

VOYAGER GROUP TRAVEL INSURANCE

PART I OF THE POLICY SCHEDULE

(UIN: ICITGBP22095V032122)

Date: 25/09/2023

To,
 MR Anuj Anuj
 Dhanana Aladadpur, Sonipat, SONEPT - 131304, SONEPT,India
 9321786220
 pinky.gadkar40@gmail.com

Dear Mr. / Ms. MR Anuj Anuj ,

Sub: Issuance of Policy Certificate no. 4168/O-SANKASA-NA/71585/00/000 under your application for Group Travel Insurance Policy dated 25/09/2023

We would like to thank you for investing your faith in us. Please find enclosed herewith your Policy Certificate, Policy wordings & Customer Information Sheet based on which your insurance Policy has been issued.

Insured Person Details:

Name of Proposer	MR Anuj Anuj		
Domestic/ Overseas/ Both	Overseas		
Geographical Scope of Policy	Worldwide excluding USA/Canada		
No. of Travel Days	15 days		
Countries being visited	As per Geo		
Period of Insurance	Overseas - 25/09/2023 00:00 hours To 09/10/2023 23:59 hours		
Name of Insured	Anuj Anuj	Date of Birth of Insured	07/05/2002
PAN No. of Insured		Passport No. of Insured	W3758345
Relationship of Insured with Proposer		Address of the Insured	Dhanana Aladadpur, Sonipat, SONEPT - 131304, SONEPT,India
Resident Status		Country of issue of Passport	

Medical expenses due to Covid-19 is covered if contracted during the travel period as per policy terms and conditions.

Please go through the details as furnished in the format and also as provided in the Policy document and confirm that they are in order. Should you feel that there are any discrepancies/ variations, you are requested to write back to us immediately at customersupport@icicilombard.com or call at 1800 2666 for necessary changes/rectification. In the absence of any communication from you within 15 days of receipt of Policy, we would take it that you have accepted the contents and the coverage to be confirming to your proposal.

Thanking You,
 Yours Sincerely

ICICI Lombard General Insurance Company Limited (IRDAI Regn. No. : 115)
CIN No. L67200MH2000PLC129408
Master Policy Number - 4168/O-SANKASA/239025789/00/007
UIN: ICITGBP22095V032122
**Group Travel Insurance
Policy Certificate**

On receipt of full premium from the Policyholder as named in this Schedule, Group Travel Insurance master policy number 4168/O-SANKASA/239025789/00/007 dated has been issued at Mumbai, by ICICI Lombard General Insurance Company Limited to the Policyholder, SANKASH as specified in the Policy, and is governed by, and is subject to, the terms, conditions & exclusions therein contained or otherwise expressed in the said Policy.

The certificate issued to the customers/ employees/ members of SANKASH under the signature of an authorized signatory of ICICI Lombard General Insurance Company Limited, represents the availability of the Benefits under the Policy to the Insured Person named below, subject to the terms, conditions and exclusions expressed in the said Policy, but not exceeding the Sum Insured as specified below.

(PART I OF THE POLICY SCHEDULE)

POLICY CERTIFICATE NUMBER	: 4168/O-SANKASA-NA/71585/00/000
Master Policy Number	: 4168/O-SANKASA/239025789/00/007
Issued At	: Mumbai
Domestic/Overseas/Both	: Overseas
Geographical Scope	: Worldwide excluding USA/Canada

Trip Details							
Type of Trip	For Overseas - Single-Trip						
Details of Trip*	1	From	25/09/2023	To	09/10/2023	No. of Days	15
		Place of Origin	India	Destination	Australia		
Common Carrier/ Public Carrier Opted							
Adventure sports Activities to be undertaken while on trip							
Detailed Itinerary of the Trip*	Domestic - Overseas -						

Proposer/Policyholder Details	
Name of the Proposer	MR Anuj Anuj

Insured Details	
Name of the Insured	Anuj Anuj
Gender of the Insured	MALE
Age as on Policy Start Date	21 years
Mailing address/ Residential Address of the Insured	Dhanana Aladadpur, Sonipat, SONEPT - 131304, SONEPT, India
Occupation	
Mobile Number	9321786220
Email ID	pinky.gadkar40@gmail.com
Passport Number	W3758345
Country of Issue of Passport	
Resident Status	
PAN Number/ National ID No	
Pre-Existing Disease (if any)	
Debit/Credit Card Number (if any):	
For Student Travel policies,	
i. Name of Educational Institute in which Insured is enrolled	
ii. Name of the educational course in which Insured in enrolled	
Name of Nominee	MR Santosh Ramrattan
Relationship of Nominee with Insured	

Policy Details

Period of Insurance	Overseas - From 25/09/2023 to 09/10/2023
Journey Start Date, if different from Policy Start Date	
No. of Travel Days	Overseas - 15
Name of Nominee	MR Santosh Ramrattan
If Nominee is minor, name of guardian	
Relationship of Nominee with Insured Person	
Name of Assignee	

COVERAGE TABLE - FOR OVERSEAS POLICY

(Coverage Table to be customized in accordance to the Covers & Extensions opted)

Coverage	Sum Insured	Deductibles/Franchise/Co-Pay/Cover Specific Condition, if any
Medical Expenses (Include Medical Evacuation OPD)	USD 50,000	USD 100
Dental Treatment	USD 250	USD 100
Repatriation of Remains (Included under Medical cover)	USD 7,000	Nil
Daily Allowance in case of Hospitalization	USD 30 for maximum 20 Days	24 Hours
Personal Accident	USD 25,000	Nil
Personal Liability	USD 2,00,000	5% of actuals
Total Loss of Checked in Baggage	USD 1,000	Nil
Delay of Checked in Baggage	USD 100	6 Hours
Loss of Passport & International Driving Licence	USD 200	Nil

*Sub-limits shall not be applicable for Schengen Countries or any other country where respective government bodies/embassies have similar requirements.

