

ENDORSEMENT SCHEDULE

Classic Group Health Insurance

SHAHLGP21239V022021

Policy No : P/151118/01/2023/050953	Endorsement No : P/151118/01/2023/050953/001
Policy Period : 28-MAR-23 To 27-MAR-24	Endorsement Date : 25/08/2023
SAC Code : 997133/Accident and Health Insurance Services	GSTIN : 27AAJCS4517L1ZY
Proposer Code : 8990817	Issuing Office Code : 151118
Proposer Name : Ms.UNIVERSAL SOLUTIONS	Issuing Office Name : Branch Office-Pimpri
Address : OFFICE NO-415/16,4th FLOOR Br2 SECTION,B-WING,JAI GANESH VISION,OFF PUNE-MUMBAI RD,AKURDI Pimpri Chinchwad (M Corp.),Pune,Maharashtra- 411035	Address : Office Premises No. 6, 1st floor & Unit No 12, 13 Sunshine Plaza CTS No:4713, Station Road, Pimpri Vaghare Tehsil Haveli, Dist-Pune., Pune-411018
Tel/Mobile : 020-46771689/9595541555/	Tel/Mobile : 020-67187610/11/12/14
Email id : universal.soln@gmail.com	Email id : pimpri.pune@starhealth.in, pimpri.claims@starhealth.in
Proposer GSTIN : 27BIWPS9096K1ZU	Place of Supply : Maharashtra / State Code : 27
Collection No :	Fulfiller Code : SH9476
Collection Date :	Intermediary Code : BA0000071037
Premium : Rs.-520/- CGST @9% : -47 SGST / UTGST @9% : -47 /- Total Premium : Rs.-614/-	Name : Mr.VISHNUDAS AMBADAS GARMODE
	Phone : /9921141529
	Email_id : vishnu.garmode@gmail.com
Endorsement Effective : From 00:00 On 25/08/2023 To Midnight Of 27/03/2024	

Type of Endorsement : Addition / Deletion of Persons

Description :

It is hereby declared and agreed that with effect from 25-08-2023 the persons mentioned in the schedule attached hereto are included / deleted under the policy for a Sum Insured mentioned there against. In consideration of the Addition & Deletion of Employees as per the attached list,

All other terms/conditions/ warranties /clauses in the policy remain unaltered.

Total Amount in figures and words : -614 (Indian Rupees Six hundred fourteen only) - (Refund)

Warranted that in case of dishonour of premium cheque(s) the within mentioned policy stands cancelled from inception and the company absolves all liabilities under the Policy/Endorsement.

In witness whereof the undersigned being authorised by and on behalf of the company has herein to set his hand at Branch Office-Pimpri on 25th Day of August 2023.

Entered By : SH63540

Approved By : SH63540

Place : PUNE
Date : 25/08/2023

For and on behalf of
Star Health And Allied Insurance Co Ltd

IRDA Regn. No 129
Corporate Identity Number L66010TN2005PLC056649
Email ID : info@starhealth.in


Authorised Signatory

TAX Invoice

Invoice No. : 27E212Y24RC00007	Customer ID : AB0000002735
Invoice Date : 25/08/23	Policy No : P/151118/01/2023/050953
Recipient	Supplier
GSTIN : 27BIWPS9096K1ZU	GSTIN : 27AAJCS4517L1ZY
Insured Name : Ms.UNIVERSAL SOLUTIONS	NAME : Star Health and Allied Insurance Co Ltd
Address : OFFICE NO-415/16,4th FLOOR Br2 SECTION,B-WING,JAI GANESH VISION,OFF PUNE-MUMBAI RD,AKURDI	Address : Office Premises No. 6, 1st floor & Unit No 12, 13 Sunshine Plaza CTS No:4713, Station Road, Pimpri Vaghare Tehsil Haveli, Dist-Pune., Pune-411018
City :	City : PIMPRI
State : Maharashtra	State : Maharashtra
Pincode : 411035	Pincode : 411018
Client Category : CORP	Place of Supply : - Maharashtra

HSN / SAC Code	Description of Service(s)	Total A	Discount B	TaxableValue C = A - B	IGST @ 18% D = C * IGST	CGST @9% E = C *CGST	UT/SGST@9% F = C *UTGST or SGST	CESS@1% G=C*Cess	Total Invoice Value H=C+D+E+F+G
997133	Insurance Services	37845	0	-520		-47	-47		Rs. -614

Total Invoice Value (in Figures) : Rs. -614
 Total Invoice Value (in Words) : Rupees: only
 Amount of Tax Subject to reverse Charge : No

Important Note:

The invoice is issued as per Section 31 of the CGST Act

In case no GSTIN or incorrect GSTIN is provided by the Proposer at Proposal stage, Star Health and Allied Insurance Co Ltd shall not be responsible for any Input Tax Credit losses and no subsequent revision of invoice will be undertaken.

