANKDHARMA NAGAR, MAIN ROAD,GANJAM,ORISSA,PIN-760001
EAST	ORISSA	BHUBANESHWAR	1ST FLOOR, PLOT NO-1207/2777, ANAND PLAZA, ANAND BRAHMESWAR BAG,TANKAPANI ROAD,,KHORDHA,ORISSA,PIN-751018
EAST	ORISSA	JEYPORE	R.K.TOWERS, 1ST FLOOR, M.G.ROADDIST- KORAPUT, P.O.:-JEYPORE,KORAPUT,ORISSA,PIN-764001
EAST	ORISSA	SAMBALPUR	1ST FLOOR, NEAR UNION BANK, BALAJI MID TOWN,DAHERI PALI, BUDHARAJA, SAMBALPUR,ORISSA,PIN-768004
EAST	JHARKHAND	DHANBAD	2ND FLOOR, SUN RISE HOTEL COMPLEX, BANK MORE, KATRAS ROAD, OPP. BARA GURUDWARA,,DHANBAD,JHARKHAND,PIN-826001
EAST	JHARKHAND	RANCHI	6TH FLOOR, UNIT NO.601, ESTATE PLAZA, ESTATE TIMBER PREMISES, OLD HB ROAD, KANTATOLI,,RANCHI,JHARKHAND,PIN-834001
EAST	JHARKHAND	JAMSHEDPUR	1ST FLOOR, "AVISHKAR BUMBRA ENCLAVE", Q ROAD, BISTUPUR,,East Singhbhum,JHARKHAND,PIN-831001
EAST	WEST BENGAL	HOWRAH	3RD FLOOR, KRISHNA ENCLAVE, 2/1 BHAJAN LAL LOHIA, HOWRAH,HOWRAH, WEST BENGAL,PIN-711101
EAST	WEST BENGAL	BARASAT	OFFICE # 2, 4TH FLR, J N PLAZA, HOLDING # 2271,, BARRACKPUR ROAD,BARASAT, 24 PARGANAS (N),BARASAT,NORTH 24 PARGANAS, WEST BENGAL,PIN-700124
EAST	WEST BENGAL	KOLKATA-ECOSPACE	5TH FLOOR, BLOCK 4A, UNIT NO. 501, , ECOSPACE BUSINESS PARK,AMBUJA REALTY CAMPUS,ACTION AREA-II, NEW TOWN, RAJARHAT,KOLKATA, NEW TOWN, NORTH 24 PARGANAS,NORTH 24 PARGANAS, WEST BENGAL,PIN-700160
EAST	ORISSA	ROURKELA	1ST FLOOR, OPP SBI UDITNAGAR BRANCH, GHAFLOOR COLONY UDITNAGAR, P.O & P.S: UDIT NAGAR DIST-SUNDARGARH,SUNDARGARH,ORISSA,PIN-769012
EAST	WEST BENGAL	DURGAPUR	2ND FLOOR, KAWALITY HOTEL COMPLEX, NEAR BHIRINGI MORE,,BARDHAMAN, WEST BENGAL,PIN-713213
EAST	WEST BENGAL	BURDWAN	1ST FLOOR, G T ROAD,BHANGAKUTHI,ABOVE HDFC BANK,BARDHAMAN, WEST BENGAL,PIN-713101
EAST	WEST BENGAL	ASANSOL	UNIT B401, 4TH FLOOR, B BLOCK, BUILDING P. C. CHATTERJEE MARKET, RAMBHANDHU TALA,BARDHAMAN, WEST BENGAL,PIN-713303
NORTH	DELHI	NEW DELHI-PITAMPURA	4TH FLOOR, UNIT NO-477, AGGARWAL CYBER PLAZA, 2 NETAJI SUBHASH PLACE,,NORTH WEST DELHI,DELHI,PIN-110034
NORTH	UTTARAKHAND	DEHRADUN	2ND FLOOR, PATEL HOUSE, 176 PATEL NAGARABOVE BANK OF BARODA,,DEHRADUN,UTTARAKHAND,PIN-248001
NORTH	HARYANA	AMBALA	99, 1ST FLOOR,, ABOVE HDFC BANK, PREM NAGAR, AMBALA CITY, AMBALA,AMBALA,HARYANA,PIN-134001
NORTH	HARYANA	GURGAON	SCO-386, 1ST FLOOR, SECTOR-29, OPP. IFFCO CHOWK, METRO STATION,,GURGAON,HARYANA,PIN-122001
NORTH	PUNJAB	JALANDHAR	3RD FLOOR, OPP. FUTURE,GENERALI, SCO- 5-6, PUDA COMPLEX,,JALANDHAR,PUNJAB,PIN-144001
NORTH	PUNJAB	LUDHIANA	UNIT NO. FUF-6 & 7, 4TH FLOOR, KUNAL TOWER, B-XIX/88, MALL ROAD,,LUDHIANA,PUNJAB,PIN-141001
NORTH	RAJASTHAN	JAIPUR	3RD FLOOR, "PRESTIGE TOWER", E-1, AMARAPALI ROAD,VAISHALI NAGAR,JAIPUR,RAJASTHAN,PIN-302021
NORTH	RAJASTHAN	JODHPUR	E-3-4, 1ST FLOOR "SUN PLAZA", MAIN PAL ROAD,NEAR BARAKTULLA STADIUM,,JODHPUR,RAJASTHAN,PIN-342003
NORTH	RAJASTHAN	UDAIPUR	3RD FLOOR, MEERA COMPLEX, OPPOSITE MEERA GIRLS COLLEGE,SARDARPURA,UDAIPUR,RAJASTHAN,PIN-313001
NORTH	UTTAR PRADESH	ALLAHABAD	2ND FLOOR, "SRI MAHENDRA COMPLEX", 5, ELGIN ROAD ( L.B.S.MARG), CIVIL LINES,ALLAHABAD,UTTAR PRADESH,PIN-211001
NORTH	UTTAR PRADESH	NOIDA	1ST FLOOR,H1 A/16,SECTOR-63GAUTAM BUDDHA NAGAR,NOIDA,UTTAR PRADESH,PIN-201301
NORTH	UTTAR PRADESH	LUCKNOW	5TH FLOOR, HALWASIYA COMMERCE HOUSE, 11 MG MARG, HABIBULLAH ESTATE, HAZRATGANJ,LUCKNOW,UTTAR PRADESH,PIN-226001
NORTH	UTTAR PRADESH	VARANASI	JAS MAA COMPLEX, D-58/12, A-2, GANDHI NAGAR,SIGRA,VARANASI,UTTAR PRADESH,PIN-221010
NORTH	PUNJAB	CHANDIGARH	1ST FLOOR, SCF-75, PHASE 9,MOHALI,Sahibzada Ajit Singh Nagar,PUNJAB,PIN-160062
NORTH	RAJASTHAN	BIKANER	CHUGH MANSION , 1ST FLOOR,OPP. DRM OFFICE,BIKANER,RAJASTHAN,PIN-334001
NORTH	UTTAR PRADESH	KANPUR	1ST FLOOR, PLOT 122/728 & 122/729, SHASTRI NAGAR,NEAR CHAIN FACTORY CHAURAHA,,KANPUR NAGAR,UTTAR PRADESH,PIN-208005
NORTH	DELHI	NEW DELHI-SANT NAGAR	8, SANT NAGAR, EAST OF KAILASH, NEW DELHI, SOUTH DELHI,,SOUTH DELHI,DELHI,PIN-110065
SOUTH	ANDHRA PRADESH	RAJAHMUNDRY	36-7-14, 3RD FLOOR, KONDURI SQUARE, KONDURI STREET, INNSPETA,EAST GODAVARI,ANDHRA PRADESH,PIN-533101
SOUTH	KERALA	TRIVANDRUM	GROUND FLOOR, "HAJI M BAVA SAHIB COMMERCIAL COMPLEX,TC 25/2890(1), AMBUJAVILSASAM ROAD,,THIRUVANANTHAPURAM,KERALA,PIN-695001
SOUTH	TELANGANA	KARIMNAGAR	1ST FLOOR,AK EASTATE MISHRA COMPLEX, 2-6-304/7,MUKARAMPURA, KARIMNAGAR,KARIMNAGAR,TELANGANA,PIN-505001
SOUTH	TELANGANA	KHAMMAM	2ND FLOOR,OLD: 4-2-129/1,NEW: 15-8210/A,SRINAGAR COLONY,WYRA ROAD,KHAMMAM,TELANGANA,PIN-507002
SOUTH	ANDHRA	VIJAYAWADA	4TH FLOOR, SURVEY NO. 134/3, PLOT NO. 16,TEACHERS COLONY,GURUNANAK ROAD,

	PRADESH		PATAMATA,,KRISHNA,ANDHRA PRADESH,PIN-520008
SOUTH	ANDHRA PRADESH	NELLORE	4TH FLOOR, "SRI CHAMUNDESHWARI PLAZA",HOUSE NO.24/2/418, SARASWATHI NAGAR,,Sri Potti Srimamulu Nellore,ANDHRA PRADESH,PIN-524003
SOUTH	ANDHRA PRADESH	VISAKHAPATNAM	DNO. 48-6-23, 1ST FLOOR, SRIRAM SAI GAYATRI COMPLEX,SRINAGAR COLONY, NEAR RAMATALKIES,VISAKHAPATNAM,ANDHRA PRADESH,PIN-530016
SOUTH	ANDHRA PRADESH	VIZIANAGARAM	3RD FLOOR, SHOP NO-11 AND 12, PSN ESTATE,LTB ROAD, VIZIANAGARAM,,VIZIANAGARAM,ANDHRA PRADESH,PIN-535003
SOUTH	TELANGANA	WARANGAL	3RD FLOOR, KANDAKATLAS GATEWAY, BLOCK DSHOP NO 12 & 13, PREMISE NO 5-11-503 & 504, KUC CROSS ROAD, KAIM NAGAR,Warangal (urban),TELANGANA,PIN-506009
SOUTH	KARNATAKA	BANGALORE-J C ROAD	1ST FLOOR, HM ASTRID, NO 36 J. C. ROAD,BANGALORE,KARNATAKA,PIN-560002
SOUTH	KARNATAKA	BELGAUM	ANNAPURNESWARI,1300 RAMLINGKHIN GALLI,BELGAUM,KARNATAKA,PIN-590001
SOUTH	KARNATAKA	MANGALORE	UNIT NO. 308 & 309, 3RD FLOOR, JANVI PLAZA, K.R.R. RAO ROAD, KARANGALPADY,MANGALORE,DAKSHINA KANNADA,KARNATAKA,PIN-575003
SOUTH	KARNATAKA	HUBLI	2ND FLOOR, V.A.KALBURGI, HALLMARK BUILDING PINTO ROAD, DESAI CROSS,DHARWAD,KARNATAKA,PIN-580029
SOUTH	KARNATAKA	GULBARGA	F-7, 1ST FLOOR, ASIAN COMPLEX, CITY MARKET,GULBARGA,KARNATAKA,PIN-585103
SOUTH	KARNATAKA	MYSORE	B S T ARCADE, 1ST FLOOR, NO.71SAUKAR CHANNIAH ROAD, ABOVE P N B,Myuru,KARNATAKA,PIN-570009
SOUTH	KERALA	COCHIN	1ST FLOOR, JAIN TOWER, POWER HOUSE, NH BY PASS,VYTILLA, ERNAKULAM,KERALA,PIN-682019
SOUTH	KERALA	KOTTAYAM	1ST FLOOR, VETTEEL ESTATE, KANJIKUZHUKOTTAYAM-686004, KERALA,KOTTAYAM,KERALA,PIN-686004
SOUTH	KERALA	CALICUT	4TH FLOOR, "CITY GALLERY", 6/835E, KANNOR ROAD,,KOZHIKODE,KERALA,PIN-673001
SOUTH	KERALA	TRISSUR	2ND FLOOR, "E TOWN SHOPPING"EAST FORT JUNCTION,THRISSUR,KERALA,PIN-680005
SOUTH	TAMILNADU	CHENNAI 1	NAVIN'S PRESIDUM, 3RD FLOOR, N.M ROAD, NEW NO: 17/19, OLD NO: 103, "B" BLOCK, 3A, NELSON MANICKAM ROAD,,CHENNAI,TAMILNADU,PIN-600029
SOUTH	TAMILNADU	CHENNAI 2	CHENNAI - NELSON MANICKAM ROAD-"NAVIN'S PRESIDUM", 3RD FLOOR, , N.NO-17-19, OLD NO-103, A BLOCK,, NELSON MANICKAM ROAD, AMINJAKARAI, EGMORE NUNGAMBAKKAM,CHENNAI,TAMILNADU,PIN-600029
SOUTH	TAMILNADU	COIMBATORE	UNIT NO. 218/2-2, 2ND FLOOR, BRINDABAN BUILDING, T V SWAMY ROAD,R S PURAM, COIMBATORE,COIMBATORE,TAMILNADU,PIN-641002
SOUTH	TAMILNADU	MADURAI	3RD FLOOR, RAJA BARLEY BUILDING, 79/2, BYPASS ROAD79/2, BYPASS ROAD,MADURAI,TAMILNADU,PIN-625001
SOUTH	TAMILNADU	SALEM	3RD FLOOR, SHANTHI PLAZA, NO. 1/5, BRINDAVAN ROAD, NEAR SKS HOSPITALFAIRLANDS, SALEM,SALEM,TAMILNADU,PIN-636004
SOUTH	TAMILNADU	TRICHY	UPPER GROUND FLOOR, FAJ PARK, NO. 36 & 37, AMARAR JEEVA STREET, JAILAMIYA, 6TH CROSS, TVS TOLGATE, TRICHY, TIRUCHIRAPPALLI, TIRUCHIRAPPALLI,TAMILNADU,PIN-620020
SOUTH	TAMILNADU	TIRUNELVELI	OFFICE SPACE NO-24, NEAR OLD CENTRAL THEATRE,SWAMY NELLAIAPPAR HIGH ROADSRIPURAM,TIRUNELVELI,TAMILNADU,PIN-627001
SOUTH	GUJARAT	JAMNAGAR	3RD FLOOR, ROOM NO- 339, MADHAV PLAZA, LAL BUNGLow,JAMNAGAR,GUJARAT,PIN-361001
SOUTH	PONDICHERRY	PONDICHERRY	2ND FLOOR,SARABAR PLAZA,NO 110,VILLIANUR MAIN ROAD,PONDICHERRY,PONDICHERRY,PIN-605010
SOUTH	TELANGANA	HYDERABAD ZONE	G-2, GROUND FLOOR, MANDHANA TOWERS, 7-1-59/2 & 59/6,AMEERPET,HYDERABAD,TELANGANA,PIN-500016
SOUTH	TELANGANA	HYDERABAD-AMEERPET	G-2, GROUND FLOOR, MANDHANA TOWERS, 7-1-59/2 & 59/6,AMEERPET,,HYDERABAD,TELANGANA,PIN-500016
SOUTH	TELANGANA	HYDERABAD-KUKATPALLY	2ND FLOOR, SRINIVASA CHAMBER, PLOT NO.28 & 15, NEAR BIG BAZARMANSOORABAD,HYDERABAD,TELANGANA,PIN-500074
SOUTH	ANDHRA PRADESH	KURNOOL	1ST FLOOR, SMR SQUARE, NO. 40/37-L-B, RIVER VIEW COLONY,KURNOOL,ANDHRA PRADESH,PIN-518004
SOUTH	KERALA	KANNUR	2ND FLOOR, J.R.COMPLEX, TALAP ROAD,KANNUR,KERALA,PIN-670004
SOUTH	ANDHRA PRADESH	GUNTUR	1ST FLOOR, SATYAVANI HEIGHTS, 12/1, ARUNDELPET,DOOR NO.6-12-60 AND 6-12-63, 31-12-1020,,GUNTUR,ANDHRA PRADESH,PIN-522002
WEST	GUJARAT	AHMEDABAD	OFFICE NO. 202, 2ND FLOOR, AURUM AVENUE, MITHAKHALI SIX ROAD, NAVARANGPURA,AHMEDABAD, GUJARAT,PIN-380006
WEST	GUJARAT	MEHSANA	S/1, 2ND FLOOR, SIGMA OASES, NEAR HDFC BANK, MEHSANA,AHMEDABAD HIGHWAY, NEAR RAJKUMAR PETROL PUMP, MEHSANA,GUJARAT,PIN-384001
WEST	GUJARAT	GANDHIDHAM	OFFICE NO - 204, 2ND FLOOR, GOYAL AVENUE, OPP- L I C OFFICE, BANKING CIRCLE ROADPLOT NO - 318, WARD NO - 12-B,KUTCH,GUJARAT,PIN-370201
WEST	GUJARAT	RAJKOT	GROUND FLOOR, (PART-2), YOGI COMMERCIAL COMPLEX,NEAR INDIRA CIRCLE, 150 FEET RING ROAD, RAJKOT,RAJKOT, GUJARAT,PIN-360005
WEST	GUJARAT	SURAT	5TH FLOOR, OFFICE NO 507& 508, INTERNATIONAL COMMERCE CENTRE,BEHIND KADIWALA SCHOOL, NEAR MAJURA GATE, RING ROAD,SURAT,GUJARAT,PIN-395002
WEST	GUJARAT	VADODARA	2ND FLOOR, OFFICE NO-1,2 & 3, PATRIOT COMPLEX, BESIDE INOX, RACE COURSE CIRCLE,VADODARA, GUJARAT,PIN-390007
WEST	MAHARASHTRA	AURANGABAD	1ST FLOOR, EAST SIDE OF H.S. KANDI CENTER,(CTS NO: 1300D & 13001), JALNA ROAD,,AURANGABAD,MAHARASHTRA,PIN-431001
WEST	MAHARASHTRA	MUMBAI ZONE	OFFICE NO. 516 AND 517, 5TH FLOOR, NEELKANTH CORPORATE PARK,PLOT NO. 240, 2401/1-8, KIROL ROAD,VIDYAVIHAR (WEST),MUMBAI,MAHARASHTRA,PIN-400086
WEST	MAHARASHTRA	MUMBAI-GHATKOPAR	KHODAL CHAMBERS, 2ND FLOOR, UNIT 203 & 204 R B MEHTA MARGNR. DHANJI DEVSHI MUNICIPAL SCHOOL, GHATKOPAR (E),MUMBAI,MAHARASHTRA,PIN-400077
WEST	MAHARASHTRA	MUMBAI-MALAD	4TH FLOOR, UNIT NO. 401, RISHIKESH APARTMENT, MALAD (W),,MUMBAI,MAHARASHTRA,PIN-400064
WEST	MAHARASHTRA	MUMBAI-EQUINOX-(HO)	UNIT NO. 1B & 2B, 2ND FLOOR, EQUINOX BUSINESS PARK, TOWER 3, LBS MARG,KURLA (WEST),,MUMBAI,MAHARASHTRA,PIN-400070
WEST	MAHARASHTRA	NAGPUR	2ND FLOOR, AMBAR, 22/B, TILAK NAGAR NAWAB AREA,HOUSE NO 736,,NAGPUR,MAHARASHTRA,PIN-440010
WEST	MAHARASHTRA	NASHIK	1ST FLOOR, OFFICE NO-101-104, BODKE PLAZA COMMERCIAL COMPLEX,NEAR DWARKA BUS STOPNASHIK PUNE ROAD, DWARKA, NASHIK,NASIK,MAHARASHTRA,PIN-422011
WEST	MAHARASHTRA	PUNE	5TH FLOOR, BUILDING AMAR AVINASH CORPORATE CITY, BUND GARDEN ROAD, ABOVE HSBC BANK,,PUNE,MAHARASHTRA,PIN-411001
WEST	MAHARASHTRA	MUMBAI-PANVEL	MUNOTH EMPRESS, 3RD FLR, OFFICE NO: 312, FINAL PLOT NO.189,NEAR ABEDKAR STATUE, OPP PANVEL BUS STAND,RAIGAD,MAHARASHTRA,PIN-410206
WEST	MAHARASHTRA	SOLAPUR	2ND FLOOR, "JAGJIVAN DAS COMPLEX", 940/1A NORTH SADAR BAZAR,SOLAPUR,MAHARASHTRA,PIN-413003
WEST	MAHARASHTRA	MUMBAI-THANE	UNIT 207, 2ND FLOOR, SAI PLAZA COMMERCIAL CO-OP SOCIETY, OPP. CINE WONDER MALL,,THANE,MAHARASHTRA,PIN-400607
WEST	MAHARASHTRA	MUMBAI-VASHI	SHOP NO 16, 1ST FLOOR, MAHAVIR CENTRE,PLOT NO -77, SECTOR- 17,VASHI, NAVI MUMBAI,THANE,MAHARASHTRA,PIN-400703
WEST	MAHARASHTRA	MUMBAI-KALYAN	ROOM NO. 401, 4TH FLOOR, RAMAKRISHNA BHAVAN, SAJANAND CHOWK,AGRA ROAD, KALYAN ROAD, WEST, THANE,THANE,MAHARASHTRA,PIN-421301
WEST	MAHARASHTRA	MUMBAI-MIRA ROAD	6TH FLOOR, UNIT NO-604, SAI ARPAN, B-11,SAI COMPLEX, P G VORA ROAD, OPP: SHANTI VIHAR, MIRA ROAD EAST,THANE,MAHARASHTRA,PIN-401107
WEST	GUJARAT	BHUJ	1ST FLOOR, B-WINGS, KATIRA COMPLEX,RTO RELOCATIONS AREA, MADHAPAR HIGHWAY,,KUTCH,GUJARAT,PIN-370001



SAIBALAJI EDUCATIONAL SOCIETY  
SAIBALAJI INTERNATIONAL INSTITUTE OF MANAGEMENT SCIENCES **SBIIMS**  
SBIIMS PUNE

Affiliated to Savitribai Phule Pune University  
Approved by AICTE, Ministry of HRD, Govt. of India

## **Staff Insurance Policy 2023-2024**

### GROUP MEDICLAIM SCHEDULE

Address of Issuing Office : Policy Issuing Office: Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai - 400 063. Issuing Branch Code: 9201	A Block, Heritage House, Ground floor, 6 Ramabai Ambedkar Road, MAHARASHTRA
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Policyholder Details	
Policy Number: 170132328430000072	Proposal No: P110223100683
Name: M/S SAI BALAJI EDU SOCIETY	Policy Issue Date: 03/11/2023
Correspondence Address & Place of Supply: PROP.M.R. MUNDADA AT S.NO.54/1/A/1 DUTTAWADI NERE, TAL.MUL.DIST.PUNE MAHARASHTRA MULSHI 412206	Email Id: arvind.bhabad@interlinkre.com
Period of Insurance: From 01/11/2023 to mid night on 31/10/2024	Contact No: 9850995879
Tax Invoice No. & Date: P110223100683 & 03/11/2023	Date of proposal: 03/11/2023
GSTIN/UIN of Policyholder:	Policy Branch Office Code: 1701

Details of previous policy (in case of renewal)	
Previous policy No:	Date of expiry:

Co-Insurance Details			
Co-Insurance Company	Company Status	Company Branch and Branch Code	Company Share (%)
RELIANCE GENERAL INSURANCE CO LTD.	Own	Pune,1701	100.00

Risk details	
Total No of Employees Covered	98
Total No of Lives Covered	292
Basis of Sum Insured	Family Floater
Family Covered	As Per Annexure
Total Sum Insured (Rs)	28600000.00
Coverage Details and List of members covered as per Schedule attached.	