PREMIUM DETAILS

Net Premium (in Rs.)	Rs. 560.17
CGST : (9.00 %)	Rs. 50.42
SGST : (9.00 %)	Rs. 50.42
IGST : (0.00 %)	Rs. 0.00
UTGST : (0.00 %)	Rs. 0.00
Kerala Cess : (%)	Rs.
Total Premium (in Rs.)	Rs. 661
GSTIN of ICICI Lombard GIC	27AAAC17904G1ZN
HSN/SAC Code	9971 / GENERAL INSURANCE SERVICES
Servicing Branch:	Mumbai
Servicing Branch Address:	414, ICICI LOMBARD HOUSE, VEER SAVARKAR MARG, NEAR SIDDHI VINAYAK TEMPLE, MAIN GATE, PRABHADEVI, MUMBAI

The stamp duty of ₹1 paid vide deface no. CSD6142023662 dated 20/02/2023 .

SPECIAL CONDITION:

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IMPORTANT NOTES:

- Insurance cover will start only on receipt of full premium stated in PART I of the Policy Schedule by ICICI Lombard General Insurance Company Limited.
- Insurance cover is subject to the terms and conditions mentioned in the Policy wordings provided to you with this Certificate.
- The above covers would not be applicable for persons occupied in underground mines, explosives and electrical installations on high tension lines unless otherwise covered and stated in the Policy Schedule.
- Major exclusions: Intentional self-injury, suicide or attempted suicide whilst under the influence of intoxicating liquor or drugs, any loss arising from an act of breach of law with or without criminal intent. Please refer to the Policy wordings for a complete list of exclusions.

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115

Mailing Address:

 ICICI Lombard General Insurance Company Limited,
 Interface Building No.: 16, 601 / 602, 6th Floor, New
 Link Road, Malad (West), Mumbai - 400 064.

CIN: L67200MH2000PLC129408

Registered Office:

 ICICI Lombard House, 414 Veer Savarkar
 Marg, Near Siddhi Vinayak Temple,
 Prabhadevi, Mumbai - 400 025.

UIN : ICITGBP22095V032122

Toll free no. : 1800 2666

Alternate No. : +918655 222 666 (chargeable)

Email : customersupport@icicilombard.com

Website : www.icicilombard.com



5. For any endorsements such as name correction or change in nominee details, you can contact us at Toll Free Number 1800-2666 or Email us at customersupport@icicilombard.com or visit our nearest branch.
6. For Overseas claims, Contact ICICI Lombard 24hr Help Line number for assistance and registering your claim:
In USA & Canada (Toll Free) +1 844 871 1200; Rest of the World (Call Back Facility) +91 124 449 8778
National Toll Free Number 1800 102 5721; Fax Number +91 124 4006674
Email Address icicilombard@falck.com
OR Login to the e-claim link as provided by the Company details of which will be mentioned in the policy document or updated on the Website
For Domestic claims, Address for claim notification: IL Health Care, ICICI LOMBARD HEALTHCARE ICICI BANK TOWER,PLOT NO.12, FINANCIAL DISTRICT, NANAKRAM GUDA, GACHIBOWLI, HYDERABAD, ANDHRA PRADESH

For ICICI Lombard General Insurance Company Limited.

Issuing Office: Mumbai
IRDA Reg No : 115

Date :
Misc Code :

25/09/2023
168

Global Assistance E-Card
Overseas



Name : Anuj Anuj
Policy No. : 4168/O-SANKASA-NA/71585/00/000
Date of Birth : 07/05/2002
Valid From : 25/09/2023
Valid To : 09/10/2023

Assistance Service Provider : Falck India Pvt. Ltd.



Please read the below mentioned information carefully for hassle free claim settlement

24x7 Customer Helpline Numbers for Claim Related Inquiry

- | | |
|---|---|
| <p>1 Registration of claim is required prior to availing benefits under this policy.</p> <p>2 Please call the given numbers to register your claim and to confirm your coverage.</p> <p>3 Cashless benefits are applicable for Inpatient treatment only and not for Outpatient treatment.</p> <p>4 This card is only for information and does not guarantee the admissibility of claim.</p> | <p>USA & Canada : +1 18448711200
(Toll Free)</p> <p>Rest of The World : +91 124 4498778
(Call Back Facility)</p> <p>India (Toll Free) : 18001025721</p> <p>Fax Number : +91 124 4006674</p> <p>Email Address :
icicilombard@falck.com</p> |
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Assistance Service Provider : Falck India Pvt. Ltd.

