

# GLOBAL PERSONAL GUARD POLICY (INDIVIDUAL)- POLICY SCHEDULE



UIN: IRDAI/HLT/BAGI/P-P/V.I/30/14-15

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc.

HEAD OFFICE PUNE-Bajaj Allianz House,Airport Road,Yerwada,Pune, Maharashtra,411006,INDIA

## Proposer Details

Proposer Name	Kapil Bora		
Proposer Address	NO P-40 AMBEDKAR CHOWK BAJAJ, OPP.SWAMI SAMARTH KAMAN CHAR, AURANGABAD, MAHARASHTRA, 431136, INDIA		
Phone No	7030146173	Email ID	insurancedesk2601@gmail.com
Customer ID	PI03423709		
Previous Policy No	NA	Previous Policy Expiry Date	NA

## Policy Details

Policy Number	12-8428-0000582680-00	Endorsement No	NA
Policy Issued on	29/07/2024	Policy Status	ACTIVE
Period of Insurance	From 29/07/2024 00:00 Hrs To 28/07/2025 Midnight	Expiry Date	28/07/2025

GSTIN / UIN	Unregistered	Place of Supply/State Code/Name	27 - MAHARASHTRA
Company GST No:	27AABCB5730G1ZX		
Company PAN	AABCB5730G	Invoice No:	272407I002339279

## Insured Member Details

Member Name	Customer ID	Gender	Date of Birth	Age	Relation	Occupation	Nominee Name & Relation	First Policy Inception Date
Kapil Bora	PI03423709	Male	14/06/1999	25	Self	Accountants	1. Pravin Bora - Father	29/07/2024
Insured Address	NO P-40 AMBEDKAR CHOWK BAJAJ, OPP.SWAMI SAMARTH KAMAN CHAR, AURANGABAD, MAHARASHTRA, 431136, INDIA							

## Cover Details

Member Name	Premium	Accidental Death		Permanent Total Disability		Permanent Partial Disability	
		Sum Insured	Cumulative Bonus (%)	Sum Insured	Cumulative Bonus (%)	Sum Insured	Cumulative Bonus (%)
Kapil Bora	325	500000	0 (0%)	500000	0 (0%)	500000	0 (0%)

## Optional Cover

Member Name	Accidental Hospitalization Expenses	Adventure Sports Benefit		Air Ambulance Cover	Children's Education Benefit	Coma Due to Accidental Bodily Injury	EMI Payment Cover
		Accidental Death	PTD				
		Sum Insured	Sum Insured				
Kapil Bora	NA	NA	NA	NA	NA	NA	0

Member Name	Fracture Care	Hospital Cash Benefit		Loan Protector Cover	Loss of Income due to Disability from Accident		Road Ambulance Cover	Travel Expenses Benefit
		Per Day Benefit	Number of Days		Sum Insured	Weekly Benefit Amt.		
Kapil Bora	NA	NA	NA	0	NA	0	NA	0

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## Add on Cover

Member Name	Health Prime Rider	BAJHLIA24087V022324
KAPIL BORA	No	

## Premium Details

Description	Amount	Description	Amount
Base Premium	275	Family Discount	0
Premium on Add-on Cover	0	Long Term Policy Discount	0
Premium on Health Prime Rider	0	Employee Discount	0
Discount on Health Prime Rider	0	Online Discount/Direct Customer	0
Gross Premium: Three Hundred Twenty-Five Rupees	Net Premium		275
	State GST(9%)		25
	Central GST(9%)		25
	IGST		0
	UTGST		0
	CESS		0
	Gross Premium		325

"As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year E. & O.E"

"In case no GSTIN or incorrect GSTIN is provided by the Proposer at Proposal stage, Bajaj Allianz General Insurance Company Ltd shall not be responsible for any Input Tax Credit losses and no subsequent revision of invoice will be undertaken."

"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."

## Exclusions

Member Name	Exclusion
Kapil Bora	NA

Special Exclusion at Policy Level	NA
Loan Details	
Assignment Details	NA
Type of Assignment	NA
Assignment Wordings	NA
Additional Remarks	NA
80 D Certificate	<p>This is to certify that Kapil Bora has paid Rs.325 towards Health Insurance premium for Period and Policy Number as mentioned on the Policy Schedule and is eligible for Deduction under Section 80-D of Income Tax (Amendment) Act, 1986</p> <p>Notes:</p> <ol style="list-style-type: none"> <li>1. This is subject to the provisions of Section 80D of income tax (Amendment) Act, 1986 as amended from time to time.</li> <li>2. This certificate must be surrendered to the company in case of cancellation of this policy.</li> </ol>

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80 D Certificate	3. In event of incorrect representation of this declaration the liability shall be upon the policy holder. 4. This certificate will not be valid if premium payment has been made in cash.
Premium Details	Receipt Number: 54-24-000000467213 Date: 29/07/2024 Premium Payer ID: PI03423709 Float: NA; Payment Frequency: Single Premium ** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque
Financial Institution Ref. No.	NA

AGENCY CODE	10067606	CONTACT NO	18002663131
AGENCY NAME	Quickinsure Insurance Brokers PvtLtd.	EMAIL ID	SERVICE@QUICKINSURE.CO.IN

For & on the behalf  
Bajaj Allianz General Insurance Company Ltd.

Stamp Duty  
Rs.1/-

This document is digitally signed,hence counter signature / stamp is not required  
Principal Location : Bajaj Allianz House, Airport Road, Yerwada, Pune- 411006 PH-66026666 |  
Services Accounting Code : 997133 Accident and health insurance services.  
No reverse charge is payable on these services.

Authorized Signatory

SUB 10067606 / NA

"The amounts present in the document are calculated with INR currency if not mentioned otherwise."

	<p>Caringly Yours App</p>	<p>Policy Verification</p>	<p>Claim Registration</p>	<p>Online Grievance</p>	<p>Whatsapp Service</p>
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Our Insurance Expert will call you for hassle free renewal and industry best offers on your coverage

**Bajaj Allianz General Insurance Co.Ltd.** Bajaj Allianz House,Airport Road,Yerwada,Pune - 411006. Reg.No.:113 CIN:U66010PN2000PLC015329

Give a Missed Call on **8080945060**, SMS 'WORRY' to **575758**

Contact our 24-Hour Call Center at **1800-209-5858**

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