Premium Details	Amount (Rs)
Premium (Rs)	416228.82
CGST (@9.00%)	37460.59
SGST (@9.00 %)	37460.59
<b>Total Premium (Rs)</b>	<b>491150.00</b>

Branch GSTIN :27AABCR6747B1ZG;HSN Code :997133;Description Of Services :Accident and Health Insurance Service;  
Consolidated Stamp duty Paid vide Letter of Authorisation "NO.LOA/CSD/78/2023/(Validity Period Dt.01/07/2023 to Dt.01/01/2024)/3029 DT.26 JUN 2023" at General Stamp Office, Mumbai. \*\* Not Applicable for the State of Jammu & Kashmir.

Payment Frequency / Policy Installments Details

Installment Frequency	Due Date	Premium Amount
1	01/11/2023	416228.81
2	30/11/2023	364447.45

Coverage Details			
Cover Name	Sum insured	Co-pay	Special Conditions
Hospitalization			Covered
Pre Hospitalization			30 days
Post Hospitalization			60 days
Ambulance charges			Rs. 1500/- per Hospitalisation subject to submission of bill (for Inward cases only)
Domiciliary hospitalization			Not Applicable
Pre-existing illness cover			Waived for all
Cover for first year excluded diseases			Waived for all
Cover for first 30 days Exclusion			Waived for all
Family Definition			Employee + Spouse + 2 dependent children up to age 25, Sum Insured- 2 lac & 4 lac,
Additional Details on family definition			Mid term inclusion of dependents will be possible only in case of spouse (on account of marriage during the policy term) & children (childbirth during the policy term but after the child has completed 91 days of age) subject to availability of slot under family definition children.
Member Addition and Deletion Process			1)Premium to be charged on Pro Rata Basis for addition/deletion endorsement. Addition-deletion will be done on Pro Rata Basis for employees (for addition of lives DOJ of employee will be considered as effective date and for deletion of lives DOL will be considered as effective date) along with dependants once in a month only, subject to all relevant details being forwarded to insurer before 7th day of succeeding month. Please note no deletion of premium in case of claimed lives. 2)No Refund for deletion-if lives less than minimum required & if insured has claimed during policy.
Installment Premium Clause			Installment clause-Total Premium under the policy is Rs. 9,21,198/- (Inclusive all). 1st Installment: Rs 4,91,150/- (Inclusive all) on Inception date and 2nd Installment: Rs. 4,30,048/- (Inclusive all) due on 30/11/2023, IF THE INSTALLMENT PREMIUM IS NOT RECEIVED IN TIME FURTHER CLAIMS WILL NOT BE PAID

Cover Name	Sum insured	Co-pay	Special Conditions
Room Rent			1% of SI for Normal & 2% of SI for ICU (inclusive of nursing charges & RMO Charges). Proportionate capping applicable. Room rent eligibility with rents including RMO and Nursing charges and other associated charges capped at Limits as defined above for normal and for ICU / ICCU / NICU hospitalisation. In the event of insured person getting admitted in a room/ICU/ICCU NICU where rent is higher than the capped amount or higher category, as mentioned above, the insured person shall bear proportion of the entire hospital Bill/ Medical Expenses in proportion of the [(Room Rent / ICU/ICCU actually incurred Room Rent / ICU/ICCU as per capping / type)] / (Room Rent / ICU/ICCU actually incurred) This shall be applicable to all the Medical Expenses incurred during the stay in Hospital
Day care procedure			As per RGICL Day care list

General Conditions: 1) It shall be a condition precedent to the Company's liability under this policy that all supporting documents relating to the claim must be submitted to the RCARE within thirty (30) days from the date of discharge from the hospital. In case of post hospitalization treatment days, all claim documents should be submitted to the RCARE within seven (7) days after completion of such treatment.  
 2) Ailment/ Conditions not covered - Robotic surgery/treatment done using this technology/Robotically assisted Surgery, Stem Cell Transplantation/bone marrow transplant, Septoplasty, Cochlear Implant or related aids, RFQMR - Rotational Field Quantum Magnetic Resonance Device - Cytotron, C3R, Balloon Sinuplasty, Bariatric surgery, Inj Avastin /Lucentis/Macugen, Ozone Therapy, Enhanced External Counter Pulsation Therapy (EECP), Rejuvenation therapy, Lasik Surgery.  
 3) The policy is applicable only for employer employee relationship.  
 4) Surcharges, service charges, miscellaneous charges and other non treatment related expenses are not payable.  
 5) Rest all other terms & conditions strictly as per Reliance's Group mediclaim policy .

Warranted that the exclusions mentioned below stand deleted:

30 day Exclusion
First Year exclusion
Pre- existing illness

11BRG052	INTERLINK INSURANCE nd REINSURANCE BROKERS PVT LTD	9833272422
Intermediary Code	Intermediary Name	Intermediary Contact No.

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
1	E01	MR.MISHARILAL R MUNDADA	SELF	NA	46 Yr 00 M	M	400000	01.11.2023		
2	E02	MR.VIJAY NIMBALKAR	SELF	NA	54 Yr 00 M	M	400000	01.11.2023		
3	E02	MS.KARUNA V . NIMBALKAR	SPOUSE	NA	46 Yr 00 M	F		01.11.2023		
4	E02	MS.TITIKSHA V. NIMBALKAR	DAUGHTER	NA	12 Yr 00 M	F		01.11.2023		
5	E03	MR.DIGVIJAY TAUNK	SPOUSE	NA	39 Yr 00 M	M		01.11.2023		
6	E03	MR.NAKUL TAUNK	SON	NA	9 Yr 00 M	M		01.11.2023		
7	E03	MR.NAMAN TAUNK	SON	NA	9 Yr 00 M	M		01.11.2023		
8	E03	MS.AKANKSHA TAUNK	SELF	NA	39 Yr 00 M	F	400000	01.11.2023		
9	E04	MR.BANIBRATA DAS	SPOUSE	NA	43 Yr 00 M	M		01.11.2023		
10	E04	MS.SANGEETA RAJPUT	SELF	NA	56 Yr 00 M	F	400000	01.11.2023		
11	E05	MR.AKUL PETHIYA	SON	NA	15 Yr 00 M	M		01.11.2023		
12	E05	MR.AMIT PETHIYA	SPOUSE	NA	47 Yr 00 M	M		01.11.2023		
13	E05	MS.DR. TRIPTI SAHU	SELF	NA	44 Yr 00 M	F	400000	01.11.2023		
14	E07	MR.MANISH JOSHI	SPOUSE	NA	38 Yr 00 M	M		01.11.2023		
15	E07	MS.EKTA JOSHI	SELF	NA	39 Yr 00 M	F	400000	01.11.2023		
16	E07	MS.ISHANA JOSHI	DAUGHTER	NA	8 Yr 00 M	F		01.11.2023		
17	E08	MR.KAPIL DIXIT	SPOUSE	NA	36 Yr 00 M	M		01.11.2023		
18	E08	MR.RUDRANSH DIXIT	SON	NA	6 Yr 00 M	M		01.11.2023		
19	E08	MS.DR. NALINI DIXIT	SELF	NA	44 Yr 00 M	F	400000	01.11.2023		
20	E09	MR.SHEKHAR VERMA	SELF	NA	41 Yr 00 M	M	400000	01.11.2023		
21	E09	MRS.UMA SHEKHAR VERMA	SPOUSE	NA	37 Yr 00 M	F		01.11.2023		
22	E09	MS.NIVA SHEKHAR VERMA	DAUGHTER	NA	7 Yr 00 M	F		01.11.2023		



Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
23	E10	MR.LAXMIDHAR BISWAL	SELF	NA	52 Yr 00 M	M	400000	01.11.2023		
24	E10	MR.SUBHAM BISWAL	SON	NA	13 Yr 00 M	M		01.11.2023		
25	E10	MS.BABITA BISWAL	SPOUSE	NA	47 Yr 00 M	F		01.11.2023		
26	E10	MS.SUBHASHREE L BISWAL	DAUGHTER	NA	18 Yr 00 M	F		01.11.2023		
27	E11	MR.AJIT SANGALE	SELF	NA	50 Yr 00 M	M	400000	01.11.2023		
28	E11	MR.CHINMAY A. SANGALE	SON	NA	15 Yr 00 M	M		01.11.2023		
29	E11	MS.NEHA A. SANGALE	DAUGHTER	NA	20 Yr 00 M	F		01.11.2023		
30	E11	MS.SONMATI A. SANGALE	SPOUSE	NA	41 Yr 00 M	F		01.11.2023		
31	E12	SMT.GEETA CHITNIS	SELF	NA	67 Yr 00 M	F	400000	01.11.2023		
32	E13	MR.DAKSH SONI	SON	NA	11 Yr 00 M	M		01.11.2023		
33	E13	MS.POONAM SONI	SELF	NA	37 Yr 00 M	F	400000	01.11.2023		
34	E14	MR.GIRISH NAIK	SELF	NA	55 Yr 00 M	M	400000	01.11.2023		
35	E14	MS.ANURADHA NAIK	SPOUSE	NA	51 Yr 00 M	F		01.11.2023		
36	E14	MS.ISHA NAIK	DAUGHTER	NA	21 Yr 00 M	F		01.11.2023		
37	E15	MR.DEEPAK WANJALE	SPOUSE	NA	47 Yr 00 M	M		01.11.2023		
38	E15	MR.OMKAR WANJALE	SON	NA	20 Yr 00 M	M		01.11.2023		
39	E15	MS.DIPTI WANJALE	SELF	NA	41 Yr 00 M	F	200000	01.11.2023		
40	E16	MR.MAHENDRA KARANJAWANE	SELF	NA	37 Yr 00 M	M	200000	01.11.2023		
41	E16	MR.MAYANKRAJ M. KARANJAWANE	SON	NA	7 Yr 00 M	M		01.11.2023		
42	E16	MS.YOGITA KARANJAWANE	SPOUSE	NA	33 Yr 00 M	F		01.11.2023		
43	E16	YASHIKA KARANJAWANE	DAUGHTER	NA	1 Yr 00 M	F		01.11.2023		
44	E17	MR.PRANAV S KAMBLE	SON	NA	19 Yr 00 M	M		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
45	E17	MR.SHASHIKANT KAMBLE	SELF	NA	54 Yr 00 M	M	200000	01.11.2023		
46	E17	MS.REKHA S KAMBLE	SPOUSE	NA	51 Yr 00 M	F		01.11.2023		
47	E17	MS.SRUSHTI S KAMBLE	DAUGHTER	NA	21 Yr 00 M	F		01.11.2023		
48	E18	MR.ABHISHEK VINODE	SON	NA	24 Yr 00 M	M		01.11.2023		
49	E18	MR.RAJENDRA VINODE	SPOUSE	NA	51 Yr 00 M	M		01.11.2023		
50	E18	MS.APURVA VINODE	DAUGHTER	NA	18 Yr 00 M	F		01.11.2023		
51	E18	MS.BHARTI VINODE	SELF	NA	46 Yr 00 M	F	200000	01.11.2023		
52	E19	MR.DILIP PATIL	SELF	NA	42 Yr 00 M	M	200000	01.11.2023		
53	E19	MR.VIRAJ PATIL	SON	NA	11 Yr 00 M	M		01.11.2023		
54	E19	MS. PRIYANKA PATIL	SPOUSE	NA	35 Yr 00 M	F		01.11.2023		
55	E20	MR.SAROJIT MARATHE	SON	NA	9 Yr 00 M	M		01.11.2023		
56	E20	MR.TEJAS MARATHE	SON	NA	3 Yr 00 M	M		01.11.2023		
57	E20	MR.YOGESH MARATHE	SPOUSE	NA	35 Yr 00 M	M		01.11.2023		
58	E20	MS.RAJSHREE YOGESH MARATHE	SELF	NA	31 Yr 00 M	F	200000	01.11.2023		
59	E21	MR.DILIP SHAMRAO CHAVAN	SELF	NA	32 Yr 00 M	M	200000	01.11.2023		
60	E21	MR.MITHUN CHAVAN	SON	NA	9 Yr 00 M	M		01.11.2023		
61	E21	MS.ANUSAYA CHAVAN	SPOUSE	NA	30 Yr 00 M	F		01.11.2023		
62	E21	MS.SHREYA CHAVAN	DAUGHTER	NA	8 Yr 00 M	F		01.11.2023		
63	E23	MR.SAGAR MARUTI BHONDAVE	SELF	NA	45 Yr 00 M	M	200000	01.11.2023		
64	E23	MS.BHAGYASHREE BHONDVE	SPOUSE	NA	37 Yr 00 M	F		01.11.2023		
65	E23	MS.DEESHITA BHONDVE	DAUGHTER	NA	8 Yr 00 M	F		01.11.2023		
66	E24	MR.DEVAMSH DATTAN NAIR	SON	NA	20 Yr 00 M	M		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
67	E24	MR.KOCHAYYAT RAMCHANDRAN DATTAN	SELF	NA	51 Yr 00 M	M	200000	01.11.2023		
68	E24	MS.SHEEBA DATTAN NAIR	SPOUSE	NA	47 Yr 00 M	F		01.11.2023		
69	E26	MR.KSHIROD CHAND	SELF	NA	43 Yr 00 M	M	400000	01.11.2023		
70	E26	MR.PRIYANSH CHAND	SON	NA	6 Yr 00 M	M		01.11.2023		
71	E26	MS.PUNYATOYA MISHRA	SPOUSE	NA	35 Yr 00 M	F		01.11.2023		
72	E27	MR.VIKRANT AGARWAL	SPOUSE	NA	45 Yr 00 M	M		01.11.2023		
73	E27	MS.AMAIRA AGARWAL	DAUGHTER	NA	9 Yr 00 M	F		01.11.2023		
74	E27	MS.ANUSHKA AGARWAL	DAUGHTER	NA	15 Yr 00 M	F		01.11.2023		
75	E27	MS.NEHA AGARWAL	SELF	NA	45 Yr 00 M	F	400000	01.11.2023		
76	E28	MR.JITENDRA SWAIN	SELF	NA	46 Yr 00 M	M	200000	01.11.2023		
77	E28	MR.PRIYANSHU JITENDRA SWAIN	SON	NA	5 Yr 00 M	M		01.11.2023		
78	E28	MR.SHLOK JITENDRA SWAIN	SON	NA	14 Yr 00 M	M		01.11.2023		
79	E28	MS.SUBHADARSHANI D PRADHAN	SPOUSE	NA	39 Yr 00 M	F		01.11.2023		
80	E29	MR.RAJIB KUMAR MOHANTY	SELF	NA	35 Yr 00 M	M	200000	01.11.2023		
81	E29	MS.RADHA RANI DEY	SPOUSE	NA	31 Yr 00 M	F		01.11.2023		
82	E29	MS.RITIKA MOHANTY	DAUGHTER	NA	1 Yr 00 M	F		01.11.2023		
83	E31	MR.S.SHRINIVASAN	SELF	NA	76 Yr 00 M	M	400000	01.11.2023		
84	E31	MS.RADHA SHRINIVASAN	SPOUSE	NA	72 Yr 00 M	F		01.11.2023		
85	E32	MR.DHANANJAY SALUNKE	SELF	NA	52 Yr 00 M	M	400000	01.11.2023		
86	E32	MR.NEEL D SALUNKE	SON	NA	22 Yr 00 M	M		01.11.2023		
87	E32	MS.GEETA SALUNKE	SPOUSE	NA	47 Yr 00 M	F		01.11.2023		
88	E32	MS.RAJLAXMI D SALUNKE	DAUGHTER	NA	14 Yr 00 M	F		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
89	E33	MR.VILAS GANGARAM NAVALE	SELF	NA	58 Yr 00 M	M	400000	01.11.2023		
90	E33	MS. VIJAYA NAVALE	SPOUSE	NA	51 Yr 00 M	F		01.11.2023		
91	E34	MR.ARPIT SHIRASE	SON	NA	8 Yr 00 M	M		01.11.2023		
92	E34	MS.DIKSHA SHIRASE	DAUGHTER	NA	18 Yr 00 M	F		01.11.2023		
93	E34	MS.JYOTI SHIRASE	SELF	NA	43 Yr 00 M	F	200000	01.11.2023		
94	E35	MR.NITIN SURVE	SPOUSE	NA	47 Yr 00 M	M		01.11.2023		
95	E35	MR.RITESH NITIN SURVE	SON	NA	19 Yr 00 M	M		01.11.2023		
96	E35	MS.NEHA SURVE	SELF	NA	41 Yr 00 M	F	200000	01.11.2023		
97	E35	MS.TANISHKA NITIN SURVE	DAUGHTER	NA	14 Yr 00 M	F		01.11.2023		
98	E36	MR.NAND KUMAR JADHAV	SELF	NA	39 Yr 00 M	M	200000	01.11.2023		
99	E36	MS.KAVYA JADHAV	DAUGHTER	NA	9 Yr 00 M	F		01.11.2023		
100	E36	MS.RATNAMALA JADHAV	SPOUSE	NA	35 Yr 00 M	F		01.11.2023		
101	E37	MR.ANIL KALE	SELF	NA	37 Yr 00 M	M	200000	01.11.2023		
102	E37	MS.BHAGYASHREE KALE	SPOUSE	NA	32 Yr 00 M	F		01.11.2023		
103	E37	MS.KRASHNALI KALE	DAUGHTER	NA	6 Yr 00 M	F		01.11.2023		
104	E37	MS.SWARA ANIL KALE	DAUGHTER	NA	2 Yr 00 M	F		01.11.2023		
105	E38	MR.POPAT NAMDEV JADHAV	SELF	NA	36 Yr 00 M	M	200000	01.11.2023		
106	E38	MR.SHRI POPAT JADHAV	SON	NA	4 Yr 00 M	M		01.11.2023		
107	E38	MS.DIVYA POPAT JADHAV	DAUGHTER	NA	9 Yr 00 M	F		01.11.2023		
108	E38	MS.NILAM POPAT JADHAV	SPOUSE	NA	31 Yr 00 M	F		01.11.2023		
109	E39	MR.RAJU KERBA RATHOD	SELF	NA	50 Yr 00 M	M	200000	01.11.2023		
110	E39	MS.RESHMA RAJU RATHOD	DAUGHTER	NA	23 Yr 00 M	F		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
111	E39	MS.SUMAN RAJU RATHOD	SPOUSE	NA	46 Yr 00 M	F		01.11.2023		
112	E40	MR.GANESH NIVRUTTI GAIKWAD	SELF	NA	33 Yr 00 M	M	200000	01.11.2023		
113	E40	MS.DURVA GANESH GAIKWAD	DAUGHTER	NA	2 Yr 00 M	F		01.11.2023		
114	E40	MS.SHWETA GANESH GAIKWAD	SPOUSE	NA	25 Yr 00 M	F		01.11.2023		
115	E42	MR.PRADEEP JADHAV	SELF	NA	42 Yr 00 M	M	200000	01.11.2023		
116	E42	MR.PRANAY PRADEEP JADHAV	SON	NA	11 Yr 00 M	M		01.11.2023		
117	E42	MS.PRITIKA PRADEEP JADHAV	DAUGHTER	NA	4 Yr 00 M	F		01.11.2023		
118	E42	MS.PURVA PRADEEP JADHAV	SPOUSE	NA	33 Yr 00 M	F		01.11.2023		
119	E43	MR.ISRAR AHMED	SELF	NA	31 Yr 00 M	M	200000	01.11.2023		
120	E43	MS.PRIYANKA WANKHEDE	SPOUSE	NA	32 Yr 00 M	F		01.11.2023		
121	E44	MR.DNYANESHWAR RAMDAS MISAL	SELF	NA	31 Yr 00 M	M	200000	01.11.2023		
122	E44	MS.PRATIKSHA MISAL	DAUGHTER	NA	6 Yr 00 M	F		01.11.2023		
123	E44	MS.VAISHALI MISAL	SPOUSE	NA	27 Yr 00 M	F		01.11.2023		
124	E45	MR.SHIVRAJ SHANKARRAO MAGRE	SELF	NA	40 Yr 00 M	M	200000	01.11.2023		
125	E45	MS.TANISHKA SHIVRAJ MAGRE	DAUGHTER	NA	8 Yr 00 M	F		01.11.2023		
126	E45	MS.VIDHYA SHIVRAJ MAGRE	SPOUSE	NA	35 Yr 00 M	F		01.11.2023		
127	E46	MS.ALEKHYA MUNDADA	DAUGHTER	NA	15 Yr 00 M	F		01.11.2023		
128	E46	MS.NIRUPAMA MUNDADA	SELF	NA	45 Yr 00 M	F	400000	01.11.2023		
129	E46	MS.PRITHA MUNDADA	DAUGHTER	NA	22 Yr 00 M	F		01.11.2023		
130	E47	MR.BIJIN JIBY	SON	NA	21 Yr 00 M	M		01.11.2023		
131	E47	MR.JIBY KURIYAN	SPOUSE	NA	53 Yr 00 M	M		01.11.2023		
132	E47	MS.BINITA JIBY	DAUGHTER	NA	23 Yr 00 M	F		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
133	E47	MS.DR.BEENA JIBY	SELF	NA	48 Yr 00 M	F	400000	01.11.2023		
134	E48	MR.GIRISH CHAVAN	SELF	NA	37 Yr 00 M	M	400000	01.11.2023		
135	E48	MR.SHOURAYA GIRISH CHAVAN	SON	NA	8 Yr 00 M	M		01.11.2023		
136	E48	MS.POOJA KAREKAR	SPOUSE	NA	36 Yr 00 M	F		01.11.2023		
137	E49	MR.DASHRATH SURYAVANSHI	SPOUSE	NA	41 Yr 00 M	M		01.11.2023		
138	E49	MS.KIYRA SURYAVANSHI	DAUGHTER	NA	6 Yr 00 M	F		01.11.2023		
139	E49	MS.SONALI KSHIRSAGAR	SELF	NA	38 Yr 00 M	F	400000	01.11.2023		
140	E49	MS.STAVYA SURYAVANSHI	DAUGHTER	NA	3 Yr 00 M	F		01.11.2023		
141	E50	MR.MAHESH JADHAV	SELF	NA	39 Yr 00 M	M	200000	01.11.2023		
142	E50	MR.SHRIRAJ MAHESH JADHAV	SON	NA	9 Yr 00 M	M		01.11.2023		
143	E50	MS.GAURI MAHESH JADHAV	SPOUSE	NA	35 Yr 00 M	F		01.11.2023		
144	E50	MS.SIDDHI MAHESH JADHAV	DAUGHTER	NA	12 Yr 00 M	F		01.11.2023		
145	E51	MR.GAJANAN SHERKHANE	SELF	NA	50 Yr 00 M	M	200000	01.11.2023		
146	E51	MR.PRATHMESH G SHERKHANE	SON	NA	18 Yr 00 M	M		01.11.2023		
147	E51	MS.MANISHA G SHERKHANE	SPOUSE	NA	37 Yr 00 M	F		01.11.2023		
148	E51	MS.SAKSHI G SHERKHANE	DAUGHTER	NA	16 Yr 00 M	F		01.11.2023		
149	E52	MR.DADASAHEB TELANGE	SON	NA	2 Yr 00 M	M		01.11.2023		
150	E52	MR.TUKARAM RAMESH TELANGE	SELF	NA	32 Yr 00 M	M	200000	01.11.2023		
151	E52	MS.RADHA BHAGWAN JAPTAP	SPOUSE	NA	27 Yr 00 M	F		01.11.2023		
152	E53	MR.SACHIN EKNATH SURVE	SELF	NA	39 Yr 00 M	M	200000	01.11.2023		
153	E53	MS.ANUJA SACHIN SURVE	SPOUSE	NA	33 Yr 00 M	F		01.11.2023		
154	E53	MS.SAMRUDDHI SACHIN SURVE	DAUGHTER	NA	13 Yr 00 M	F		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
155	E53	MS.SWARA SACHIN SURVE	DAUGHTER	NA	11 Yr 00 M	F		01.11.2023		
156	E54	MR.KIRAN BALBHIM RATHOD	SELF	NA	34 Yr 00 M	M	200000	01.11.2023		
157	E54	MS.KANCHAN KIRAN RATHOD	DAUGHTER	NA	10 Yr 00 M	F		01.11.2023		
158	E54	MS.KINCHAN KIRAN RATHOD	DAUGHTER	NA	8 Yr 00 M	F		01.11.2023		
159	E54	MS.LAXMI KIRAN RATHOD	SPOUSE	NA	31 Yr 00 M	F		01.11.2023		
160	E56	MR.SARTHAK VISHAL DHUMAL	SON	NA	11 Yr 00 M	M		01.11.2023		
161	E56	MR.VISHAL TULSDIDAS DHUMAL	SELF	NA	38 Yr 00 M	M	200000	01.11.2023		
162	E56	MS.PALLAVI VISHAL DHUMAL	SPOUSE	NA	38 Yr 00 M	F		01.11.2023		
163	E57	MR.RAJARAM JADHAV	SELF	NA	50 Yr 00 M	M	200000	01.11.2023		
164	E57	MS.SHAKUNTALA JADHAV	SPOUSE	NA	46 Yr 00 M	F		01.11.2023		
165	E58	MR.RAHUL RAJARAM JADHAV	SELF	NA	28 Yr 00 M	M	200000	01.11.2023		
166	E58	MS.NIKITA RAHUL JADHAV	SPOUSE	NA	21 Yr 00 M	F		01.11.2023		
167	E59	MR.TUSHAR DNYANESHWAR GAIKWAD	SELF	NA	34 Yr 00 M	M	200000	01.11.2023		
168	E59	MS.SHARAYU TUSHAR GAIKWAD	DAUGHTER	NA	8 Yr 00 M	F		01.11.2023		
169	E59	MS.SONIKA TUSHAR GAIKWAD	SPOUSE	NA	31 Yr 00 M	F		01.11.2023		
170	E60	MR.GANESH BANSODE	SPOUSE	NA	35 Yr 00 M	M		01.11.2023		
171	E60	MR.UTTKARSH GANESH BANSODE	SON	NA	11 Yr 00 M	M		01.11.2023		
172	E60	MS.MANASVI GANESH BANSODE	DAUGHTER	NA	7 Yr 00 M	F		01.11.2023		
173	E60	MS.SHRADDHA GANESH BANSODE	SELF	NA	33 Yr 00 M	F	400000	01.11.2023		
174	E61	MR.PRASHANT N AVCHARE	SELF	NA	47 Yr 00 M	M	200000	01.11.2023		
175	E61	MR.RITHUL P AVCHARE	SON	NA	12 Yr 00 M	M		01.11.2023		
176	E61	MS.VEENA P AVCHARE	SPOUSE	NA	45 Yr 00 M	F		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
177	E62	MR.AARYAN AMBAR PAWAR	SON	NA	8 Yr 00 M	M		01.11.2023		
178	E62	MR.AMBAR ASARAM PAWAR	SELF	NA	34 Yr 00 M	M	200000	01.11.2023		
179	E62	MS.ARDHAYA AMBAR PAWAR	DAUGHTER	NA	5 Yr 00 M	F		01.11.2023		
180	E62	MS.SHITAL AMBAR PAWAR	SPOUSE	NA	27 Yr 00 M	F		01.11.2023		
181	E63	MR.DEEPAK DIXIT	SELF	NA	42 Yr 00 M	M	400000	01.11.2023		
182	E63	MR.JAYESH DEEPAK DIXIT	SON	NA	8 Yr 00 M	M		01.11.2023		
183	E63	MS.MADHAVI DEEPAK DIXIT	SPOUSE	NA	40 Yr 00 M	F		01.11.2023		
184	E63	MS.YASHADA DEEPAK DIXIT	DAUGHTER	NA	11 Yr 00 M	F		01.11.2023		
185	E64	MR.ANIL VERMA	SELF	NA	55 Yr 00 M	M	400000	01.11.2023		
186	E64	MS.SABITHA ANIL VERMA	SPOUSE	NA	49 Yr 00 M	F		01.11.2023		
187	E65	MR.ABHAY MISHRA	SELF	NA	44 Yr 00 M	M	400000	01.11.2023		
188	E65	MS.SHEETAL ABHAY MISHRA	SPOUSE	NA	44 Yr 00 M	F		01.11.2023		
189	E66	MR.KAPIL KAPDIYA	SELF	NA	37 Yr 00 M	M	400000	01.11.2023		
190	E66	MR.MAYUR KAPIL KAPDIYA	SON	NA	7 Yr 00 M	M		01.11.2023		
191	E66	MS.SWATI KAPIL KAPDIYA	SPOUSE	NA	36 Yr 00 M	F		01.11.2023		
192	E67	PUSHPA RAMPRASAD ZAVAR	SELF	NA	71 Yr 00 M	F	400000	01.11.2023		
193	E68	MR.PRAVEEN RAMPRASAD ZAVAR	SELF	NA	52 Yr 00 M	M	400000	01.11.2023		
194	E68	MR.SAHIL PRAVEEN ZAVAR	SON	NA	20 Yr 00 M	M		01.11.2023		
195	E68	MRS.JAYSHREE PRAVEEN ZAVAR	SPOUSE	NA	50 Yr 00 M	F		01.11.2023		
196	E68	MS.HARSHALI PRAVEEN ZAVAR	DAUGHTER	NA	24 Yr 00 M	F		01.11.2023		
197	E69	MR.TEJAS DEEPAK ZAVAR	SON	NA	24 Yr 00 M	M		01.11.2023		
198	E69	MS.VAISHNAVI DEEPAK ZAVAR	DAUGHTER	NA	16 Yr 00 M	F		01.11.2023		



Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
199	E69	SMT.ARCHANA DEEPAK ZAVAR	SELF	NA	50 Yr 00 M	F	400000	01.11.2023		
200	E70	DR.GITESH KOTHARI	SELF	NA	47 Yr 00 M	M	400000	01.11.2023		
201	E70	MRS.RAKHI KOTHARI	SPOUSE	NA	44 Yr 00 M	F		01.11.2023		
202	E70	MS.DIVYA KOTHARI	DAUGHTER	NA	21 Yr 00 M	F		01.11.2023		
203	E70	MS.JIYA KOTHARI	DAUGHTER	NA	18 Yr 00 M	F		01.11.2023		
204	E71	MR.SUNIL KUMAR	SELF	NA	43 Yr 00 M	M	200000	01.11.2023		
205	E71	MR.VEDANT S KUMAR	SON	NA	3 Yr 00 M	M		01.11.2023		
206	E71	MRS.SOUMYA C	SPOUSE	NA	36 Yr 00 M	F		01.11.2023		
207	E71	MS.VEDA S KUMAR	DAUGHTER	NA	10 Yr 00 M	F		01.11.2023		
208	E73	MR.SAMBHAJI N. KHANDVE	SELF	NA	58 Yr 00 M	M	200000	01.11.2023		
209	E73	MRS.SHARDA S. KHANDVE	SPOUSE	NA	55 Yr 00 M	F		01.11.2023		
210	E74	MS.PRITI DEWANGAN	SELF	NA	27 Yr 00 M	F	200000	01.11.2023		
211	E75	MR.LAXMAN KUMAR TRIPATHY	SELF	NA	60 Yr 00 M	M	400000	01.11.2023		
212	E76	MR.ADVIK UPADHYAY	SON	NA	5 Yr 00 M	M		01.11.2023		
213	E76	MR.SUNNY UPADHYAY	SPOUSE	NA	35 Yr 00 M	M		01.11.2023		
214	E76	MRS.MEGHA JOSHI	SELF	NA	36 Yr 00 M	F	400000	01.11.2023		
215	E77	MR.ROOP KISHORE SINGHAL	SELF	NA	54 Yr 00 M	M	400000	01.11.2023		
216	E77	MRS.ANJU AGARWAL	SPOUSE	NA	49 Yr 00 M	F		01.11.2023		
217	E79	MR.KIRAN WAGHOLE	SELF	NA	30 Yr 00 M	M	200000	01.11.2023		
218	E79	MRS.KAJAL KIRAN WAGHOLE	SPOUSE	NA	27 Yr 00 M	F		01.11.2023		
219	E82	MR.UDAY VASANTRAO NIKAM	SPOUSE	NA	49 Yr 00 M	M		01.11.2023		
220	E82	MRS.ROHINI UDAY NIKAM	SELF	NA	46 Yr 00 M	F	400000	01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
221	E82	MS.NANDINI UDAY NIKAM	DAUGHTER	NA	20 Yr 00 M	F		01.11.2023		
222	E82	MS.NETRA UDAY NIKAM	DAUGHTER	NA	16 Yr 00 M	F		01.11.2023		
223	E84	MR.ARNAV NILESH RATHOD	SON	NA	11 Yr 00 M	M		01.11.2023		
224	E84	MR.NILESH RATHOD	SELF	NA	36 Yr 00 M	M	200000	01.11.2023		
225	E84	MR.PRANAV NILESH RATHOD	SON	NA	9 Yr 00 M	M		01.11.2023		
226	E84	MRS.RENUKA NILESH RATHOD	SPOUSE	NA	32 Yr 00 M	F		01.11.2023		
227	E86	MR.SATISH DASHRATH ADKAR	SELF	NA	30 Yr 00 M	M	200000	01.11.2023		
228	E86	MR.SHAHURAJ SATISH ADKAR	SON	NA	3 Yr 00 M	M		01.11.2023		
229	E86	MR.SHIVAAY SATISH ADKAR	SON	NA	6 Yr 00 M	M		01.11.2023		
230	E86	MRS.ROSHNI SATISH ADKAR	SPOUSE	NA	28 Yr 00 M	F		01.11.2023		
231	E87	MR.LAVKUSH SINGH	SELF	NA	46 Yr 00 M	M	400000	01.11.2023		
232	E87	MRS.PRIYANKA SINGH	SPOUSE	NA	40 Yr 00 M	F		01.11.2023		
233	E87	MS.DHRUVIKA SINGH	DAUGHTER	NA	2 Yr 00 M	F		01.11.2023		
234	E87	MS.SANSKRITI SINGH	DAUGHTER	NA	6 Yr 00 M	F		01.11.2023		
235	E88	MS.ASHLESHA DIGHE	DAUGHTER	NA	22 Yr 00 M	F		01.11.2023		
236	E88	SMT.RAJASHREE DIGHE	SELF	NA	45 Yr 00 M	F	400000	01.11.2023		
237	E89	KARISHMA MESHAM	SELF	NA	30 Yr 00 M	F	200000	01.11.2023		
238	E90	MR. SARANG DATTATRAYA PANDIT	SELF	NA	39 Yr 00 M	M	200000	01.11.2023		
239	E90	MRS.RUPALI SARANG PANDIT	SPOUSE	NA	36 Yr 00 M	F		01.11.2023		
240	E90	SWARUP SARANG PANDIT	SON	NA	10 Yr 00 M	M		01.11.2023		
241	E91	MR.PRITHVI SOPAN NALAWADE	SON	NA	22 Yr 00 M	M		01.11.2023		
242	E91	MR.SOPAN NALAWADE	SELF	NA	49 Yr 00 M	M	200000	01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
243	E91	MR.YASHRAJ SOPAN NALAWADE	SON	NA	20 Yr 00 M	M		01.11.2023		
244	E91	MRS.VANDANA NALAWADE	SPOUSE	NA	42 Yr 00 M	F		01.11.2023		
245	E92	MR.LALATENDU SWAIN	SELF	NA	43 Yr 00 M	M	200000	01.11.2023		
246	E92	MRS.SASWATI SHUBADARSHINI SWAIN	SPOUSE	NA	39 Yr 00 M	F		01.11.2023		
247	E92	SAIRA SWAIN	DAUGHTER	NA	6 Yr 00 M	F		01.11.2023		
248	E93	MS.VANSHIKA MALVIYA	SELF	NA	26 Yr 00 M	F	400000	01.11.2023		
249	E94	MR.RISHIKAYSH MAROTRAO KAAKANDIKAR	SELF	NA	37 Yr 00 M	M	400000	01.11.2023		
250	E94	MRS.SNEHA RISHIKAYSH KAAKANDIKAR	SPOUSE	NA	37 Yr 00 M	F		01.11.2023		
251	E94	SHREYAA RISHIKAYSH KAAKANDIKAR	DAUGHTER	NA	1 Yr 00 M	F		01.11.2023		
252	E94	SIDDHI RISHIKAYSH KAAKANDIKAR	DAUGHTER	NA	12 Yr 00 M	F		01.11.2023		
253	E95	MR.DATTATRAY UTTAM BAGAL	SELF	NA	40 Yr 00 M	M	200000	01.11.2023		
254	E95	MRS.RUPALI DATTATRAY BAGAL	SPOUSE	NA	35 Yr 00 M	F		01.11.2023		
255	E95	SHRAVANI DATTATRAY BAGAL	DAUGHTER	NA	7 Yr 00 M	F		01.11.2023		
256	E95	SHREYA DATTATRAY BAGAL	DAUGHTER	NA	13 Yr 00 M	F		01.11.2023		
257	E96	MR.MANISH SHASHIKANT AMBIKAR	SPOUSE	NA	32 Yr 00 M	M		01.11.2023		
258	E96	MRS.YASHSWINI VARDE	SELF	NA	31 Yr 00 M	F	400000	01.11.2023		
259	E97	MR.GANESH RAM YEWALE	SELF	NA	35 Yr 00 M	M	200000	01.11.2023		
260	E97	MRS.RUPALI GANESH YEWALE	SPOUSE	NA	26 Yr 00 M	F		01.11.2023		
261	E97	NEHA GANESH YEWALE	DAUGHTER	NA	5 Yr 00 M	F		01.11.2023		
262	E98	MR.SAMRAT RAY	SELF	NA	43 Yr 00 M	M	400000	01.11.2023		
263	E99	MR.ANIL WAMAN DEOSKAR	SPOUSE	NA	61 Yr 00 M	M		01.11.2023		
264	E99	MRS. ARUNA DEOSKAR	SELF	NA	55 Yr 00 M	F	400000	01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
265	E100	MR.CHETAN POMU JADHAV	SELF	NA	33 Yr 00 M	M	200000	01.11.2023		
266	E100	MRS.SONABAI CHETAN JADHAV	SPOUSE	NA	26 Yr 00 M	F		01.11.2023		
267	E100	SOHAM CHETAN JADHAV	SON	NA	10 Yr 00 M	M		01.11.2023		
268	E100	SUSHANT CHETAN JADHAV	SON	NA	9 Yr 00 M	M		01.11.2023		
269	E101	MITHUN SADASHIV SHELKE	SELF	NA	33 Yr 00 M	M	200000	01.11.2023		
270	E101	MRS.NUTAN MITHUN SHELKE	SPOUSE	NA	26 Yr 00 M	F		01.11.2023		
271	E102	MR.KAPIL JAGWANI	SPOUSE	NA	35 Yr 00 M	M		01.11.2023		
272	E102	MRS.PRIYANKA JAGWANI	SELF	NA	34 Yr 00 M	F	200000	01.11.2023		
273	E102	VIHAAN JAGWANI	SON	NA	5 Yr 00 M	M		01.11.2023		
274	E103	MR.AJIT BHAUSHETH ANWAT	SELF	NA	33 Yr 00 M	M	200000	01.11.2023		
275	E103	MRS.AKSHADA BALASAHEB KAHANDAL	SPOUSE	NA	26 Yr 00 M	F		01.11.2023		
276	E104	MR.VIJAY VASANT MARATHE	SELF	NA	32 Yr 00 M	M	200000	01.11.2023		
277	E104	MRS.SNEHAL VIJAY MARATHE	SPOUSE	NA	29 Yr 00 M	F		01.11.2023		
278	E105	ADITYA SANTOSH DHADPHALE	SON	NA	14 Yr 00 M	M		01.11.2023		
279	E105	MR.SANTOSH GAJANAN DHADPHALE	SELF	NA	46 Yr 00 M	M	200000	01.11.2023		
280	E105	MRS.PRAJAKTA SANTOSH DHADPHALE	SPOUSE	NA	44 Yr 00 M	F		01.11.2023		
281	E105	SHRUSHTI GAJANAN DHADPHALE	DAUGHTER	NA	18 Yr 00 M	F		01.11.2023		
282	E106	MS.APARNA	SELF	NA	31 Yr 00 M	F	400000	01.11.2023		
283	E107	MR.PRASHANT KUSHWAHA	SELF	NA	26 Yr 00 M	M	200000	01.11.2023		
284	E108	GAURANG UMESH KALAN	SON	NA	21 Yr 00 M	M		01.11.2023		
285	E108	MRS.SHILPA UMESH PATHAK	SELF	NA	48 Yr 00 M	F	200000	01.11.2023		
286	E109	GARVIT VASHISHT	SON	NA	3 Yr 00 M	M		01.11.2023		

Schedule of Members										
Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	Gender	Sum Insured	Date of Joining	Location	Remarks
287	E109	MR.GOURAV KUMAR	SPOUSE	NA	34 Yr 00 M	M		01.11.2023		
288	E109	MRS.SUNITA SHUKLA	SELF	NA	42 Yr 00 M	F	400000	01.11.2023		
289	E110	KARTIK ARORA	SON	NA	11 Yr 00 M	M		01.11.2023		
290	E110	MRS.LOKESH ARORA	SELF	NA	41 Yr 00 M	F	400000	01.11.2023		
291	E110	RAKSHITA ARORA	DAUGHTER	NA	16 Yr 00 M	F		01.11.2023		
292	E110	SUMIT ARORA	SPOUSE	NA	45 Yr 00 M	M		01.11.2023		

Notice of communication to be given in respect of claim to :	
Name:	Reliance HCMT
Address:	Reliance General Insurance Company .Ltd. HCMT HUB 1-89/3/B/40 to 42/ks/301 3rd floor, Krishe block, Krishe Sapphire Madhapur, Hyderabad Pincode: 500081
City:	Hyderabad
Website Address:	
Customer care No	+91 22 4890 3009
Email id:	rcarehealth@rcap.co.in

**Note :**

- In case of renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change
- For detailed terms, conditions and exclusions please refer the policy wordings.
- In the event of non-realization of premium, this policy document automatically stands cancelled from inception, irrespective of whether a separate communication is sent or not
- In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Application No. as mentioned in the policy.
- In the event of incorrect representation of this declaration, the liability shall be upon the Policyholder
- Only the benefits which are mentioned in this Policy Schedule shall be available under the Policy.
- This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017
- In case of any assistance with claims, please contact us on +91 22 4890 3009 (Paid) or email us at rgicl.services@relianceada.com
- The Policy Wording with detailed terms, conditions and exclusions along with other documents are available on our website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in).
- (Policy wordings link : <https://www.reliancegeneral.co.in/Insurance/About-Us/Downloads.aspx>)

**Grievance Clause:** For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 02248903009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website [www.irda.gov.in](http://www.irda.gov.in) or on company website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in) or on [www.gbic.co.in](http://www.gbic.co.in). The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located. Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in

For Reliance General Insurance Co. Ltd.