E. & O.E

This is a digitally signed document and hence no physical signature is required

Corporate Identity Number L66010TN2005PLC056649 Email ID : stargst@starhealth.in

Entered By : SH63540

Approved By : SH63540

Place : PUNE
Date : 25/08/2023

For and on behalf of
Star Health And Allied Insurance Co Ltd

Authorised Signatory

S.No	Name of Employee	Status	Sex	Relationship	DOB	Age	Occupation	Sum Insured	ID Card No	Comp Co-Pay	Pre-Existing Disease	Effective From Date	Effective To Date
2	RAHUL UKEY	Deleted	M	EMPLOYEE	07/08/1995	27	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	8990817220000200	0	NIL	28/03/2023	25/08/2023

Nominee Details:

Insured Name: RAHUL UKEY

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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3	MAYUR SHINDE	Deleted	M	EMPLOYEE	29/05/1994	28	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	8990817220000400	0	NIL	28/03/2023	25/08/2023
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Nominee Details:

Insured Name: MAYUR SHINDE

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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9	Mr.Shubhangi Bhatkar	Deleted	F	EMPLOYEE	15/05/1995	27	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	89908172200001400	0	NIL	28/03/2023	25/08/2023
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Nominee Details:

Insured Name: Mr.Shubhangi Bhatkar

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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11	SUHAS SUTAR	Deleted	M	EMPLOYEE	26/09/1980	42	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	89908172300000100	0	NIL	28/03/2023	25/08/2023
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Nominee Details:

Insured Name: SUHAS SUTAR

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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Entered By : SH63540

Examined By : SH63540

Place : PUNE

Date : 25/08/2023

For and on behalf of
Star Health And Allied Insurance Co Ltd



Authorised Signatory

12	OMKAR SAWANT	Deleted	M	EMPLOYEE	04/03/2002	21	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	89908172300000200	0	NIL	28/03/2023	25/08/2023
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Nominee Details:

Insured Name: OMKAR SAWANT

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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13	SAEEL LAD	Deleted	M	EMPLOYEE	24/05/1997	25	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	89908172300000300	0	NIL	28/03/2023	25/08/2023
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Nominee Details:

Insured Name: SAEEL LAD

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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14	SUDHIR BORUDE	Deleted	M	EMPLOYEE	26/07/1996	26	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	89908172300000400	0	NIL	28/03/2023	25/08/2023
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Nominee Details:

Insured Name: SUDHIR BORUDE

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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15	SWAPNIL PATIL	Deleted	M	EMPLOYEE	29/08/1994	28	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	0	89908172300000500	0	NIL	28/03/2023	25/08/2023
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Nominee Details:

Insured Name: SWAPNIL PATIL

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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17	HARSHAD PAWAR	Deleted	M	EMPLOYEE	29/01/1993	30	PRODUCTION WORKERS,	0	89908172300000700	0	NIL	28/03/2023	25/08/2023
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Entered By : SH63540

Examined By : SH63540

Place : PUNE

Date : 25/08/2023

For and on behalf of
Star Health And Allied Insurance Co Ltd



Authorized Signatory

SKILLED AND NON- AGRICULTURAL

Nominee Details:

Insured Name: HARSHAD PAWAR

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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18	Mr.Lilesh Pantawane	Newly Added	M	EMPLOYEE	07/05/1997	26	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300000800	0	NIL	25/08/2023	27/03/2024
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Nominee Details:

Insured Name: Mr.Lilesh Pantawane

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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19	Mr.Himanshu Pothare	Newly Added	M	EMPLOYEE	10/02/1998	25	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300000900	0	NIL	25/08/2023	27/03/2024
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Nominee Details:

Insured Name: Mr.Himanshu Pothare

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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20	Mr. Amar Sonawane	Newly Added	M	EMPLOYEE	10/02/1998	25	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300001000	0	NIL	25/08/2023	27/03/2024
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Nominee Details:

Insured Name: Mr. Amar Sonawane

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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21	Mr. Rajkumar Gunjgankar	Newly Added	M	EMPLOYEE	31/01/1991	32	PRODUCTION WORKERS, SKILLED AND NON-	150000	89908172300001100	0	NIL	25/08/2023	27/03/2024
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Entered By : SH63540

Examined By : SH63540

Place : PUNE

Date : 25/08/2023

For and on behalf of
Star Health And Allied Insurance Co Ltd

Authorised Signatory

AGRICULTURAL

Nominee Details:

Insured Name: Mr. Rajkumar Gunjegankar

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship						
22	Mr. Ramesh Admane	Newly Added	M	EMPLOYEE	20/07/1997	26	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300001200	0	NIL	25/08/2023	27/03/2024

Nominee Details:

Insured Name: Mr. Ramesh Admane

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship						
23	Mr. Hariom Mapari	Newly Added	M	EMPLOYEE	31/01/1996	27	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300001300	0	NIL	25/08/2023	27/03/2024

Nominee Details:

Insured Name: Mr. Hariom Mapari

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship						
24	Mr. Aniket Mane	Newly Added	M	EMPLOYEE	05/05/1999	24	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300001400	0	NIL	25/08/2023	27/03/2024

Nominee Details:

Insured Name: Mr. Aniket Mane

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship						
25	Mr. Prem Ramdas Parde	Newly Added	M	EMPLOYEE	19/07/1999	24	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300001500	0	NIL	25/08/2023	27/03/2024

Entered By : SH63540

Examined By : SH63540

Place : PUNE

Date : 25/08/2023

For and on behalf of
Star Health And Allied Insurance Co Ltd



Authorised Signatory

Nominee Details:

Insured Name: Mr. Prem Ramdas Parde

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship						
26	Mr. Mahesh Ladane	Newly Added	M	EMPLOYEE	07/08/1995	28	PRODUCTION WORKERS, SKILLED AND NON-AGRICULTURAL	150000	89908172300001600	0	NIL	25/08/2023	27/03/2024

Nominee Details:

Insured Name: Mr. Mahesh Ladane

Sr. No	Nominee Name	Nominee Relationship	Age	Percentage	Appointee Name	Appointee Age	Appointee Relationship
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Entered By : SH63540

Examined By : SH63540

Place : PUNE

Date : 25/08/2023

For and on behalf of
Star Health And Allied Insurance Co Ltd



Authorised Signatory