

Group Activ Secure - Policy Schedule

Policy No. 62-19-00140-00-00

Policy Issuing Office	Aditya Birla Health Insurance Co. Limited, 7th Floor, Modi Business Centre, Kasarvadavali, Thane (W) – 400615	Policy Servicing Office	Aditya Birla Health Insurance Co. Limited, 7th Floor, Modi Business Centre, Kasarvadavali, Thane (W) – 400615
Intermediary Name	ADITYA BIRLA INSURANCE BROKERS LIMITED	Intermediary Code	4101420
Intermediary Contact Details	-	Intermediary E-mail ID	-
Toll Free Number	18002707000		

I. Details of Policyholder

Policyholder Name	M/s BIRLA INSTITUTE OF TECHNOLOGY AND SCIENCE
Policyholder Address	BITS PILANI CAMPUS,, VIDYA VIHAR, PILANI,, JHUNJHUNU, BUHANA, JHUJHUNU, RAJASTHAN - 333031
Contact Number	
Email ID	
Policyholder GSTIN	08AAATB2599R1ZZ

II . Policy Details

Product Name	Group Activ Secure		
Plan Name	Group Activ Secure- (Personal Accident)		
Product Code	62		
Policy Number	62-19-00140-00-00	Policy Issue Date & Time	29/02/2020 10:45
Start date & Time of Policy	From 00:00 Hrs on 15/09/2019	Expiry Date & Time of Policy	To Midnight 23:59 Hrs on 14/09/2020
Group Type	Non Employer-Employee relationship	Policy Tenure	1 Year(s)
Policy category	New Business		
Premium Payment Frequency	Annual		

III. Coverage Details

Group Activ Secure-Personal Accident	Capital Sum Insured/ Sum Insured (Rs.)
Section A: Basic Covers - Group1	
Accidental Death (AD)	
Permanent Total Disablement (PTD)	
Permanent Partial Disablement (PPD)	
Section B: Optional Covers	
Medical Expenses	The maximum amount payable shall be 40% of the valid personal Accident claim amount or 20% of the relevant sum insured or actual claims whichever is less subject to maximum of Rs 500,000/-
Funeral Expenses	Max upto Rs 5,000/-
Repatriation of Mortal remains	Max up to Rs 2,500/-
Education Fund for children	Max upto Rs 3,00,000/- per child (Restricted to 2 child)

Group Activ Secure-Personal Accident	Capital Sum Insured/ Sum Insured (Rs.)
Section A: Basic Covers - Group2	
Accidental Death (AD)	
Permanent Total Disablement (PTD)	
Permanent Partial Disablement (PPD)	
Section B: Optional Covers	
Medical Expenses	The maximum amount payable shall be 40% of the valid personal Accident claim amount or 20% of the relevant sum insured or actual claims whichever is less subject to maximum of Rs 500,000/-
Funeral Expenses	Max upto Rs 5,000/-
Repatriation of Mortal remains	Max up to Rs 2,500/-
Education Fund for children	Max upto Rs 3,00,000/- per child (Restricted to 2 child)

Special Conditions(if any)

* Accidental death and disability due to terrorism is covered. * Description of Insured – Only students, one earning parents (Single parents) as per school register of the educational institute are covered.

IV. Co-Insurance Details

Co-Insurance Details	
Leader (Name of Insurance Company)	Not Applicable
Follower 1 (Name of Insurance Company)	Not Applicable
Follower 2 (Name of Insurance Company)	Not Applicable

V. Insured Person Details

Relationship Type	Number of Lives	Name of Insured Person	Nominee name and relationship	Group Activ Secure - Personal Accident	Group Activ Secure - Critical Illness	Group Activ Secure - Hospital Cash
Self	0	As per the Annexure	As per the Annexure	As per the Annexure	Not Applicable	Not Applicable
Dependents	0	As per the Annexure	As per the Annexure	As per the Annexure	Not Applicable	Not Applicable

VI. TPA Details

TPA Name : Aditya Birla Health Insurance Co. Limited	TPA ID : TPA001
TPA Address : Aditya Birla Health Insurance Co. Limited, 5th Floor, Modi Business Centre, Kasarvadavali, Near Hipercity Mall, Thane, Maharashtra - 400615	Contact Number : 18002707000

VII. Premium Details

Particulars	Amount (Rs.)
Net Premium	₹ 0.00
CGST (9%)	₹ 0.00
SGST / UTGST (9%)	₹ 0.00
IGST (18%)	₹ 0.00
Gross Premium	₹ 0.00

GST Registration No.: 07AANCA4062G1ZP

Category: General Insurance

SAC Code: 997133

VIII. Premium Receipt Details

Receipt Number	Receipt Amount	Cheque/ DD/UTR Number	Payment Mode	Name of the Bank	Date of Instrument

Stamp Duty

The stamp duty of Rs. ₹ 1.00 /- paid vide MH008619098201920M dated 21/11/2019, received from Stamp Duty Authorities vide Receipt No./GRASS DEFACE NO 0004549315201920 dated 28/11/2019, payment has been made vide Letter of Authorisation No. CSD/235/2019/5742/19 dated 29/11/2019 from Main Stamp Duty Office.

Important:-

1. All other Terms, Conditions and Exclusions as per attached Policy Wordings.
2. In case of payment by cheque, in the event of dishonour of cheque for any reason whatsoever, insurance provided under this document automatically stands cancelled from the inception irrespective of whether a separate communication is sent or not.

For and on behalf of Aditya Birla Health Insurance Co. Limited



Authorized Signatory