Authorised Signatory

## TRRN Details



कर्मचारी भविष्य निधि संगठन  
Employees' Provident Fund Organization

भविष्य निधि भवन, १४, भीकाजी कामा प्लेस, नई दिल्ली - ११००६६  
Bhavishya Nidhi Bhawan, 14, Bhikaji Cama Place, New Delhi - 110066

### TRRN Details

TRRN No :	3152202026334
Challan Status :	Payment Confirmed
Challan Generated On :	15-FEB-2022 13:02:47
Establishment ID :	PUPUN0302399000
Establishment Name :	SAI BALAJI EDUCATION
Challan Type :	Monthly Contribution Challan
Total Members :	115
Wage Month :	JAN-22
Total Amount (Rs) :	2,92,451
Account-1 Amount (Rs) :	1,85,126
Account-2 Amount (Rs) :	5,962
Account-10 Amount (Rs) :	95,626
Account-21 Amount (Rs) :	5,737
Account-22 Amount (Rs) :	0
Payment Confirmation Bank :	State Bank of India
CRN :	002150222893589
Presentation Date :	15-FEB-2022 00:00:00
Realization Date :	15-FEB-2022 00:00:00
Date of Credit :	15-FEB-2022 00:00:00
Total PMRPY Benefit :	0



# Employee's Provident Fund



## EMPLOYEE'S PROVIDENT FUND ELECTRONIC CHALLAN CUM RETURN (ECR)

Name of Establishment	SAI BALAJI EDUCATION		
Establishment Id	PUPUN0302399000	LIN	1237591262
Wage Month	JAN-2022	Return Month	FEB-2022
Contribution Rate (%)	12	ECR Type	ECR
Salary Disbursement Date	15-FEB-2022	Uploaded Date Time	15-FEB-2022 13:02
Exemption Status	Unexempted	TRRN Number	
Remarks	JANUARY 2022	ECR Id	69388088
Total Members	115	Aadhaar Not Seeded Member	4
<b>Contribution and Remittance Details (In Rupees) :</b>			
Total EPF Contribution Remitted	1,43,076	Total EPS Contribution Remitted	95,626
Total EPF-EPS Contribution Remitted	42,050	Total Refund Advance	0
<b>PMRPY Upfront Benefit Details (In Rupees) :</b>			
Total PMRPY Upfront EPF Amount	0	Total PMRPY Upfront EPS Amount	0
PMRPY benefit remarks	NA		
<b>ABRY Upfront Benefit Details (In Rupees) :</b>			
Total ABRY benefit Amount	Employee EPF Share	Employer EPS Share	Employer EPF Share
	0	0	0
ABRY benefit remarks	Establishment is not eligible for ABRY benefit as eligible employee count [0] is less than required employee count of five from base month.		



Member Details :-

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
1	100871177839	Prof.Abhay Mishra	ABHAYKUMAR BHAUJI MISHRA	80,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
2	101590341754	Ms.Aishwarya Hamand	AISHWARYA SUBHASH HAMAND	24,508	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
3	100871218846	Prof.Akansha Taunk	AKANKSHA TAUNK	96,142	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
4	101620374567	Prof. Amar Narkhede	AMAR PRABHAKAR NARKHEDE	72,800	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
5	100079389918	Mr.Ambar Pawar	AMBAR ASARAM PAWAR	17,755	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
6	100871293336	Prof.Anil Verma	ANIL VARMA	80,723	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
7	101631610686	Prof. Anuja Paralkar	ANUJA RAJESH PARALKAR	47,555	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
8	101781989901	Smt. Archana Zawar	ARCHANA DEEPAK ZAWAR	28,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
9	100149074920	Dr. Ashutosh Gadekar	ASHUTOSH BHAGAWAT GADEKAR	1,06,400	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
10	101447049616	Baburao Sawale	BABURAO GOPAL SAWALE	15,557	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
11	100111496649	Mrs. Bharati Vinode	BHARATI RAJENDRA VINODE	47,566	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
12	101448609147	Brijesh Singh	BRIJESH SINGH	13,888	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
13	100823893388	Prof. Deepak Dixit	DEEPAK SUBHASH DIXIT	44,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
14	100994421793	Dr.Dhananjay Bagul	DHANANJAY BHASKARAO BAGUL	1,41,800	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
15	100932709032	Prof. Dhananjay Salunke	DHANANJAY KALYANRAO SALUNKE	71,962	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
16	100932709701	Ms.Dhanashri Gaurkar	DHANASHRI RAJU GAURKAR	25,963	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
17	101412577278	Dilip Wede	DILIP BHARAT WEDE	11,253	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
18	100847396119	Mr.Dilip Chavan	DILIP CHAVAN	25,285	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
19	100932725814	Mr.Dilip Patil	DILIP SAMBHAJI PATIL	38,163	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
20	100140349266	Ms. Deepti Wanjale	DIPTI DEEPAK WANJALE	54,937	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
21	101454906443	Mr. Dnyaneshwar Misal	DNYANESHWAR RAMDAS MISAL	17,888	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
22	100876943322	Dr. Nalini Dixit	DR. NALINI DIXIT	55,224	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
23	100873020376	Prof. Ekta Joshi	EKTA JOSHI	1,21,919	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
24	100881438358	Mr. Sherkhane Gajanan Mahadeo	GAJANAN MAHADEO SHERKHANE	40,492	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
25	100150166224	Mr.Ganesh Gaikwad	GANESH NIVRUTTI GAIKWAD	19,965	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
26	101636261589	Prof. Girish Naik	GIRISH RAMDAS NAIK	99,840	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
27	100153617403	Prof.Girish Chavan	GIRISH SHARADRAO CHAVAN	75,359	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
28	101448161225	Harshvardhan Ovhal	HARSHVAAR DHAN DEVRAM OVHAL	9,765	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
29	101781989929	Ms.Hemali Shah	HEMALI DEEPAK SHAH	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
30	101448014761	Hira Khanekar	HIRABAI SURESH KHANEKAR	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
31	100640699784	Prof.Israr Ahmed	ISRAR AHMED	55,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
32	100267122526	Mr. Popat Jadhav	JADHAV POPAT NAMDEV	40,733	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
33	100933647878	Mr.Jitendra Swain	JITENDRA KUMAR SWAIN	38,635	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
34	100083838538	Mr. Anil Kale	KALE ANIL PRABHAKAR	22,403	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
35	100189533957	Prof.Kapil Kapdiya	KAPIL HARISHKUMAR KAPDIYA	22,033	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
36	101668163678	Ms.Karishma Meshram	KARISHMA GIRIDHAR MESHRAM	23,760	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
37	100934146036	Mr.Kiran Balbhim Rathod	KIRAN BALBHIM RATHOD	24,158	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
38	101552033786	Mr. K. R. Dattan Nair	KOCHAYYAT RAMCHANDRAN DATTAN	30,800	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
39	100874999419	Prof. Kshirod Chand	KSHIROD DHARMU CHAND	54,171	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
40	100934302535	Mr.Lalatendu Swain	LALATENDU SWAIN	45,920	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
41	101364832406	Laxmi Bai Dashrth Gejge	LAXMIBAI DASHRTH GEJGE	12,500	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
42	100875212329	Prof. Laxmidhar Biswal	LAXMIDHAR BISWAL	54,280	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
43	101509046148	Dr. Lokesh Arora	LOKESH BHASIN	80,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
44	100213835988	Mr. Mahendra Karanjawane	MAHENDRA MAHADEV KARANJAWANE	50,850	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
45	100214558520	Mr.Mahesh Jadhav	MAHESH BHAU JADHAV	40,098	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
46	101475136519	Malhari Shedage	MALHARI BAJIRAV SHEDGE	10,614	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
47	101659241443	Manisha Jadhav	MANISHA PRASHANT JADHAV	10,137	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
48	100224437882	Dr. Mayanka Sharma	MAYANKA SHARMA	58,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
49	101362820294	Prof. Mayuree Tawade	MAYUREE DEEPAK TAWADE	33,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
50	100876327999	Prof. M. R. Mundada	MISHARILAL RAJARAM MUNDADA	2,36,808	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
51	101448609238	Namdev Farkande	NAMDEV SAMRATH FARKANDE	11,253	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
52	100249354245	Mr. Nandakumar Jadhav	NANDAKUMAR TUKARAM JADHAV	48,104	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
53	101049321081	Prof. Neha Agarwal	NEHA AGARWAL	70,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
54	100254362558	Mrs. Neha Surve	NEHA NITIN SURVE	57,068	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
55	101781989891	Ms.Neha Tandon	NEHA TANEJA TANDON	18,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
56	100935580159	Mrs. Nirupama Mundada	NIRUPAMA MISHARILAL MUNDADA	2,09,088	60,000	15,000	15,000	7,200	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
57	100257049232	Prof. Nishant Ranjan	NISHANT RANJAN	1,09,268	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
58	100877014117	Dr. Nitin Ranjan	NITIN RANJAN	79,268	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
59	101590315068	Mr.Parshuram Jadhav	PARSHURAM DILIP JADHAV	8,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
60	101447986440	Ms.Vrushali Pawar	PAWAR VRUSHALI GAJANAN	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
61	100271941647	Mr. Pintu Rode	PINTU BABAN RODE	18,989	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
62	100936205951	Ms. Pooja Karekar	POOJA PRAKASH KAREKAR	62,567	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
63	100267777247	Mr. Pradeep Jadhav	PRADEEP MANIK JADHAV	19,667	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
64	100277984248	Mr. Prashant Avchare	PRASHANT NAMDEV AVCHARE	48,667	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
65	101781989917	Ms.Priti Dewangan	PRITI DEWANGAN	40,297	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
66	101782096180	Mrs.Priyanka Biswas	PRIYANKA BISWAS	13,750	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
67	101237182352	Dr.Priyanka Rotey	PRIYANKA PRAMOD ROTHEY	43,120	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
68	101448014837	Pushpa Kadam	PUSHPA SUGRIV KADAM	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
69	100937068913	Mr.Rahul R. Jadhav	RAHUL RAJARAM JADHAV	11,690	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
70	101237182347	Mr.Rajaram Jadhav	RAJARAM YASHWANT JADHAV	23,134	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
71	101454906458	Mrs.Rajshree Marathe	RAJASHRI GOKUL ABHALE	16,800	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
72	101552033793	Mr. Rajib Kumar Mohanty	RAJIB KUMAR MOHANTY	25,300	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
73	100299037824	Mr. Raju Rathod	RAJU RATHOD	40,733	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
74	100937110995	Dr. Rakesh Shirase	RAKESH PRAFULL SHIRASE	61,205	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
75	101447049628	Ramesh Dhiwar	RAMESH NABU DHIWAR	4,378	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
76	100306074688	Mr.Ramkrishna Chandan	RAMKRISHNA BALU CHANDAN	17,388	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
77	101447049594	Rekha Jadhav	REKHA KAILAS JADHAV	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
78	100677842135	Ms.Revati Suryavanshi	REVATI HANMANT SURYAWANS HI	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
79	101258854321	Dr.Roop Kishore Singhal	ROOP KISHORE SINGHAL	91,748	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
80	100326301497	Sachin Surve	SACHIN EKNATH SURVE	35,429	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
81	101552033803	Mr. Sagar Bhondave	SAGAR MARUTI BHONDAVE	18,150	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
82	101781989938	Ms.Saira Ali Hussain Qureshi	SAIRA ALI HUSSAIN QURESHI	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
83	* 10032939840 6	Mr.Sambhaji Khandawe	SAMBHAJI KHANDWE	34,994	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
84	101781989858	Ms. Samta Wazir	SAMITA WAZIR	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
85	101447049600	Sandip Savale	SANDIP KHANDU SAWALE	15,557	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
86	100881311539	Ms.Sangeeta Rajput	SANGEETA DHANSINGH RAJPUT	88,251	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
87	101560940657	Sangita Adkar	SANGEETA SHANTARAM ADKAR	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
88	101447049573	Santosh Lihine	SANTOSH YASHWANT LENE	17,677	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
89	101404687036	Ms.Sarita Alok Mohata	SARITA MUNDRA	17,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
90	101770865767	Mr.Satish Adkar	SATISH DASHARATH ADKAR	12,100	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
91	101448014790	Shaila Dhamane	SHAILA RAMESH DHAMANE	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
92	100345807619	Shaila Jadhav	SHAILA SUBHASH JADHAV	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
93	101447049587	Shakuntala Jadhav	SHAKUNTAL A RAJARAM JADHAV	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
94	100598557423	Shalu Ramnani	SHALU ASHOK RAMNANI	47,500	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
95	* 10034929343	Mr.Shashikant Kamble	SHASHIKANT KAMBLE	54,611	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member	
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share		
	2																
96	101249426460	Prof.Shekhar Kumar Verma	SHEKHAR KUMAR VERMA	54,171	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
97	101659241436	Shivaji Jadhav	SHIVAJI MARUTI JADHAV	10,560	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
98	100352779607	Mr. Shivraj Shankarrao Magre	SHIVRAJ SHANKARRA O MAGRE	36,960	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
99	101266213014	Ms. Shradha Bansode	SHRADHA SHRIKANT CHOPADE	33,880	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
100	* 10088150622 1	Prof. Sonali Kshirsagar	SONALI KSHIRSAGAR	57,365	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
101	101781989889	Ms.Soumi Mukherjee	SOUMI MUKHERJEE	14,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
102	101448343288	Subhash Ovhal	SUBHASH GANGARAM OVHAL	12,966	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
103	100938787713	Mr.Sudam Daundkar	SUDAM MAHADEV DAUNDAKAR	23,300	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
104	* 10037052655 1	Mr. Sunil Kumar	SUNIL KUMAR	24,508	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
105	101448161218	Sunil Sarode	SUNIL PANDHARI SARWADE	5,640	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
106	101590341749	Trimbak Ghobale	TRIMBAK BHANUDAS GHOBAL	11,160	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
107	100881866578	Dr. Tripti Sahu	TRIPTI SAHU	1,05,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
108	100939013423	Mr.Tukaram R. Telange	TUKARAM RAMESH TELANGE	42,247	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
109	100392871554	Mr.Tushar Gaikwad	TUSHAR DNYANESHWAR GAIKWAD	24,200	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
110	101448014816	Varsha Khengare	VARSHA ASHOK KHENGARE	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	
111	100882542893	Prof. Vijay Nimbalkar	VIJAY VITTHALRAO NIMBALKAR	83,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
112	100397371611	Prof.V.G.Navle	VILAS GANGARAM NAVALE	80,208	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.	
113	101571872533	Vilas Gaikwad	VILAS VISHNU GAIKWAD	9,438	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.	

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
114	101266213033	Ms. Vini Lalwani	VINI LALWANI	47,616	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
115	100409846700	Mr. Vishal Dhumal	VISHAL TULASHIDAS DHUMAL	18,989	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

**Note: UANs are prefixed with Asterisk sign (\*) in case AADHAAR is not seeded /unverified**

PMRPY Benefit Not Given Remarks :-

ABRY Benefit Not Given Remarks :-

Reason Code	Reason Name
EC10001	ECR already filed for this member
EC10002	Parallel Employment: ECR already filed for this
EC10003	Benefit already availed for this member
EC10004	Gross/EPF wages greater than 15,000/-
EC10005	Mismatch in EPF and EPS wages
EC10006	Mismatch in Due and Remitted values
EC10007	UAN Deactivated

Reason Code	Reason Name
GK10001	EPF wages are greater than or equal to 15,000/-
GK10002	Mismatch in EPF and EPS wages
GK10003	EPF contribution remitted is greater than due remittance
GK10004	EPS contribution remitted is greater than due remittance
GK10005	(EPF - EPS) difference contribution remitted is greater than due
GK10006	EPS contribution remitted is greater than due remittance
GK10007	Aadhaar not seeded

# Challan Details



## COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With EMPLOYEES' PROVIDENT FUND ORGANISATION)

TRRN 3152202026334

Establishment Code & Name PUPUN0302399000 SAI BALAJI EDUCATION  
Address : SOCIETY,103 SOUTH MAIN, ROAD, KOREGAON, PARK, PUNE, MAHARASHTRA

Dues for the wage month of January 2022

Total Subscribers :	EPF 115	EPS 115	EDLI 115
Total Wages :	11,92,300	11,47,300	11,47,300

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	5,962	0	0	0	5,962
2	Employer's Share Of	42,050	0	95,626	5,737	0	143,413
3	Employee's Share Of	1,43,076	0	0	0	0	143,076
Grand Total : Two Lakh Ninety-Two Thousand Four Hundred Fifty-One Rupees Only							2,92,451

(This is a system generated challan on 15-FEB-2022 13:02, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY / ABRY.

	PMRPY	ABRY
A) A/C no 1 (Employer share) ( Rs.) -	0	0
B) A/C no 10 (Pension fund) ( Rs.) -	0	0
C) A/C no 1 (Employee share) ( Rs.) -	0	0
D) Total (A + B + C) ( Rs.) -	0	0
E) Total remittance by Employer ( Rs.) -	2,92,451	
F) Total amount of uploaded ECR (D + E) (	2,92,451	





## TRRN Details



कर्मचारी भविष्य निधि संगठन  
Employees' Provident Fund Organization

भविष्य निधि भवन, १४, भीकाजी कामा प्लेस, नई दिल्ली - ११००६६  
Bhavishya Nidhi Bhawan, 14, Bhikaji Cama Place, New Delhi - 110066

### TRRN Details

TRRN No :	3152203026729
Challan Status :	Payment Confirmed
Challan Generated On :	14-MAR-2022 17:26:44
Establishment ID :	PUPUN0302399000
Establishment Name :	SAI BALAJI EDUCATION
Challan Type :	Monthly Contribution Challan
Total Members :	115
Wage Month :	FEB-22
Total Amount (Rs) :	2,84,275
Account-1 Amount (Rs) :	1,80,002
Account-2 Amount (Rs) :	5,798
Account-10 Amount (Rs) :	92,902
Account-21 Amount (Rs) :	5,573
Account-22 Amount (Rs) :	0
Payment Confirmation Bank :	State Bank of India
CRN :	002160322675390
Presentation Date :	16-MAR-2022 00:00:00
Realization Date :	16-MAR-2022 00:00:00
Date of Credit :	16-MAR-2022 00:00:00
Total PMRPY Benefit :	0





# Employee's Provident Fund



## EMPLOYEE'S PROVIDENT FUND ELECTRONIC CHALLAN CUM RETURN (ECR)

Name of Establishment	SAI BALAJI EDUCATION		
Establishment Id	PUPUN0302399000	LIN	1237591262
Wage Month	FEB-2022	Return Month	MAR-2022
Contribution Rate (%)	12	ECR Type	ECR
Salary Disbursement Date	14-MAR-2022	Uploaded Date Time	14-MAR-2022 17:26
Exemption Status	Unexempted	TRRN Number	
Remarks	FEBRUARY-2022	ECR Id	70522196
Total Members	115	Aadhaar Not Seeded Member	4
<b>Contribution and Remittance Details (In Rupees) :</b>			
Total EPF Contribution Remitted	1,39,152	Total EPS Contribution Remitted	92,902
Total EPF-EPS Contribution Remitted	40,850	Total Refund Advance	0
<b>PMRPY Upfront Benefit Details (In Rupees) :</b>			
Total PMRPY Upfront EPF Amount	0	Total PMRPY Upfront EPS Amount	0
PMRPY benefit remarks	NA		
<b>ABRY Upfront Benefit Details (In Rupees) :</b>			
Total ABRY benefit Amount	Employee EPF Share	Employer EPS Share	Employer EPF Share
	0	0	0
ABRY benefit remarks	Establishment is not eligible for ABRY benefit as eligible employee count [0] is less than required employee count of five from base month.		

## Member Details :-

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
1	100871177839	Prof.Abhay Mishra	ABHAYKUMAR BHAUJI MISHRA	80,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
2	101590341754	Ms.Aishwarya Hamand	AISHWARYA SUBHASH HAMAND	24,508	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
3	100871218846	Prof.Akansha Taunk	AKANKSHA TAUNK	96,142	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
4	101620374567	Prof. Amar Narkhede	AMAR PRABHAKAR NARKHEDE	72,800	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
5	100079389918	Mr.Ambar Pawar	AMBAR ASARAM PAWAR	17,755	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
6	100871293336	Prof.Anil Verma	ANIL VARMA	80,723	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
7	101781989901	Smt. Archana Zawar	ARCHANA DEEPAK ZAWAR	28,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
8	100149074920	Dr. Ashutosh Gadekar	ASHUTOSH BHAGAWAT GADEKAR	1,06,400	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
9	101447049616	Baburao Sawale	BABURAO GOPAL SAWALE	15,557	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
10	100111496649	Mrs. Bharati Vinode	BHARATI RAJENDRA VINODE	47,566	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
11	101448609147	Brijesh Singh	BRIJESH SINGH	13,888	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
12	100823893388	Prof. Deepak Dixit	DEEPAK SUBHASH DIXIT	44,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
13	100932709032	Prof. Dhananjay Salunke	DHANANJAY KALYANRAO SALUNKE	71,962	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
14	100932709701	Ms.Dhanashri Gaurkar	DHANASHRI RAJU GAURKAR	25,963	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
15	101412577278	Dilip Wede	DILIP BHARAT WEDE	11,253	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
16	100847396119	Mr.Dilip Chavan	DILIP CHAVAN	25,285	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
17	100932725814	Mr.Dilip Patil	DILIP SAMBHAJI PATIL	38,163	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
18	100140349266	Ms. Deepti Wanjale	DIPTI DEEPAK WANJALE	54,937	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

SI. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
19	101454906443	Mr. Dnyaneshwar Misal	DNYANESHWAR RAMDAS MISAL	17,888	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
20	100876943322	Dr. Nalini Dixit	DR. NALINI DIXIT	55,224	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
21	100873020376	Prof. Ekta Joshi	EKTA JOSHI	1,21,919	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
22	100881438358	Mr. Sherkhane Gajanan Mahadeo	GAJANAN MAHADEO SHERKHANE	40,492	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
23	100150166224	Mr. Ganesh Gaikwad	GANESH NIVRUTTI GAIKWAD	19,965	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
24	101636261589	Prof. Girish Naik	GIRISH RAMDAS NAIK	99,840	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
25	100153617403	Prof. Girish Chavan	GIRISH SHARADRAO CHAVAN	75,359	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
26	101448161225	Harshvardhan Ovhal	HARSHVAAR DHAN DEVRAM OVHAL	9,765	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
27	101781989929	Ms. Hemali Shah	HEMALI DEEPAK SHAH	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
28	101448014761	Hira Khanekar	HIRABAI SURESH KHANEKAR	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
29	100640699784	Prof. Israr Ahmed	ISRAR AHMED	55,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
30	100267122526	Mr. Popat Jadhav	JADHAV POPAT NAMDEV	40,733	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
31	101792385387	Somnath Jadhav	JADHAV SOMNATH MAHADEV	12,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
32	100933647878	Mr. Jitendra Swain	JITENDRA KUMAR SWAIN	38,635	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
33	100083838538	Mr. Anil Kale	KALE ANIL PRABHAKAR	22,403	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
34	100189533957	Prof. Kapil Kapdiya	KAPIL HARISHKUMAR KAPDIYA	22,033	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
35	101668163678	Ms. Karishma Meshram	KARISHMA GIRIDHAR MESHARAM	23,760	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
36	101792385373	Khaju Gejge	KHAJU DASHRATH GEJGE	12,195	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
37	100934146036	Mr. Kiran Balbhim Rathod	KIRAN BALBHIM RATHOD	24,158	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
38	101552033786	Mr. K. R. Dattan Nair	KOCHAYYAT RAMCHANDRAN DATTAN	30,800	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
39	100874999419	Prof. Kshirod Chand	KSHIROD DHARMU CHAND	54,171	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
40	100934302535	Mr.Lalatendu Swain	LALATENDU SWAIN	45,920	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
41	101364832406	Laxmi Bai Dashrth Gejge	LAXMIBAI DASHRTH GEJGE	12,500	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
42	100875212329	Prof. Laxmidhar Biswal	LAXMIDHAR BISWAL	54,280	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
43	101509046148	Dr. Lokesh Arora	LOKESH BHASIN	80,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
44	100213835988	Mr. Mahendra Karanjawane	MAHENDRA MAHADEV KARANJAWANE	50,850	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
45	100214558520	Mr.Mahesh Jadhav	MAHESH BHAU JADHAV	40,098	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
46	101475136519	Malhari Shedage	MALHARI BAJIRAV SHEDGE	10,614	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
47	101792385394	Ms. Manisha Sherkhane	MANISHA GAJANAN SHERKHANE	14,520	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
48	101659241443	Manisha Jadhav	MANISHA PRASHANT JADHAV	10,137	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
49	100224437882	Dr. Mayanka Sharma	MAYANKA SHARMA	58,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
50	100876327999	Prof. M. R. Mundada	MISHARILAL RAJARAM MUNDADA	2,36,808	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
51	100249354245	Mr. Nandakumar Jadhav	NANDAKUMAR TUKARAM JADHAV	48,104	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
52	101049321081	Prof. Neha Agarwal	NEHA AGARWAL	70,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
53	100254362558	Mrs. Neha Surve	NEHA NITIN SURVE	57,068	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
54	101781989891	Ms.Neha Tandon	NEHA TANEJA TANDON	18,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
55	100935580159	Mrs. Nirupama Mundada	NIRUPAMA MISHARILAL MUNDADA	2,09,088	60,000	15,000	15,000	7,200	1,250	550	0	0	-	-	-	N.A.
56	100257049232	Prof. Nishant Ranjan	NISHANT RANJAN	1,09,268	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
57	100877014117	Dr. Nitin Ranjan	NITIN RANJAN	79,268	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
58	101792385360	Pandit Madan Jadhav	PANDIT MADAN JADHAV	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
59	101590315068	Mr.Parshuram Jadhav	PARSHURAM DILIP JADHAV	8,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
60	101447986440	Ms.Vrushali Pawar	PAWAR VRUSHALI GAJANAN	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
61	100271941647	Mr. Pintu Rode	PINTU BABAN RODE	18,989	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
62	100936205951	Ms. Pooja Karekar	POOJA PRAKASH KAREKAR	62,567	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
63	100267777247	Mr. Pradeep Jadhav	PRADEEP MANIK JADHAV	19,667	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
64	100277984248	Mr. Prashant Avchare	PRASHANT NAMDEV AVCHARE	48,667	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
65	101781989917	Ms.Priti Dewangan	PRITI DEWANGAN	40,297	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
66	101782096180	Mrs.Priyanka Biswas	PRIYANKA BISWAS	13,750	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
67	101448014837	Pushpa Kadam	PUSHPA SUGRIV KADAM	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
68	100937068913	Mr.Rahul R. Jadhav	RAHUL RAJARAM JADHAV	11,690	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
69	101237182347	Mr.Rajaram Jadhav	RAJARAM YASHWANT JADHAV	23,134	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
70	101454906458	Mrs.Rajshree Marathe	RAJASHRI GOKUL ABHALE	16,800	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
71	101552033793	Mr. Rajib Kumar Mohanty	RAJIB KUMAR MOHANTY	25,300	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
72	100299037824	Mr. Raju Rathod	RAJU RATHOD	40,733	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
73	100937110995	Dr. Rakesh Shirase	RAKESH PRAFULL SHIRASE	61,205	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
74	101447049628	Ramesh Dhiwar	RAMESH NABU DHIWAR	4,378	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
75	100306074688	Mr.Ramkrishna Chandan	RAMKRISHNA BALU CHANDAN	17,388	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
76	101447049594	Rekha Jadhav	REKHA KAILAS JADHAV	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
77	100677842135	Ms.Revati Suryavanshi	REVATI HANMANT SURYAWANS HI	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
78	101258854321	Dr.Roop Kishore Singhal	ROOP KISHORE SINGHAL	91,748	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
79	100326301497	Sachin Surve	SACHIN EKNATH SURVE	35,429	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
80	101552033803	Mr. Sagar Bhondave	SAGAR MARUTI BHONDAVE	18,150	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
81	101781989938	Ms.Saira Ali Hussain Qureshi	SAIRA ALI HUSSAIN QURESHI	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
82	* 10032939840 6	Mr.Sambhaji Khandawe	SAMBHAJI KHANDWE	34,994	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
83	101781989858	Ms. Samta Wazir	SAMITA WAZIR	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
84	101447049600	Sandip Savale	SANDIP KHANDU SAWALE	15,557	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
85	100881311539	Ms.Sangeeta Rajput	SANGEETA DHANSINGH RAJPUT	88,251	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
86	101560940657	Sangita Adkar	SANGEETA SHANTARAM ADKAR	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
87	101447049573	Santosh Lihine	SANTOSH YASHWANT LENE	17,677	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
88	101404687036	Ms.Sarita Alok Mohata	SARITA MUNDRA	17,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
89	101770865767	Mr.Satish Adkar	SATISH DASHARATH ADKAR	12,100	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
90	101448014790	Shaila Dhamane	SHAILA RAMESH DHAMANE	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
91	100345807619	Shaila Jadhav	SHAILA SUBHASH JADHAV	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
92	101447049587	Shakuntala Jadhav	SHAKUNTAL A RAJARAM JADHAV	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
93	100598557423	Shalu Ramnani	SHALU ASHOK RAMNANI	47,500	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
94	* 10034929343 2	Mr.Shashikant Kamble	SHASHIKANT KAMBLE	54,611	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
95	101249426460	Prof.Shekhar Kumar Verma	SHEKHAR KUMAR	54,171	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.



Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
			VERMA													
96	101659241436	Shivaji Jadhav	SHIVAJI MARUTI JADHAV	10,560	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
97	100352779607	Mr. Shivraj Shankarrao Magre	SHIVRAJ SHANKARRA O MAGRE	36,960	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
98	101266213014	Ms. Shradha Bansode	SHRADHA SHRIKANT CHOPADE	33,880	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
99	* 10088150622 1	Prof. Sonali Kshirsagar	SONALI KSHIRSAGAR	57,365	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
100	101781989889	Ms.Soumi Mukherjee	SOUMI MUKHERJEE	14,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
101	101448343288	Subhash Ovhal	SUBHASH GANGARAM OVHAL	12,966	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
102	100938787713	Mr.Sudam Daundkar	SUDAM MAHADEV DAUNDAKAR	23,300	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
103	100201351580	Prof. Sumedha Kulkarni	SUMEDHA SHANKAR KULKARNI	88,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
104	* 10037052655 1	Mr. Sunil Kumar	SUNIL KUMAR	24,508	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
105	101448161218	Sunil Sarode	SUNIL PANDHARI SARWADE	5,640	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
106	101590341749	Trimbak Ghobale	TRIMBAK BHANUDAS GHOBAL	11,160	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
107	100881866578	Dr. Tripti Sahu	TRIPTI SAHU	1,05,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
108	100939013423	Mr.Tukaram R. Telange	TUKARAM RAMESH TELANGE	42,247	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
109	100392871554	Mr.Tushar Gaikwad	TUSHAR DNYANESHW AR GAIKWAD	24,200	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
110	101448014816	Varsha Khengare	VARSHA ASHOK KHENGARE	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
111	100882542893	Prof. Vijay Nimbalkar	VIJAY VITTHALRAO NIMBALKAR	83,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
112	100397371611	Prof.V.G.Navle	VILAS GANGARAM NAVALE	80,208	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
113	101571872533	Vilas Gaikwad	VILAS VISHNU GAIKWAD	9,438	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
114	101266213033	Ms. Vini Lalwani	VINI LALWANI	47,616	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
115	100409846700	Mr. Vishal Dhumal	VISHAL TULASHIDAS DHUMAL	18,989	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

**Note: UANs are prefixed with Asterisk sign (\*) in case AADHAAR is not seeded /unverified**

PMRPY Benefit Not Given Remarks :-

ABRY Benefit Not Given Remarks :-

Reason Code	Reason Name
EC10001	ECR already filed for this member
EC10002	Parallel Employment: ECR already filed for this
EC10003	Benefit already availed for this member
EC10004	Gross/EPF wages greater than 15,000/-
EC10005	Mismatch in EPF and EPS wages
EC10006	Mismatch in Due and Remitted values
EC10007	UAN Deactivated

Reason Code	Reason Name
GK10001	EPF wages are greater than or equal to 15,000/-
GK10002	Mismatch in EPF and EPS wages
GK10003	EPF contribution remitted is greater than due remittance
GK10004	EPS contribution remitted is greater than due remittance
GK10005	(EPF - EPS) difference contribution remitted is greater than due
GK10006	EPS contribution remitted is greater than due remittance
GK10007	Aadhaar not seeded

# Challan Details



## COMBINED CHALLAN OF A/C NO. 01, 02, 10, 21 & 22 (With EMPLOYEES' PROVIDENT FUND ORGANISATION)

TRRN 3152203026729

Establishment Code & Name PUPUN0302399000 SAI BALAJI EDUCATION  
Address : SOCIETY,103 SOUTH MAIN, ROAD, KOREGAON, PARK, PUNE, MAHARASHTRA

Dues for the wage month of February 2022

Total Subscribers :	EPF 115	EPS 115	EDLI 115
Total Wages :	11,59,600	11,14,600	11,14,600

SL.	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	5,798	0	0	0	5,798
2	Employer's Share Of	40,850	0	92,902	5,573	0	139,325
3	Employee's Share Of	1,39,152	0	0	0	0	139,152
Grand Total : Two Lakh Eighty-Four Thousand Two Hundred Seventy-Five Rupees Only							2,84,275

(This is a system generated challan on 14-MAR-2022 17:26, the particulars shown in this challan are populated from the Electronic Challan Cum Return (ECR) uploaded by the establishment for the specified month and year.

Note :- The following amounts are being remitted directly by Government of India on account of PMRPY / ABRY.

	PMRPY	ABRY
A) A/C no 1 (Employer share) ( Rs.) -	0	0
B) A/C no 10 (Pension fund) ( Rs.) -	0	0
C) A/C no 1 (Employee share) ( Rs.) -	0	0
D) Total (A + B + C) ( Rs.) -	0	0
E) Total remittance by Employer ( Rs.) -	2,84,275	
F) Total amount of uploaded ECR (D + E) (	2,84,275	



## TRRN Details



कर्मचारी भविष्य निधि संगठन  
Employees' Provident Fund Organization

भविष्य निधि भवन, १४, भीकाजी कामा प्लेस, नई दिल्ली - ११००६६  
Bhavishya Nidhi Bhawan, 14, Bhikaji Cama Place, New Delhi - 110066

### TRRN Details

TRRN No :	3152204023237
Challan Status :	Payment Confirmed
Challan Generated On :	13-APR-2022 17:15:08
Establishment ID :	PUPUN0302399000
Establishment Name :	SAI BALAJI EDUCATION
Challan Type :	Monthly Contribution Challan
Total Members :	113
Wage Month :	MAR-22
Total Amount (Rs) :	2,76,775
Account-1 Amount (Rs) :	1,75,302
Account-2 Amount (Rs) :	5,648
Account-10 Amount (Rs) :	90,402
Account-21 Amount (Rs) :	5,423
Account-22 Amount (Rs) :	0
Payment Confirmation Bank :	State Bank of India
CRN :	002140422355183
Presentation Date :	14-APR-2022 00:00:00
Realization Date :	14-APR-2022 00:00:00
Date of Credit :	14-APR-2022 00:00:00
Total PMRPY Benefit :	0





## TRRN Details



कर्मचारी भविष्य निधि संगठन  
Employees' Provident Fund Organization

भविष्य निधि भवन, १४, भीकाजी कामा प्लेस, नई दिल्ली - ११००६६  
Bhavishya Nidhi Bhawan, 14, Bhikaji Cama Place, New Delhi - 110066

### TRRN Details

TRRN No :	3152306026176
Challan Status :	Payment Confirmed
Challan Generated On :	14-JUN-2023 16:42:29
Establishment ID :	PUPUN0302399000
Establishment Name :	SAI BALAJI EDUCATION
Challan Type :	Monthly Contribution Challan
Total Members :	1
Wage Month :	MAR-22
Total Amount (Rs) :	3,750
Account-1 Amount (Rs) :	3,600
Account-2 Amount (Rs) :	75
Account-10 Amount (Rs) :	0
Account-21 Amount (Rs) :	75
Account-22 Amount (Rs) :	0
Payment Confirmation Bank :	State Bank of India
CRN :	002160623005292
Presentation Date :	16-JUN-2023 00:00:00
Realization Date :	16-JUN-2023 00:00:00
Date of Credit :	16-JUN-2023 00:00:00
Total PMRPY Benefit :	0





# Employee's Provident Fund



## EMPLOYEE'S PROVIDENT FUND ELECTRONIC CHALLAN CUM RETURN (ECR)

Name of Establishment	SAI BALAJI EDUCATION		
Establishment Id	PUPUN0302399000	LIN	1237591262
Wage Month	MAR-2022	Return Month	APR-2022
Contribution Rate (%)	12	ECR Type	ECR
Salary Disbursement Date	13-APR-2022	Uploaded Date Time	13-APR-2022 17:15
Exemption Status	Unexempted	TRRN Number	
Remarks	March-2022	ECR Id	71700863
Total Members	113	Aadhaar Not Seeded Member	4
<b>Contribution and Remittance Details (In Rupees) :</b>			
Total EPF Contribution Remitted	1,35,552	Total EPS Contribution Remitted	90,402
Total EPF-EPS Contribution Remitted	39,750	Total Refund Advance	0
<b>PMRPY Upfront Benefit Details (In Rupees) :</b>			
Total PMRPY Upfront EPF Amount	0	Total PMRPY Upfront EPS Amount	0
PMRPY benefit remarks	NA		
<b>ABRY Upfront Benefit Details (In Rupees) :</b>			
Total ABRY benefit Amount	Employee EPF Share	Employer EPS Share	Employer EPF Share
	0	0	0
ABRY benefit remarks	Establishment is not eligible for ABRY benefit as eligible employee count [0] is less than required employee count of five from base month.		



## Member Details :-

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
1	100871177839	Prof.Abhay Mishra	ABHAYKUMAR BHAUJI MISHRA	89,600	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
2	101590341754	Ms.Aishwarya Hamand	AISHWARYA SUBHASH HAMAND	24,508	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
3	100871218846	Prof.Akansha Taunk	AKANKSHA TAUNK	1,26,796	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
4	100079389918	Mr.Ambar Pawar	AMBAR ASARAM PAWAR	17,755	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
5	100871293336	Prof.Anil Verma	ANIL VARMA	86,815	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
6	101781989901	Smt. Archana Zawar	ARCHANA DEEPAK ZAWAR	28,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
7	100149074920	Dr. Ashutosh Gadekar	ASHUTOSH BHAGAWAT GADEKAR	1,06,400	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
8	101447049616	Mr.Baburao Sawale	BABURAO GOPAL SAWALE	15,557	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
9	100111496649	Mrs. Bharati Vinode	BHARATI RAJENDRA VINODE	47,566	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
10	101448609147	Mr.Brijesh Singh	BRIJESH SINGH	13,888	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
11	100823893388	Prof. Deepak Dixit	DEEPAK SUBHASH DIXIT	44,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
12	100932709032	Prof. Dhananjay Salunke	DHANANJAY KALYANRAO SALUNKE	71,962	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
13	100932709701	Ms.Dhanashri Gaurkar	DHANASHRI RAJU GAURKAR	25,963	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
14	100932725814	Mr.Dilip Patil	DILIP SAMBHAJI PATIL	38,163	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
15	100847396119	Mr.Dilip Chavan	DILIP SHAMRAO CHAVAN	25,285	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
16	100140349266	Ms. Deepti Wanjale	DIPTI DEEPAK WANJALE	54,937	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
17	101454906443	Mr. Dnyaneshwar Misal	DNYANESHWAR RAMDAS MISAL	17,888	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
18	100876943322	Dr. Nalini Dixit	DR. NALINI DIXIT	67,581	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
19	100873020376	Prof. Ekta Joshi	EKTA JOSHI	1,21,919	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
20	100881438358	Mr. Sherkhane Gajanan Mahadeo	GAJANAN MAHADEO SHERKHANE	40,492	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
21	100150166224	Mr.Ganesh Gaikwad	GANESH NIVRUTTI GAIKWAD	19,965	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
22	101636261589	Prof. Girish Naik	GIRISH RAMDAS NAIK	1,25,798	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
23	100153617403	Prof.Girish Chavan	GIRISH SHARADRAO CHAVAN	75,359	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
24	101448161225	Mr. Harshvardhan Ovhal	HARSHVAAR DHAN DEVRAM OVHAL	9,765	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
25	101781989929	Ms.Hemali Shah	HEMALI DEEPAK SHAH	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
26	101448014761	Smt.Hira Khanekar	HIRABAI SURESH KHANEKAR	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
27	100640699784	Prof.Israr Ahmed	ISRAR AHMED	55,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
28	100267122526	Mr. Popat Jadhav	JADHAV POPAT NAMDEV	40,733	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
29	101792385387	Mr.Somnath Jadhav	JADHAV SOMNATH MAHADEV	12,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
30	100933647878	Mr.Jitendra Swain	JITENDRA KUMAR SWAIN	38,635	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
31	100083838538	Mr. Anil Kale	KALE ANIL PRABHAKAR	22,403	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
32	100189533957	Prof.Kapil Kapdiya	KAPIL HARISHKUMAR KAPDIYA	53,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
33	101668163678	Ms.Karishma Meshram	KARISHMA GIRIDHAR MESHARAM	23,760	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
34	101792385373	Mr.Khaju Gejge	KHAJU DASHRATH GEJAGE	12,195	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
35	100934146036	Mr.Kiran Balbhim Rathod	KIRAN BALBHIM RATHOD	24,158	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
36	101552033786	Mr. K. R. Dattan Nair	KOCHAYYAT RAMCHANDRAN DATTAN	30,800	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
37	100874999419	Prof. Kshirod Chand	KSHIROD DHARMU CHAND	73,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
38	100934302535	Mr.Lalatendu Swain	LALATENDU SWAIN	45,920	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
39	101436127908	Dr.L K Tripathy	LAXMAN KUMAR TRIPATHY	1,50,000	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
40	101364832406	Mrs.Laxmi Bai Dashrth Gejge	LAXMIBAI DASHRTH GEJGE	12,500	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
41	100875212329	Prof. Laxmidhar Biswal	LAXMIDHAR BISWAL	65,831	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
42	101509046148	Dr. Lokesh Arora	LOKESH BHASIN	1,10,794	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
43	100213835988	Mr. Mahendra Karanjawane	MAHENDRA MAHADEV KARANJAWANE	50,850	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
44	100214558520	Mr.Mahesh Jadhav	MAHESH BHAV JADHAV	40,098	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
45	101475136519	Mr.Malhari Shedage	MALHARI BAJIRAV SHEDGE	10,614	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
46	101792385394	Ms. Manisha Sherkhane	MANISHA GAJANAN SHERKHANE	14,520	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
47	101659241443	Mrs.Manisha Jadhav	MANISHA PRASHANT JADHAV	10,137	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
48	101804263906	Mrs.Manisha Deshpande	MANISHA SACHIN DESHPANDE	7,500	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
49	100224437882	Dr. Mayanka Sharma	MAYANKA SHARMA	58,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
50	100876327999	Prof. M. R. Mundada	MISHARILAL RAJARAM MUNDADA	2,36,808	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
51	100249354245	Mr. Nandakumar Jadhav	NANDAKUMAR TUKARAM JADHAV	48,104	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
52	101049321081	Prof. Neha Agarwal	NEHA AGARWAL	75,600	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
53	100254362558	Mrs. Neha Surve	NEHA NITIN SURVE	57,068	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
54	101781989891	Ms.Neha Tandon	NEHA TANEJA TANDON	18,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
55	100935580159	Mrs. Nirupama Mundada	NIRUPAMA MISHARILAL MUNDADA	2,09,088	60,000	15,000	15,000	7,200	1,250	550	0	0	-	-	-	N.A.
56	100257049232	Prof. Nishant Ranjan	NISHANT RANJAN	1,26,672	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
57	100877014117	Dr. Nitin Ranjan	NITIN RANJAN	92,652	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
58	101792385360	Mr.Pandit Madan Jadhav	PANDIT MADAN JADHAV	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
59	101590315068	Mr.Parshuram Jadhav	PARSHURAM DILIP JADHAV	8,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
60	101447986440	Ms.Vrushali Pawar	PAWAR VRUSHALI GAJANAN	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
61	100271941647	Mr. Pintu Rode	PINTU BABAN RODE	18,989	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
62	100936205951	Ms. Pooja Karekar	POOJA PRAKASH KAREKAR	62,567	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
63	100267777247	Mr. Pradeep Jadhav	PRADEEP MANIK JADHAV	19,667	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
64	100277984248	Mr. Prashant Avchare	PRASHANT NAMDEV AVCHARE	48,667	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
65	101781989917	Ms.Priti Dewangan	PRITI DEWANGAN	40,297	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
66	101782096180	Mrs.Priyanka Biswas	PRIYANKA BISWAS	13,750	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
67	101448014837	Mrs.Pushpa Kadam	PUSHPA SUGRIV KADAM	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
68	100937068913	Mr.Rahul R. Jadhav	RAHUL RAJARAM JADHAV	11,690	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
69	101237182347	Mr.Rajaram Jadhav	RAJARAM YASHWANT JADHAV	23,134	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
70	101454906458	Mrs.Rajshree Marathe	RAJASHRI GOKUL ABHALE	16,800	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
71	101552033793	Mr. Rajib Kumar Mohanty	RAJIB KUMAR MOHANTY	25,300	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
72	100299037824	Mr. Raju Rathod	RAJU RATHOD	40,733	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
73	100937110995	Dr. Rakesh Shirase	RAKESH PRAFULL SHIRASE	61,205	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
74	101447049628	Mr.Ramesh Dhiwar	RAMESH NABU DHIWAR	4,378	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
75	100306074688	Mr.Ramkrishna Chandan	RAMKRISHNA BALU CHANDAN	17,388	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
76	101447049594	Mrs.Rekha Jadhav	REKHA KAILAS JADHAV	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
77	100677842135	Ms.Revati Suryavanshi	REVATI HANMANT SURYAWANS HI	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
78	101258854321	Dr.Roop Kishore Singhal	ROOP KISHORE SINGHAL	98,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
79	100326301497	Mr.Sachin Surve	SACHIN EKNATH SURVE	35,429	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
80	101552033803	Mr. Sagar Bhondave	SAGAR MARUTI BHONDAVE	18,150	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
81	101781989938	Ms.Saira Ali Hussain Qureshi	SAIRA ALI HUSSAIN QURESHI	10,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
82	* 10032939840 6	Mr.Sambhaji Khandawe	SAMBHAJI KHANDWE	34,994	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
83	101781989858	Ms. Samta Wazir	SAMITA WAZIR	15,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
84	101447049600	Mr.Sandip Savale	SANDIP KHANDU SAWALE	15,557	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
85	100881311539	Ms.Sangeeta Rajput	SANGEETA DHANSINGH RAJPUT	1,02,704	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
86	101560940657	Mrs.Sangita Adkar	SANGEETA SHANTARAM ADKAR	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
87	101447049573	Mr.Santosh Lihine	SANTOSH YASHWANT LENE	17,677	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
88	101404687036	Ms.Sarita Alok Mohata	SARITA MUNDRA	17,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
89	101770865767	Mr.Satish Adkar	SATISH DASHARATH ADKAR	12,100	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
90	101448014790	Mrs.Shaila Dhamane	SHAILA RAMESH DHAMANE	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
91	100345807619	Smt.Shaila Jadhav	SHAILA SUBHASH JADHAV	11,112	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
92	101447049587	Shakuntala Jadhav	SHAKUNTAL A RAJARAM JADHAV	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
93	* 10034929343 2	Mr.Shashikant Kamble	SHASHIKANT KAMBLE	54,611	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
94	101249426460	Prof.Shekhar Kumar Verma	SHEKHAR KUMAR VERMA	66,249	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
95	101659241436	Shivaji Jadhav	SHIVAJI MARUTI	10,560	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

Sl. No.	UAN	Name as per		Wages				Contribution Remitted				Refunds	PMRPY / ABRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days		Pension Share	ER PF Share	EE Share	
			JADHAV													
96	100352779607	Mr. Shivraj Shankarrao Magre	SHIVRAJ SHANKARRA O MAGRE	36,960	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
97	101266213014	Ms. Shradha Bansode	SHRADHA SHRIKANT CHOPADE	33,880	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
98	* 10088150622 1	Prof. Sonali Kshirsagar	SONALI KSHIRSAGAR	57,365	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
99	101781989889	Ms.Soumi Mukherjee	SOUMI MUKHERJEE	14,000	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
100	101448343288	Mr.Subhash Ovhal	SUBHASH GANGARAM OVHAL	12,966	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
101	100938787713	Mr.Sudam Daundkar	SUDAM MAHADEV DAUNDAKAR	23,300	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
102	* 10037052655 1	Mr. Sunil Kumar	SUNIL KUMAR	24,508	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
103	101448161218	Mr.Sunil Sarode	SUNIL PANDHARI SARWADE	5,640	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
104	101590341749	Mr.Trimbak Ghobale	TRIMBAK BHANUDAS GHOBALE	11,160	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
105	100881866578	Dr. Tripti Sahu	TRIPTI SAHU	1,15,584	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
106	100939013423	Mr.Tukaram R. Telange	TUKARAM RAMESH TELANGE	42,247	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
107	100392871554	Mr.Tushar Gaikwad	TUSHAR DNYANESHWAR GAIKWAD	24,200	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
108	101448014816	Varsha Khengare	VARSHA ASHOK KHENGARE	5,051	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
109	100882542893	Prof. Vijay Nimbalkar	VIJAY VITTHALRAO NIMBALKAR	95,200	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
110	100397371611	Prof.V.G.Navle	VILAS GANGARAM NAVALE	80,208	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
111	101571872533	Mr.Vilas Gaikwad	VILAS VISHNU GAIKWAD	9,438	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.
112	101266213033	Ms. Vini Lalwani	VINI LALWANI	60,478	15,000	15,000	15,000	1,800	1,250	550	0	0	-	-	-	N.A.
113	100409846700	Mr.Vishal Dhumal	VISHAL TULASHIDAS DHUMAL	18,989	4,100	4,100	4,100	492	342	150	0	0	-	-	-	N.A.

**Note: UANs are prefixed with Asterisk sign (\*) in case AADHAAR is not seeded /unverified**

PMRPY Benefit Not Given Remarks :-

ABRY Benefit Not Given Remarks :-

Reason Code	Reason Name
EC10001	ECR already filed for this member
EC10002	Parallel Employment: ECR already filed for this
EC10003	Benefit already availed for this member
EC10004	Gross/EPF wages greater than 15,000/-
EC10005	Mismatch in EPF and EPS wages
EC10006	Mismatch in Due and Remitted values
EC10007	UAN Deactivated

Reason Code	Reason Name
GK10001	EPF wages are greater than or equal to 15,000/-
GK10002	Mismatch in EPF and EPS wages
GK10003	EPF contribution remitted is greater than due remittance
GK10004	EPS contribution remitted is greater than due remittance
GK10005	(EPF - EPS) difference contribution remitted is greater than due
GK10006	EPS contribution remitted is greater than due remittance
GK10007	Aadhaar not seeded

## Challan Details

4/29/24, 5:20 PM

Challan Details

### EMPLOYEES' PROVIDENT FUND ORGANIZATION, INDIA

#### Challan Summary :

TRRN Number : 3152204023237

Challan Type : Monthly Contribution Challan

Wage Month : MAR-2022

Status : Payment Confirmed

#### Challan Details :

Head	A/C 1 (₹)	A/C 2 (₹)	A/C 10 (₹)	A/C 21 (₹)	A/C 22 (₹)
Administration Charges	0	5,648	0	0	0
Employer's Share Of Contribution	39,750	0	90,402	5,423	0
Employee's Share Of Contribution	1,35,552	0	0	0	0
<b>Total</b>	<b>1,75,302</b>	<b>5,648</b>	<b>90,402</b>	<b>5,423</b>	<b>0</b>

**Total Amount (₹) : 2,76,775**



## Challan Details

4/29/24, 5:20 PM

Challan Details

### EMPLOYEES' PROVIDENT FUND ORGANIZATION, INDIA

#### Challan Summary :

TRRN Number : 3152306026176

Challan Type : Monthly Contribution Challan

Wage Month : MAR-2022

Status : Payment Confirmed

#### Challan Details :

Head	A/C 1 (₹)	A/C 2 (₹)	A/C 10 (₹)	A/C 21 (₹)	A/C 22 (₹)
Administration Charges	0	75	0	0	0
Employer's Share Of Contribution	1,800	0	0	75	0
Employee's Share Of Contribution	1,800	0	0	0	0
<b>Total</b>	<b>3,600</b>	<b>75</b>	<b>0</b>	<b>75</b>	<b>0</b>

**Total Amount (₹) : 3,750**



## Non-Monetary Welfare Measures

Sr. No.	Document
01	Maternity Leaves and nursing breaks
02	Trust sponsored Staff picnic
03	Uniform for Teaching and Non-teaching staff
04	Recognition for Special Achievements
05	Initiatives for Health- Yoga
06	Festival Celebrations
07	Women's day Celebration
08	Welfare Policy
09	Non-Monetary Welfare Services

To,  
The Director  
Saibalaji Group of Institute  
Pune, (Hinjawadi IT Park)

Subject :- Application requesting  
Maternity Leave

Respected Sir/Ma'am,

I, Prof. Dhanashri Gawdekar,  
Assistant Professor SBIIMS, wish to  
request you to grant me the maternity  
leave as per provisions starting from  
Friday, the 1st October 2021.

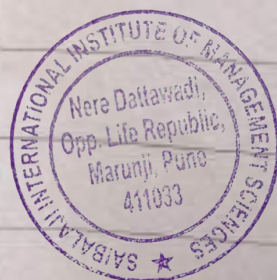
Kindly do the needful.

Thanking you.

Dhanashri

Yours Sincerely

Prof. Dhanashri Gawdekar





**Ramteke**

COLOR DOPPLER SONOGRAPHY & DIGITAL X-RAY CLINIC

**CONSULTANT RADIOLOGIST & SONOLOGIST**

**DR. VIVEK S. RAMTEKE**  
M.B.B.S., D.M.R.D.

Regi. No. 077114  
Near Sapna Talkies,  
Chandrapur,  
PH. : (C) 07172 - 260886  
Consulting Hours :  
9.30 a.m. to 9.00 p.m.

Name of Patient :- Mrs. Dhanshree Sanjog Gate  
Ref. By :- Dr. Mrs. MAMIDWAR ( MBBS ; MD ( Gynac ) )

Age / Sex = 29 Yrs / F  
Date Of Scan : - 25-Sep-21

## OBSTETRIC SONOGRAPHY

USG DONE ON 4 D COLOR DOPPLER SONOGRAPHY MACHINE ( ACCUVIX A 30 ) OF SAMSUNG MEDISON.

- \*\*\* Twin pregnancy seen .
- \*\*\* Dividing membrane between two foetuses seen with two separate placentas ; suggestive of ? Dichorionic - Diamniotic Twins .
- \*\*\* Gastric fundus visualised in both foetuses .
- \*\*\* Urinary bladder well visualised .
- \*\*\* Both kidneys are normal in both foetuses .
- \*\*\* Umbilical cords are normal .

### FOETUS NO . 1 ( One ) ( PRESENTING FOETUS ) .

- \*\*\* Foetus to the left of maternal side .
- \*\*\* Breech by presentation .
- \*\*\* Placenta is anterior .
- \*\*\* Foetal spine is normal .
- \*\*\* Liquor is adequate .
- \*\*\* Cardiac activity present with heart rate of 152 / min .

### FOETUS NO . 2 ( TWO )

- \*\*\* Foetus to the right of maternal side .
- \*\*\* Transverse lie with foetal head to right of mother .
- \*\*\* Placenta is right lateral & posterior . .
- \*\*\* Foetal spine is normal .
- \*\*\* Liquor is adequate .
- \*\*\* Cardiac activity present with heart rate of 148 / min .

### FOETAL BIOMETRY

#### FOETUS 1 ( ONE )

BPD - 8.05 cm = 32 weeks 2 days .  
HC - 29.40 cm = 32 weeks 3 days .  
FL - 6.44 cm = 33 weeks 2 days .  
AC - 30.17 cm = 34 weeks 1 day .

Average Gestational age = 33 weeks 0 days

Foetal Weight = 2335 ± 150 gms .

#### FOETUS 2 ( TWO )

BPD - 8.10 cm = 32 weeks 4 days .  
HC - 30.53 cm = 34 weeks 0 day .  
FL - 6.55 cm = 33 weeks 5 days .  
AC - 28.63 cm = 32 weeks 5 days .

Average Gestational Age = 33 weeks 2 days

Foetal Weight = 2163 ± 110 gms .

OPINION : - 1 ) TWIN PREGNANCY SEEN . DIACHORIONIC DIAMNIOTIC TWINS .

2 ) AVERAGE GESTATIONAL AGE OF BOTH FOETUSES IS 33 - 34 WEEKS .

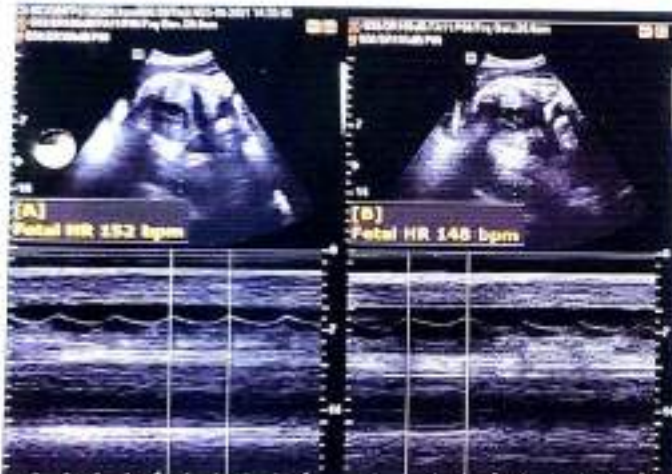
3 ) AMNIOTIC FLUID IS ADEQUATE .

4 ) FOETAL PRESENTATION AS MENTIONED ABOVE .

5 ) PLACENTAL POSITION AS MENTIONED ABOVE .

DECLARATION :- I have neither detected nor disclosed the sex of her foetus to any body in any manner .

# Ultrasound Image Report



# मनोमय

Nursing Home, Infertility  
& Test Tube Baby Centre



Dr. Prajakta Aswar

M.B.B.S., M.D.

Dr. Shalaka Mamidwar

M.B.B.S., M.D.

NURSING HOME : Behind Sindhi Panchayat Bhavan, Ramnagar, Chandrapur Ph. 07172 - 655485, 9422140863

TEST-TUBE BABY CENTRE : Opp. Dixit Wada, Nr. Durga Mandir, Jalpura Ward No. 2, Chandrapur M. 9422909972

Sr. No. 106 (BILL & RECEIPT) Date: 7/10/21  
Name of Patient Dhanshree Sanjog Gatte.  
Age/Sex 29yr Room No. 4  
Under Care of: Dr. Pijanta Aswar  
Diagnosis: Anti e-twin EPO  
Procedure: P+LSCSM 4/10/21  
DOA: 4/10/21 DOD: 7/10/21

Particulars	Amount Rs.
Consultant Charges	...
Room Rent	2500 X 4
Doctor Visit Charges	1000 X 4
Operation Theatre Charges	...
Operation Fees	...
Surgeon's Charges	...
Assistant Surgeon Charges	...
Hospital Drug Charges	...
Anaesthetist Charges	...
Dressing Charges	...
Delivery Charges	...
Labour Room Charges	...
Nursing Charges	...
Blood Tr. Charges	...
Specialist / Consultant Visit	...
Paediatrician Charges	...
Ultrasonography Charges	...
TOTAL	37,000/-

Received with thanks the amount of Rs. Thirty seven thousand only

PRAJAKTA ASWAR  
MANOMAY

# मनोमय

NURSING HOME, INFERTILITY  
& TEST TUBE BABY CENTRE

Dr. Prajakta Aswar  
M.B.B.S., M.D.

Dr. Shalaka Mamidwar  
M.B.B.S., M.D.

## DISCHARGE CARD

Name : Danashree Sanjog Gathe Age : 29yo

Address : Chandrapur

Reg. No.: \_\_\_\_\_ D.O.A.: 4/10/21 D.O.D.: 7/10/21

Diagnosis : Prn e FD e talis.

Clinical History & Findings : Amm : 9mo

cloup's

PIA 75

cephalic

B>1  
lig leg

Am(+) key,

### ◆◆ NURSING HOME ◆◆

Behind Sindhi Panchayat Bhavan, Ramnagar, Chandrapur - 442 402  
Ph. 07172 - 655485, 9422140863

### ◆◆ TEST-TUBE BABY CENTRE ◆◆

Opp. Dixit Wada, Near Durga Mandir, Jatpura Ward No. 2, Chandrapur  
Mob. 9422909972

Investigations : Hb-12gm/l.

Btle.

Operative Notes : FILSUS.

NAAP Abd opened AFI  
female child extracted by ly. Placenta  
along w rmb expelled out comp. ut  
& Abd closed in layers. No PPV

Baby Notes : Baby 1 Baby 2

Date of Birth : 4/10/21 4/10/21

Time of Birth : 3:14 am 3:15 am.

Sex : female female

APGAR Score : 2-2-9 1-8-9

Treatment : 9,9,10 9,9,10

R

Tab feta-20

Dr. PRAKITA ASHAI  
M.B.B.S., M.D. (Gynec)  
Regd. No. 2000/03/1988



# मनोमय

NURSING HOME, INFERTILITY & TEST-TUBE BABY CENTRE

Dr. Prajakta N. Aswar  
MBBS, MD

Dr. Shalaka H. Marnidwar  
MBBS, MD

Dianstagec

21/10/21

Post-Leds

(150)

26/10

Rx

Tab Koyeub pro

Tab C-white Bd

Tab Engonuae pro

Tab Rabepro D

S/P multiscan

x 150

x 50

NURSING HOME : Behind Sindhi Panchayat Bhavan, Ramnagar, Chandrapur Ph. 07172 - 256122, 9422140863  
TEST-TUBE BABY CENTRE : Opp. Dixit Wada, Near Durga Mandir, Jatpura Ward No. 2, Chandrapur  
Ph. 07172 - 257800 M. 9422909972 Ph. 07172 - 257800, 9422909972  
E-mail - manomaychandrapur@gmail.com

# SHIVJI CHILD CARE CENTRE

Dr. Irshad Ali Shivji

MBBS, DCH, DNB  
( Paediatrician & Neonatologist )

Dr. Preeti Chawhan

MBBS, DCH, PGDAP  
( Paediatrician & Neonatologist )

## DISCHARGE - SUMMARY

REFERRED BY: Dr. Anurag Mishra REG. NO. \_\_\_\_\_  
DT. OF ADMISSION: 05/10/21 01:30pm DT. OF DISCHARGE: 20/10/21 2pm  
NAME (FULL) B/O Dr. Anurag Mishra, Sonam, Chaudhary WDW/BED: NEW  
ADDRESS: at Chaudhary  
WT. ON ADMISSION: 1.8kg  
DIGNOSIS: Preterm & low birth weight  
FOLLOW UP: A full Sunday of every month  
(ADVICE / REFER)

## INVESTIGATIONS

CBC, CRP, S. Bilirubin, S. Creatinine  
Urea & electrolytes

**DR. IRSHAD ALI SHIVJI**  
M. B. B. S., D. C. H. (BOM.)  
D. N. B. (PAEDIATRICS)  
Consulting Paediatrician & Neonatologist  
Reg. No. 073812

## TREATMENT GIVEN

NEW care  
at feeding table  
phototherapy for 2 days  
Breast feeding  
SPAP & temperature monitoring  
fever did oral P  
medicate via IV

**DR. IRSHAD ALI SHIVJI**  
M. B. B. S., D. C. H. (BOM.)  
D. N. B. (PAEDIATRICS)  
Consulting Paediatrician & Neonatologist  
Reg. No. 073812

## TREATMENT ADVISED

at breast table  
full breast

**DR. IRSHAD ALI SHIVJI**  
M. B. B. S., D. C. H. (BOM.)  
D. N. B. (PAEDIATRICS)  
Consulting Paediatrician & Neonatologist  
Reg. No. 073812

# + शिवजी चाईल्ड केअर सेंटर +

इर्शाद अली शिवजी  
बी.बी.एस., डि.सी.एच. (मुंबई) डि.एन.बी.

नर्सिंग होम :-  
जटपूरा गेट जलनगर वार्ड, चंद्रपूर  
फोन नं. २६९८३४, (घरा.) २५३५८९ (घर)

वेळ - सकाळी ९ ते ४  
सायंकाळी ७ ते ९.३०  
रविवार १० ते ३ पर्यंत

बालरोग आणि नवजात शिशु तज्ञ

door No.

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

Final / Weekly

Bill No. 5882

[ 20 ] [ 10 ] [ 20 ] [ 24 ]

Patient's Name & Address

B/O Dhanraj Sanjay Ratne  
At Chardegaon

Date:

D.O.A. 05/10/20

D.O.D. 20/10/20

Room / Bed No.

9 New

		@ Rs.					
1.	Room Charges from 15/10/20 to 20/10/20						
	(1) 1200/day x 6 days			10	800		
2.	Dr.'s Visits / Consultation Dr.	(2) Rs. 150/day x 7 days		4	000		
3.	Nursing Charges @ Rs. 150/day for 6 days			2	100		
4.	Incubator Charges from 05/10/20 to 14/10/20 (2) 3000/day			30	000		
5.	Monitor Charges			4	000		
6.	Operation Theatre Charges						
7.	Anaesthetist's Charges Dr.						
8.	Baby Care Charges						
9.	I. V. Infusion, and / or Blood Transfusions						
10.	Hospital's Drugs, Medicines, etc and / or Drug Administration Charges						
11.	Dressing and / or Plaster Charges						
12.	Miscellaneous At feeding charge			1	400		
13.	Ventilator Charges						
14.	O <sub>2</sub> Charges						
15.	Phototherapy			2	000		
Rs.	Fifty four Thousand Six Hundred		Total				
	DR. IRSHAD ALI SHIVJI M. B. B. S., D. C. H. (BOM.) D. N. B. (PAEDIATRICS) Consulting Paediatrician & Neonatologist Reg. No. 473812	Arrears per Bill No.					
		Total	54	600	00		
		Less Adv. R. No.					
		Due Rs. E. & O.E					
Signature and / or Thumb Impression of Patient							

कार्यालय चंद्रपुर शहर महानगरपालिका, चंद्रपुर

इमांक :- चंडमनपाचं/न.होम.नुतनी./आवि/608/२०२१

दिनांक :- 08/08/२०२१

MNHR Act

आरोप्य विभाग

प्रति,



प्राजक्ता आस्वार  
मनोमय नर्सिंग होम सिंधी  
कुंभनी, रामनगर, चंद्रपुर

विषय :- महाराष्ट्र शुभूषागृह नोंदणी अधिनियम १९४९ कायद्या अंतर्गत नर्सिंग होमच्या पुनर्नोंदणी बाबत.

संदर्भ :- १) नर्सिंग होमच्या पुनर्नोंदणीसाठी मनपाला सदर केलेला अर्ज दि 08/08/२०२१.

२) चंद्रपुर शहर मनपा, चंद्रपुरच्या मा. सर्वसाधारण वि. ३१/ऑगस्ट/२०२१ मधील ठराव क्र. १८ अन्वये.

उपरोक्त संदर्भ क्र. १ च्या अर्जाच्या अनुषंगाने व संदर्भ क्र. २ मध्ये नमुद चंद्रपुर मनपाच्या मा. सर्वसाधारण सभेतील ठरावाच्या अनुषंगाने, आपले नर्सिंग होम नोंदणी क्र. 08/२०११ नावे मनोमय

नर्सिंग होम, चंद्रपुर वास दहा (१०) खाटांकरिता मनपा कडून  
दिनांक ३१ मार्च २०२४ अखेरपर्यंत खालील बाबींच्या अटि-वर्तीच्या अधिन राहून नोंदणीचे पुनर्नोंदणी करण्यात येत आहे.

- त्या नर्सिंग होमचे नुतनीकरण बांधकाम परवानगी व जागा वापर परवानगी अभावी प्रलंबित आहे म्हणून मनपाकडून पुढील दहा (१०) वर्षांपर्यंत मूख्येच दिनांक ३१/०३/२०३१ पासून संप्रत्येक वर्षात वेत आहे. अशा प्रकारच्या मनपा कार्यक्षेत्रातील नर्सिंग होम धारकांनी नियमित तीन वर्षांतून एकदा मनपा कडून नुतनीकरण करून घ्यावे.
- नर्सिंग होम नोंदणी / नुतनीकरण बाबत मार्गदर्शन करण्याकरिता चंद्रपुर मनपाने जासनास पाठविलेल्या पत्राच्या अनुषंगाने, जासनाकडून घेण्यात येणारा धोरणात्मक निर्णय व जासनाच्या मार्गदर्शाच्या अधिन राहून, नुतनीकरण घ्यावे.
- "नवित नर्सिंग होमच्या नोंदणीकरिता प्रचलित UDCPR नुसार Hospital Building Plan मंजूर असजे अनिवार्य करण्यात यावे."
- सदर कायद्याची अंमलबजावणी मनपा चंद्रपुर सन २०१७ पासून करीत असून यापूर्वी या कायद्याची अंमलबजावणी जिल्हा सैन्य चिकीत्सक, जिल्हा रुग्णालय, चंद्रपुर यांचेकडून करण्यात येत होती. त्या अनुषंगाने मनपा कार्यक्षेत्रातील सन २०१७ पुर्वी त्यांचेकडे प्रलंबित असलेले नुतनीकरण व नोंदणी प्रस्तावास मनपाकडून नोंदणी / नुतनीकरण करून देण्यात यावे.

आपणास असेही कळविण्यात येते की, आपल्या हॉस्पिटल / रुग्णालय / नर्सिंग होमची मनपा कडून संपादित तपासणी करण्यात येत असून, तपासणी प्रश्नात आपल्या पुनर्नोंदणी संबंधी प्रस्ताव मध्ये महाराष्ट्र शुभूषागृह नोंदणी अधिनियम १९४९ अंतर्गत नर्सिंग होम कायद्याचे अनुषंगाने काही चुटी आढळल्यास त्यासंबंधी आपणाम पत्राद्वारे कळविण्यात येईल. सदर चुटी संबंधीचे आपणास पत्र प्राप्त होणाने पंधरा (१५) दिवसांच्या आत आपणाकडून नमुद चुटीची पूर्तता करणे आपणास बंधनकारक राहिल.

( मा. आयुक्त, मनपा, यांचे मान्यतेने )

वै. केशव आरोप्य अधिकारी  
चंद्रपुर शहर महानगरपालिका, चंद्रपुर  
चंद्रपुर शहर महानगरपालिका, चंद्रपुर

"Save the girl child, save the nation"

M.O.Letter MNHC

121

# CHANDRAPUR CITY MUNICIPAL CORPORATION CHANDRAPUR



FROM 'C'  
(See Rule 5)

## CERTIFICATE OF REGISTRATION/RENEWAL UNDER SECTION 3 OF THE MAHARASHTRA NURSING HOMES REGISTRATION ACT, 1949

This is to certify that Shri./Smt. Dr. Irshad Ali A. Shivji  
has been registered under the Maharashtra Nursing Homes Registration Act, 1949, in  
respect of shivji hospital & EEC centre, Chandrapur  
situated at Jatpura Gate, Jalnagen Road, Chandrapur  
and has been authorized to carry on the said nursing home.

❖ Registration No. : 033/2011  
❖ Date of Registration/Renewal : 01/04/2021  
❖ Place : Chandrapur  
❖ Beds : 50  
a) Number of Maternity beds : 00  
b) Number of other patient beds : 50  
c) Total number of beds (a+b) : 50  
❖ Date of issue of Certificate : 08/09/2021

This certificate of registration shall be valid upto 31st March 2024.



R. IRSHAD ALI  
M. B. B. (S) D. C. H. (BOM.)  
D. N. B. (PAEDIATRICS)

Medical Officer of Health  
Chandrapur City Municipal Corporation,  
Chandrapur

Note : This Certificate shall be displayed in conspicuous place in the Nursing Home.

Reg. No. 073812

To  
The Director  
Saibalaji Group of Institute  
Pune. (Hinjawadi IT Park)

Subject :- Application requesting Maternity Leave

Respected Sir/Mam,

I, Prof. Mamta Pimpalkar,  
Assistant Professor SBIIMS, wish to request  
you to grant me the maternity leave  
as per provisions starting from Monday  
the 10 Aug 2020.

Kindly do the needful.

Thanking you,

M. Pimpalkar

your sincerely

Prof. Mamta Pimpalkar.





## Trust sponsored Staff picnic

### Institute Staff Picnic Report: Trust-Sponsored Staff Outing to Matheran

**Date:** June 11th, 2023

**Location:** Matheran, Maharashtra, India

**Sponsor:** SaiBalaji Education Society

**Participants:** SaiBalaji International Institute of Management Sciences (SBIIMS) Staff

#### Introduction:

This report details the staff picnic organized by SBIIMS for its faculty and staff, generously sponsored by SaiBalaji Education Society. The 1-day outing aimed to promote team building, strengthen relationships, and provide a refreshing break from the daily routine.

#### A Day in the Hills:

On June 11th, enthusiastic staff members departed for Matheran, a picturesque hill station known for its car-free environment and stunning vistas. Transportation was arranged for a comfortable and hassle-free journey.

Upon arrival, the group checked into their pre-booked accommodations. The day was dedicated to fun and games, fostering a sense of camaraderie and collaboration among colleagues. Organizers arranged a variety of games, catering to different interests and abilities. Laughter filled the air as participants competed in friendly matches, strengthening bonds and creating lasting memories.

#### A Delicious Break and Cultural Immersion:

A delightful lunch buffet was served in the afternoon, providing an opportunity for informal conversations and relaxation. The organizers also arranged for a cultural program showcasing local performances, adding a touch of regional flair to the event.

#### Farewell and Return:

The evening saw a celebratory farewell dinner, where staff members expressed their appreciation for the opportunity to unwind and connect with colleagues in a relaxed setting. Transportation back to the institute was arranged for all participants.



GPS Map Camera



Matheran, Maharashtra, India  
X7WC+HXW, Matheran, Maharashtra  
410102, India  
Lat 18.997447°  
Long 73.272986°  
11/06/23 11:14 AM GMT +05:30



GPS Map Camera



Matheran, Maharashtra, India  
X7WC+HXW, Matheran, Maharashtra  
410102, India  
Lat 18.997451°  
Long 73.273001°  
11/06/23 11:57 AM GMT +05:30



GPS Map Camera



Matheran, Maharashtra, India  
X7WC+HXW, Matheran, Maharashtra  
410102, India  
Lat 18.99726°  
Long 73.273052°  
11/06/23 11:39 AM GMT +05:30

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Sai Balaji Education Society's  
Sai Balaji International Institute  
of Management Sciences  
Pune



Dr. L.K. Tripathy  
Director





## Trust sponsored Staff picnic

**Date:** October 19th 2022

**Location:** Alibaug, Maharashtra, India

**Sponsor:** SaiBalaji Education Society

**Participants:** SaiBalaji International Institute of Management Sciences (SBIIMS) Staff

### **Introduction:**

This report details the staff picnic organized by SBIIMS for its faculty and staff, generously sponsored by SaiBalaji Education Society. The retreat aimed to promote team building, strengthen relationships, and provide a refreshing break from the daily routine.

### **A Day on the Coast:**

On 19<sup>th</sup> October, enthusiastic staff members embarked on a journey to Alibaug, a beautiful coastal town known for its serene beaches and stunning landscapes. Transportation was arranged for a comfortable trip.

Upon arrival, the group checked into their pre-booked accommodations. The day was dedicated to leisure activities, allowing participants to unwind and enjoy the scenic beauty of Alibaug. Some opted for relaxation on the beach, soaking up the sun and the calming sound of waves. Others explored the local markets or participated in water sports activities.

### **An Evening of Celebration:**

A delightful dinner buffet was served in the evening, fostering informal conversations and bonding among colleagues. The organizers might have considered additional activities like a bonfire with games or a cultural program to further enhance the celebratory atmosphere and create lasting memories.

### **Return to SBIIMS:**

The following day, after a relaxing breakfast, the staff members departed for the institute.



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## Uniform for Teaching and Non-teaching staff



  
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Director



## 19th Foundation Day Celebration

### Report on Sai Balaji Group of Institutes' 19th Foundation Day Celebration

#### Introduction:

This report details the celebratory events held by Sai Balaji Group of Institutes (SBES) on the occasion of its 19th Foundation Day. The institute commemorated its establishment with a variety of activities and programs, fostering a sense of community and pride among students, faculty, and staff.

#### A Legacy of Excellence:

The 19th Foundation Day celebration served as a significant milestone for SBES. It was an opportunity to reflect on the institute's remarkable journey over the past 19 years, highlighting its achievements and contributions to the field of management education.

#### SBES Founder President's Vision:

Professor Mundada's unwavering confidence and dedication have been instrumental in shaping SBES's success. Throughout the years, his commitment has extended not only to nurturing the full potential of each student but also to empowering the faculty to provide a world-class educational experience. The 19 years of SBES's glory stand as a testament to Professor Mundada's vision and tireless efforts.

#### A Day of Celebration and Recognition:

The Foundation Day celebrations likely included a range of engaging activities:

##### Cultural Performances:

The event might have featured vibrant cultural performances showcasing India's rich heritage through dance, music, or drama. These performances could have fostered a sense of community and cultural appreciation among the institute's diverse student body.

##### Awards Ceremony:

An awards ceremony might have been held to recognize and celebrate the achievements of outstanding staff and faculty members. This recognition would serve as a motivating factor for the entire SBES community.

##### Speeches and Presentations:

The celebration could have incorporated speeches by esteemed guests or alumni, along with presentations highlighting SBES's milestones and future aspirations.



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## Health check-up

**Date:** July 14, 2023

**Introduction:** Having a health check-up is a very essential initiative for any institute. Keeping a track of our health is a good habit which every individual should follow. The most important asset of any individual is health.

**Event overview:** The annual health check up was held in Sai Balaji International Institute of Management sciences on 14<sup>th</sup> of July 2023. The event promoted all the faculty members to have a health check up and be updated about their health condition.

**Activities:** Physical Examination: A comprehensive physical assessment conducted by a healthcare professional, including measurements of height, weight, blood pressure, heart rate, and general examination of organs and body systems.

Imaging Studies: X-rays, ultrasounds, CT scans, or MRIs to evaluate internal organs, bones, and tissues for abnormalities or signs of diseases.

Screening Tests: Specific screenings such as mammograms for breast cancer, Pap smears for cervical cancer, colonoscopies for colorectal cancer, and other age or risk-specific screenings.

Health Risk Assessments: Surveys or questionnaires to evaluate lifestyle factors, family history, stress levels, and mental health to identify potential risk factors.

Consultations and Counseling: Discussions with healthcare professionals for personalized health advice, diet and nutrition counseling, lifestyle modifications, and recommendations for further screenings or follow-ups.

Eye and Dental Examinations: Evaluations by optometrists or dentists to assess vision, eye health, and dental hygiene.

**Feedback:** The overall participation was great with all the members participating with full willingness and they all were concerned and curious about the checkup. They felt it is an essential workshop which should be held more frequently.

**Conclusion:** In conclusion, health check-up activities are pivotal for maintaining overall well-being and preventing potential health issues. These comprehensive evaluations, encompassing various tests and assessments, serve as proactive measures in safeguarding one's health.



  
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SBIIMS PUNE



Affiliated to Savitribai Phule Pune University  
Approved by AICTE, Ministry of HRD, Govt. of India

## INTERNATIONAL YOGA DAY 21<sup>st</sup> JUNE 2022

**Institute has organized the International Yoga Day on 21<sup>st</sup> June 2022**



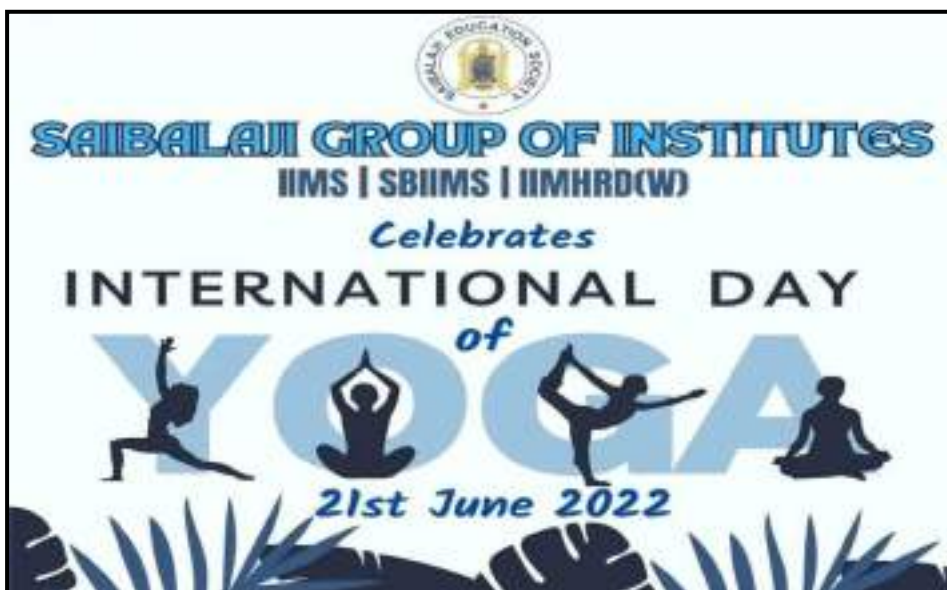
International Yoga Day, observed annually on June 21st, is a global celebration that highlights the profound impact of yoga on physical, mental, and spiritual well-being. Established by the United Nations in 2014, this day aims to raise awareness about the numerous benefits of practicing yoga and promote its integration into daily life. As the world unites in the spirit of holistic wellness, International Yoga Day serves as a reminder of the ancient practice's universal appeal and its potential to foster harmony among diverse communities.

As International Yoga Day completes another year of celebration, it stands as a testament to the enduring appeal of this ancient practice. The global recognition and participation in this day underscore the universal desire for well-being, unity, and balance. By embracing the principles of yoga, individuals and communities can contribute to creating a healthier, more harmonious world. As we reflect on the significance of International Yoga Day, let us continue to explore the transformative potential of yoga in fostering personal and collective well-being.



Institute has organized the International Yoga Day on 21<sup>st</sup> June 2022 as per the directions given by Government of India and Maharashtra as well as by the statutory bodies governing the Institute.

All the Staff, Students including stakeholders celebrated the Yoga day by practicing the YOGA in Institute campus.



For the celebration of international day of yoga, we had also posted one e-banner on our social media platform on 20th June 2022 to create the conducive environment for yoga participation from all the stakeholders.

  
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## Chatrapati Shivaji Maharaj Jayanti Celebration

### Report on Chatrapati Shivaji Maharaj Jayanti Celebration at SaiBalaji International Institute of Management Sciences (SBIIMS)

**Date:** 19<sup>th</sup> February, 2023

#### **Introduction:**

This report details the celebration of Chatrapati Shivaji Maharaj Jayanti organized by SaiBalaji International Institute of Management Sciences (SBIIMS) on February 19th, 2023. Students and faculty members came together to commemorate the birth anniversary of Chhatrapati Shivaji Maharaj, the revered Maratha warrior king and empire founder, with great joy and respect.

#### **A Day of Remembrance and Celebration:**

The institute observed Chatrapati Shivaji Maharaj Jayanti with a spirit of patriotism and reverence. The celebration commenced with a welcome address by Founder President of SaiBalaji Education Prof. Manish R. Mundada Sir, who highlighted Chhatrapati Shivaji Maharaj's significant contributions to Indian history. The address emphasized his remarkable leadership, military strategies, and strong principles of governance.

#### **Educational and Cultural Program:**

Following the welcome address, the event featured a program designed to educate and inspire the SBIIMS community:

- **Speeches or Presentations:** To delve deeper into Chhatrapati Shivaji Maharaj's legacy, student representatives or faculty members may have delivered informative speeches or presentations. These presentations could have focused on specific aspects like his life and times, his renowned military tactics, or his effective administrative policies.
- **Cultural Performances:** The program likely incorporated vibrant cultural performances to add a celebratory spirit to the occasion. These performances might have included traditional Maharashtrian dances like Lavani, Lezim and Dhol Pathak that commemorated Shivaji Maharaj's valor.





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## VISTA 2K23

**Date:** February 19<sup>th</sup> – 25<sup>th</sup> February 2023 **Organizer:**

**Sai Balaji Education Society**

**Introduction:** It is with great pleasure and a sense of nostalgia that we present this report, capturing the essence and highlights of the recently concluded VISTA 2K23 organized by Sai Balaji Education Society. The campus came alive with an unparalleled vibrancy as students, faculty, and guests united to make the event a resounding success.

VISTA 2K23 was not just an event; it was a testament to the creativity, talent, and collaborative spirit that defines our college community. The fest served as a platform for students to showcase their skills, forge new friendships, and create lasting memories.

The organizing committee worked tirelessly to curate a diverse range of activities and events, ensuring there was something for everyone. Amazing cultural event along with exciting sports event also very informative academic events

We had numerous Cultural Events which included:

1. Rangoli
2. Dance
3. Singing
4. Car Show
5. Shayrana (Shayri)
6. Laughter dose (Stand up comedy)
7. Photography
8. Rap & Beat boxing
9. Nukkad Natak
10. Mono Acting
11. Live Band Performance
12. Mime Act
13. Dhol Pathak competition
14. Reel making competition

# Rangoli

Venue:- SBIIMS Campus

Coordinators

Winner:

Runner-Up:



Rangoli the art that originated from the subcontinent of India, represents happiness, positivity, and liveliness. The event brought us together. The art of rangoli is not only limited to traditional ceremonies, and it was seen at the competition.

The Rangoli Competition held on 20th February 2024, was a lively festival of creativity, innovativeness; and exhibiting unique thoughts of different participants.

The participants gave their unique thoughts and ideas to incorporate the theme “Colours of India”. The designs varied in complexity and style, with some opting for intricate patterns and geometrical shapes, flowers, auspicious symbols, patriarchy, and cultural diversity. They also summarised their thoughts in a single tagline.

Around 10 Participants participated in the competition. The participants despite the competition showed great sportsmanship by encouraging other participants and sharing the colours with those in need. The participants, volunteers, and faculty coordinators created a very cheerful and harmonious environment.



After careful deliberation, the judge selected the winners, acknowledging their exceptional talent and artistic vision. The participants were judged based on the evaluation criteria. The participant who checked all the boxes of creativity, colour combination, detail and clarity, theme incorporation, etc. was declared as the winner and followed by the runner-up.

The Rangoli competition celebrated creative articulation. It served as a platform for participants to showcase their talents, connect with like-minded individuals, and celebrate the beauty of Rangoli art. The occasion had an enduring effect, moving inventiveness and advancing social legacy among members and participants.

# Dance



**Venue** : SBIIMS Campus

**Date & Time**:

**Coordinator**:

**Jury Member** –

**Winners :**

- **Male Category (Solo)**

**Winner :-**

**Runner-Up**

**2<sup>nd</sup> Runner-Up :- Female Category(Solo)**

**Winner :-**

**Runner-Up**

- **Duet Performances :-**

**Winner :-**

**Runner-Up :- Group Performances :-**

**Winner :-**



**Runner-Up :-**

**2<sup>nd</sup> Runner -UP :-**

The Saibalaji Education Society organized a vibrant dance event on February 21,2024, that brought together over 60 enthusiastic participants. The event showcased diverse and compelling dance performances, demonstrating the rich talents of the students involved. The participants exhibited their skills in various dance forms, creating an engaging and entertaining atmosphere.

After all the captivating performances, a panel of judges carefully evaluated each act, considering factors such as choreography, technique, and artistic expression. The competition was fierce, with each participant putting forth their best effort. Following a thorough evaluation, the judges selected the deserving winners, who were then announced and celebrated for their outstanding performances.

The event was not just about competition; it was a platform for students to express themselves creatively, showcase their passion for dance, and foster a sense of community within the Saibalaji Education Society. The participants not only gained valuable performance experience but also had the opportunity to enjoy the camaraderie and support of their peers.

Overall, the dance event organized by the Saibalaji Education Society on was a resounding success, filled with energy, talent, and excitement. The winners were recognized and rewarded for their exceptional performances, and all participants contributed to making the event a memorable and enjoyable experience for everyone involved.



**Venue** : SBES Ground

**Date & Time** :

**Coordinator** :

**Winners** :



## Singing



The Singing Competition organized by SBES as part of VISTA 2K23 aimed to provide a platform for aspiring vocalists and musicians to showcase their talent and passion for music. The event attracted participants from diverse backgrounds, each eager to demonstrate their vocal prowess and musical abilities.

The competition kicked off with an opening ceremony, during which the organizing committee welcomed participants and audience members with enthusiasm and warmth. The atmosphere was electric as contestants prepared to take the stage and mesmerize the audience with their vocal performances.

The competition featured multiple rounds, allowing participants to showcase their versatility across various musical genres, including pop, rock, classical, and folk. Each performance was a testament to the participants' dedication and hard work, as they delivered soulful renditions and captivating melodies.



## **Mono Act**

**Venue:** SBIIMS Campus

**Date:**

**Time :-**

**Jury:**

**Coordinator:**

**WINNER'S 1**

**2 nd**

**3 rd:-**



A mono act, also known as a monologue or one-person show, is a theatrical performance where a single actor portrays all characters and delivers all dialogue. It's a dynamic form of storytelling where the performer embodies multiple roles, often through changes in voice, posture, and facial expressions

Mono acts can range from dramatic soliloquies to comedic routines, offering a platform for actors to showcase their versatility and skill. These performances may explore various themes, emotions, and narratives, engaging audiences through the power of a solo performer's interpretation and expression, creating an intimate and immersive theatrical experience.

Total 8 participated in the competition. The participants showed great talent and acting skills in the competition

The participants, volunteers and faculty coordinator created a very cheerful and harmonious atmosphere. After careful deliberation the judges selected the winners, acknowledging their exceptional skills and talent. The participants were judged based on the evaluation criteria.

The participants who checked all the boxes of creativity, Innovation, Expression, Dialogue delivery and concept. Was declared the top 3 Winner.



## Shayrana

Venue :- SBIIMS Campus

Date :-

Time :-

Coordinator names :-

Winners name :- Runner

up



The Shayari Competition organized by SBES as part of VISTA 2K23 aimed to provide a platform for budding poets and enthusiasts to showcase their talent in the art of Urdu poetry. The event attracted a diverse group of participants, each eager to share their creativity and passion for Shayari.

The Shayarana Event unfolded as a mesmerizing blend of poetic recitations, musical performances, and engaging discussions, creating an immersive experience for attendees immersed in the world of Shayari.

In this event various different college students took part like D.Y patil Institute of management, Indira college and many more.

Through its celebration of linguistic and cultural heritage, the event succeeded in fostering a deeper appreciation for the art of Shayari and its power to inspire, unite, and enrich lives.

The Shayari Competition organized by SBES at VISTA 2K23 was a resounding success, showcasing the rich cultural heritage and artistic talent of the participants. The event served as a platform for creative expression and dialogue, fostering a sense of camaraderie and appreciation for the art of Shayari. SBES looks forward to hosting similar events in the future, continuing to celebrate the beauty of Urdu poetry and literature.



# Love Letter Writing

Venue- SBIIMS Campus

Date and time-

Coordinators-

Winner -1st-

Runner up -



Writing a love letter involves expressing your feelings in a heartfelt and endearing manner. Start by addressing your partner with a sweet nickname or affectionate term. Then, express your love and admiration for them, mentioning specific qualities or moments you adore. Share memories or inside jokes to create intimacy. Be sincere and vulnerable, letting your emotions flow naturally onto the paper. End the letter with a promise, a declaration of love, or a hopeful vision for the future. And don't forget to sprinkle in some cute doodles or stickers for an extra touch of sweetness.

Expressing love for loved ones, whether they're family, friends, or pets, can evoke a range of emotions from warmth and joy to a sense of deep connection and fulfillment. It often brings about a feeling of closeness and strengthens the bond between individuals. It's a beautiful way to show appreciation and care for those who hold a special place in our hearts.

Expressing love through shayari is like painting with words, creating a masterpiece that speaks to the heart. Songs, with their melody and lyrics, weave emotions into a beautiful tapestry of love. Other ways participants expressed their love include heartfelt gestures, thoughtful gifts, and simply being there for each other through thick and thin.



## **Nukkad Natak**

**Venue** : SBES Basketball Ground

**Date & Time** :

**Coordinator** :

**Winners** : 1st

Dhanshei Talokae SBIIMS, Umesh Malpure SBIIMS, Yashaswini Kulkarni IIMHRD, Tanvi Vishwakarma IIMHRD, Saumya Hande IIMHRD, Parul Tambi IIMHRD, Tejashree Pate IIMHRD , Ankit Shewalkar SBIIMS, Shrihari Dagwar SBIIMS, Satyarth Singh SBIIMS, Soham Bagad SBIIMS



This event was a vibrant and dynamic platform for students to showcase their theatrical skills while addressing pertinent social issues. Through the art of street theater, participants brought to light various societal concerns, engaging the audience in thought-provoking narratives.

Numerous colleges from the region participated, bringing together a diverse array of talent and perspectives. Each participating team comprised enthusiastic

students passionate about using theater as a medium for social change. The teams demonstrated their creativity, dedication, and teamwork through their performances.

The "Nukkad Natak" event was a resounding success, fostering creativity, awareness, and social responsibility among the student community. Through the transformative power of theater, participants not only entertained but also inspired change, reaffirming the college's commitment to holistic education and community engagement. The event concluded on a high note, leaving a lasting impression on all those who attended.



# **Skit**

**Venue** : SBIIMS Paras Hall

**Date & Time**

**Coordinator**

**Winners** : 1st )

**Runner up:-**

VISTA 2K23, Organize by SaiBalaji Education Society ,set the stage on fire with its highly anticipated Skit Competition. The event, which unfolded with a flurry of creativity, wit, and laughter, showcased the immense talent and flair for humor among the participating teams. From rib-tickling anecdotes to thought-provoking narratives, the skits presented a kaleidoscope of emotions, leaving the audience enthralled and entertained.

The Skit Competition witnessed an eclectic mix of themes, ranging from societal issues to contemporary pop culture references. Each team brought their unique perspective to the stage, addressing themes such as gender equality, environmental conservation, mental health awareness, and the trials of modern-day relationships. The diversity of themes not only captivated the audience but also sparked meaningful conversations, echoing the essence of artistic expression.

The Skit Competition provided a platform for budding actors, writers, and directors to showcase their talent and passion for the performing arts. Each team demonstrated remarkable teamwork and camaraderie, exemplifying the spirit of collaboration and dedication. The performances were a testament to the participants' commitment to excellence, as they poured their heart and soul into bringing their characters to life on stage.

The Skit Competition at VISTA 2K23 was a resounding success, thanks to the unwavering enthusiasm and dedication of all involved. It not only provided a platform for creative expression but also fostered a sense of community and camaraderie among participants and spectators alike. As the curtains drew to a close on this unforgettable event, the memories of laughter, camaraderie, and artistic brilliance continued to linger, serving as a testament to the transformative power of the performing arts.

# **Photography**

**Venue-** SBIIMS Campus

**Date-**

**Time-**

**Coordinator –**

**Winner:-**

**Runner up:-)**

**Jury members:-**



The photography competition aimed to celebrate creativity and artistic expression in the field of photography. Participants were encouraged to submit their best work.

Winners were selected based on originality, composition and overall impact of photograph.

The competition provided an opportunity for photographers to receive feedback from experts.

overall, there was positive feedback regarding the organisation and execution of the competition.

VISTA 2K23, it's likely an opportunity for photographers to showcase their work, compete for prizes, or simply share their passion for photography with others attending the event.

Photography is the art, science, and practice of capturing images using light. It involves using a camera to create visual representations of subjects, scenes, or objects.

Photographs can convey emotions, tell stories, document events, and preserve memories.



# Live Band Performance

Venue - SBES Ground

Date-

Time -

War of war of band jury

-

Coordinator

Winner -

Runner up -



Sai Balaji Group of Institutes set the stage ablaze with its electrifying Live Band Performance Competition, held as part of the prestigious VISTA 2K23 event. This musical extravaganza witnessed an array of talented bands showcasing their prowess, captivating the audience with their harmonious melodies and infectious rhythms. From soulful ballads to energetic rock anthems, the competition celebrated the diversity and dynamism of live music, leaving a lasting impression on all who attended.

The Live Band Performance Competition showcased a diverse range of musical genres and styles, catering to every taste and preference. Bands mesmerized the audience with their renditions of classic rock, pop, jazz, blues, fusion, and even experimental compositions. Each performance was a testament

to the musicians' versatility and passion for their craft, as they effortlessly navigated through complex arrangements and improvisations, creating an immersive sonic experience for the audience.

In addition to musical talent, stage presence played a pivotal role in captivating the audience and commanding their attention. Bands exuded charisma and confidence as they interacted with the crowd, creating a vibrant atmosphere filled with energy and excitement. Dynamic stage lighting, captivating visuals, and engaging choreography further enhanced the immersive experience, transporting the audience into a world of rhythm and melody.

The Live Band Performance Competition at VISTA 2K23 was a testament to the transformative power of music in bringing people together and fostering a sense of community and camaraderie. It provided a platform for aspiring musicians to showcase their talent and passion, inspiring and entertaining all who attended.



# Rap & Beat Boxing

**Venue** : SBIIMS Campus

**Date & Time** :

**Coordinator** :

**Winners** :

**Runner Up-** )



Sai Balaji Education Society reverberated with the pulsating beats and lyrical prowess as it hosted a spectacular Rap and Beatboxing event, showcasing the raw talent and creativity of its participants. The event, held as part of the society's cultural extravaganza, brought together aspiring rappers and beatboxers who mesmerized the audience with their rhythmic



rhymes and vocal percussions, leaving an indelible mark on the hearts and minds of all who attended.

Rap and beatboxing are forms of musical expression deeply rooted in rhythm and wordplay. Rap involves delivering spoken-word lyrics rhythmically over a beat, while beatboxing is creating percussive sounds using one's mouth, lips, tongue, and voice. Both are integral parts of hip-hop culture and often go hand in hand to create dynamic performances.

This competition was held on 22nd of February where students show their talents. Some students from other colleges also come to participate and our audience makes the competition more cheerful.

The Rap and Beatboxing event organized by Sai Balaji Education Society was a celebration of the vibrant and dynamic hip-hop culture, showcasing the talent and creativity of its participants. It provided a platform for aspiring artists to express themselves and connect with like-minded individuals, fostering a sense of community and camaraderie. As the echoes of rhythmic rhymes and beatboxing brilliance faded into the night, the memories of this unforgettable event continued to resonate, serving as a testament to the transformative power of hip-hop as an art form and a vehicle for self-expression.

# **Mime Act**

**Venue** : Paras Hall SBIIMS Campus

**Date & Time** :

**Coordinator** :

**Winners** : )

**Runner Up:**

The spotlight dims, and a hush falls over the audience as the curtains draw back to reveal a stage transformed into a canvas of silence. In this realm of unspoken expression, the art of mime comes to life, weaving a tale without uttering a single word. The Mime Act at VISTA 2K23 unfolds, promising an experience that transcends language and speaks directly to the heart.

The performers, adorned in stark monochrome, move with deliberate precision, their bodies becoming vessels of emotion and storytelling. The art of mime, with its emphasis on gesture, expression, and movement, invites the audience into a world where every action is a brushstroke painting a vivid picture of narratives untold.

Through graceful movements and facial expressions, the mime artists convey a spectrum of emotions – joy, sorrow, love, and laughter – with an eloquence that defies verbal language. The absence of words becomes a canvas onto which the audience projects their interpretations, creating a shared experience that unites performers and spectators in a silent dialogue.

The Mime Act at VISTA 2K23 is a celebration of the power of nonverbal communication. Each performer becomes a storyteller, unraveling narratives that transcend linguistic boundaries. From the simplest of gestures to intricate choreography, every movement carries weight, telling a tale that resonates universally.

As the final poses freeze on stage, the applause erupts, a testament to the emotional journey experienced in silence. The Mime Act leaves an indelible mark on the festival, reminding us of the profound impact that art can have when words fall short.

In this symphony of silence, the Mime Act at VISTA 2K23 is not merely a performance; it is an invitation to connect, to feel, and to appreciate the beauty of expression that transcends the limitations of language.



## **Prize Distribution**

VISTA 2K23 ended on beautiful note with student awards and happy smiling faces. On the eve of VISTA 2K23, Live band performances, singing & dancing performances took place. In the presence of esteemed guests, participants excelled in all the aspects.

We would like to congratulate all the Coordinators, Volunteers, participants and award winners for their participation and achievements!

Ms. VISTA :

Mr. VISTA :

We would also like to express our sincere gratitude towards Prof. Manish R Mundada Sir, Founder President SaiBalaji Education Society, Executive director, IIMS, Pune and Prof. Nirupama Shrinivasan Mundada Madam, Founder Secretary SaiBalaji Education Society for this Golden opportunity and guidance.

Without the help of heads of the institutes, faculties, non teaching and support staff this event wouldn't have been possible and we are grateful for their trust and support.

Sharing with you a window to peek into this fabulous prize distribution!









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Dr. L.K. Tripathy  
Director



## International Women's Day

### International Women's Day celebrated at SBES SBIIMS on 8th March 2022

Program started with Felicitation of Founder Secretary Prof. Nirupama M.Mundada and Guests  
Followed by Felicitation & award ceremony of women achievers for the outstanding contribution in their respective fields.

#### Award Ceremony: Women Achievers RanRagini 2023

**Guests of honor** - 1. Ms. Meenakshi Jhamtani, Executive Director- Jhamtani Group Pune 2. Ms. Nishitta Ghaatge, Managing Director - Sun Tourism International Pvt. Ltd. Pune 3. Ms. Kanika Chopra, City Head - Pune, Zomato 4. Ms. Sarita Purkam, Team Leader - Channel, Hindustan CocaCola Beverages Pvt. Ltd., Pune 5. Ms. Neha Kandalgaonkar, Director - BD, Sunilam Agrotech Pvt. Ltd., Pune 6. Ms. Saugata Sarker, Owner - Qigroup - A Multibrand Luxury & Lifestyle Platform 7. Ms. Nancy Katyal, Founder & CEO - "The Perfect You", Published Author, Executive Presence & Leadership Coach, Pune 8. Ms. Pranali Vichare, CEO, Talkd Inc. India Pvt. Ltd. 9. Ms. Sherin Mathew, Founder - The UpSkill Studio, Pune 10. Ms. Cleopatra D'Cuhna, Lead - Branding and Corporate Communications, FM Logistic India Pune. 11. Mrs Primla Hingorani 12. Mrs. Lata Bhise 13. Dr. Saniya Siddiqui 14. Ms. Jutika Mahanta 15. Ms. Yashoda Sanjay Gaikwade 16. Akanksha Sambhaji Jadhav 17. Ms. Monica Shah 18. Ms. Ranu Thakur 19. Surashri Kulthe 20. Preeti Roongta 21. Mrs. Bharti Vinode

**Cultural Event:** Student performances like Dance Singing etc

**Panel Discussion** on "Work Life Balance"

**Session** on "How to be Financially Independent"- Exploring Investment Opportunities for Women

**Awareness program** on Women Health

All heads of departments as well as students were part of the program.

Vote of thanks given by the student coordinator.





# SAIBALAJI GROUP OF INSTITUTES

IIMS | SRIIMS | IIMHRD (W)

## Celebrates International Women's Day

*Salutes  
All our Women Faculty Colleagues*



Dr. Akanksha Taunk



Prof. Ekta Joshi



Prof. Vini Lalwani



Dr. Tripti Sahu



Dr. Lokesh Arora



Dr. Sangeta Rajput



Dr. Nidhi Tejpal



Dr. Priyanka Rotey



Prof. Neha Agarwal



Prof. Jyoti Shukla



Prof. Preeti Dewangan



Dr. Sumedha Kulkarni



Prof. Pooja Karshkar



Prof. Sonali Khatrisagar



Prof. Shradha Bhande



Prof. Kishwarya Namman

~~Director  
Sai Balaji Education Society's  
Sai Balaji International Institute  
of Management Sciences  
Pune~~



Dr. L.K. Tripathy  
Director



## Employee Welfare Measures and Benefits

### Work-Life Balance:

- **Flexible Timing in Special Cases:** This offers some flexibility in work hours for specific situations, allowing employees to manage personal commitments without compromising work.
- **Time Relaxation for Public Transport Commuters:** This acknowledges the challenges of commuting by public transport and allows employees additional time to arrive at work due to potential delays.
- **Special Short Leave Provision:** This allows employees to take leave for emergencies or personal reasons beyond their regular entitlement. It demonstrates the company's understanding of unexpected situations that may arise.

### Financial Security:

- **Group Insurance Policy:** This plan offers life, accident, or health insurance coverage to employees at a group rate, often at a lower cost than individual plans. This provides financial protection for employees and their families in case of unforeseen events.
- **Provident Fund Contribution:** This benefit helps employees save for retirement by setting aside a portion of their salary into a government-backed fund. The employer typically contributes a matching amount, providing a significant long-term benefit.

### Employee Recognition and Engagement:

- **Festival Celebrations:** Celebrating festivals creates a sense of community and cultural appreciation among employees.
- **Women's Day Celebration & Felicitation:** This event recognizes and celebrates the achievements of women in the workplace, fostering a culture of diversity and inclusion.
- **Birthday Celebrations:** Organizing birthday celebrations demonstrates appreciation for employees and creates a more positive and friendly work environment.
- **Short Leave on Birthdays:** This allows employees a paid day off on their birthday, offering them a chance to celebrate and recharge.
- **Employee Welcome and Farewell:** The Recreational Committee organizing these events helps new employees feel welcome and integrated, while also acknowledging departing employees' contributions.

## Additional Support:

- **Uniform for Teaching and Non-Teaching Staff:** Providing uniforms can reduce clothing expenses for employees and promote a professional appearance. **Maternity Leave:** Offering paid maternity leave allows new mothers time to recover and care for their newborns, promoting work-life balance and supporting families.
- **Provision of Canteen and Mess on Campus:** This benefit provides employees with convenient and potentially subsidized meal options, saving them time and money.
- **Recognition for Special Achievements:** Acknowledging and rewarding employees for exceptional work motivates them and reinforces desired behaviors. This can include public recognition, awards, or bonuses.

  
Director  
Sai Balaji Education Society's  
Sai Balaji International Institute  
of Management Sciences  
Pune



Dr. L.K. Tripathy  
Director



**I-Card**



**Drinking Water**



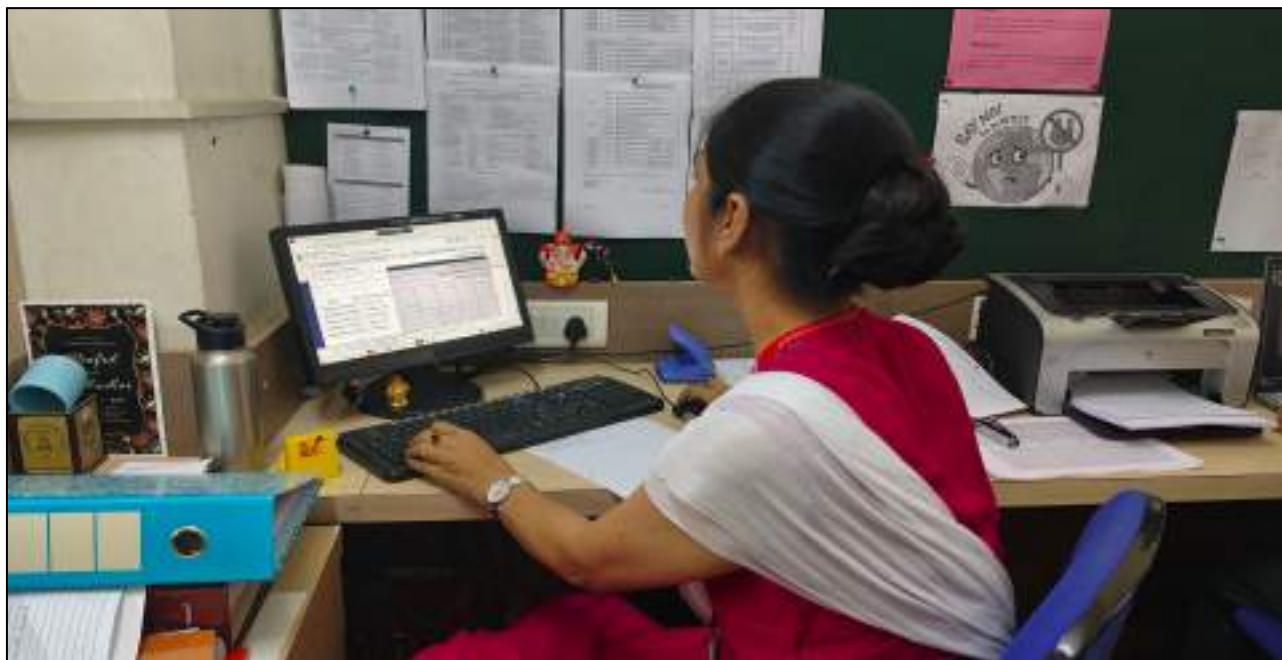
## Printer



## Printing/Xerox/Scanner Machine



## Computer with internet connection



## Mess canteen with sitting arrangement



## Library/Books/Reading Hall



## Parking



## Gym



## Security

