

Address

The Oriental Insurance Company Limited

GROUP MEDICLAIM TAILORMADE POLICY SHEDULE

UIN: OICHLGP449V022021

Policy No. : 421900/48/2023/1741 Prev. Policy :

No.

Address

Insured's Name : NATIONAL LAW SCHOOL OF INDIA

UNIVERSITY (GSTIN:

: PB No. 7201, Nagarbhavi, Bengaluru

BANGALORE KARNATAKA 560072

29AAAJN0185F1Z6)

Issue Office Name: DO IX BANGALORE (GSTIN:

FLOOR,

NEAR VIJAYANAGAR BDA COMPLEX,

: NO.70/5, SUVARNA TOWERS, I

29AAACT0627R4ZS)

GOVINDARAJ

NAGAR, VIJAYANAGAR, BANGALORE BANGALORE KARNATAKA 560040

Tel. /Fax /Email : 080-23160532/33/35 / / 9731015834 /

financeofficer@nls.ac.in

Tel. /Fax /Email

: 080 23102254,23406322,23102259(DIR)

/ 080 23102258 /

tgsathyanarayana@orientalinsurance.co.

in

Agent/Broker Details

Dev.Off.Code : NA0000004520 DIRECT

Agent/Broker :
Address :

Tel/Fax/Email : ////

Period of Insurance: FROM 10:53 ON 29/12/2022 TO MIDNIGHT OF 28/12/2023

Gross Premium : 15,47,000 GST : 2,78,460 Stamp Duty : 1 Total: 18,25,460

Co-insurance Details: NIL

TPA Details :

TPA ID : YA000000338

TPA Name : M/s Raksha Health In

TPA Address: Raksha Health Insurance TPA Pvt Ltd. Unit No. DTJ 425,

4th Floor, Plot No. 11, DLF Tower B, Jasola, New Delhi-

110025

NEWDELHI Toll Free No : 18001801444, 0129 - 4289999, 256437

Risk Details

Total Sum Insured in words: Indian Rupees Sixteen Crores Ninety-Four Lakhs Only

Total Premium in words : Indian Rupees Eighteen Lakhs Twenty-Five Thousand Four Hundred Sixty Only

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

The policy shall pay for hospitalization expenses for medical/surgical treatment at any Nursing Home/Hospital in INDIA as an in-patient defined in the policy

PRE-EXISTING DISEASES COVERED, DELETION OF EXCLUSION 4.2 (30 DAYS OF EXCLUSION 4.3 (TIME

Place: BANGALORE

Date:

30/12/2022

For and on behalf of The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

Page 1 of 2

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee



The Oriental Insurance Company Limited

Attached to and forming part of policy number 421900/48/2023/1741

7.360

Telephone No: Fax No.

BOUND EXCLUSIONS)

ROOM RENT - 3% FOR NORMAL AND 5% FOR ICU-- 847 LIVES -- SI - 2 LAKHS PER PERSON CORPORATE BUFFER - 5 LAKHS LIMITED TO FAMILY SUM INSURED.

ADDITIONS SUBJECT TO SUFFICIENT CD BALANCE AND NO REFUND ON DELETIONS IN CASE OF CLAIMS ALL OTHER TERMS AND CONDITIONS AS PER OUR STD GROUP MEDICLAIM POLICY

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac, the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operaing offices as well as Company's website.

Warranted that in case the person covered under the policy has lodged any claim under the previous policy and the sum insured is enhanced under the current policy, for a further claim for the same disease during the current policy, the earlier Limit of Sum Insured shall be applicable and not the enhanced sum insured

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).

"We at Oriental continuously strive to ensure that you get the best possible treatment from our network hospitals. Please contact your TPA or any of the Oriental offices for our preferred hospitals in your area before going for a treatment. This will help us serve you in the best possible manner"

In witness whereof the undersigned being authorised by and on behalf of the Company has/have herein to set his/their hands at DO IX BANGALORE (GSTIN: 29AAACT0627R4ZS) on 30-DEC-22

" In case of grievance related to any issue related to this policy the same may be addressed to the office In-Charge or the Grievance Officer at above policy address. If the grievance remains pending, it may be escalated to Grievance Officer of the concerned Regional Office 44/45,Leo Shopping Complex,1st Floor, Floor,Residency Road Cross,BANGALORE.The next escalation in case grievance remains unresolved is CSD, Head Office, situated at Oriental House, A-25/27, Asaf Ali Road, New Delhi-110002.

If the insured is not satisfied with the resolution/reply provided by the company, he/she may approach the Office of Insurance Ombudsman, within his/her jurisdiction. The list of offices of Ombudsman is available on Company's portal."

Ms P S CHITRA Entered By

Examined By: Mrs LATHA LAKSHMANAN

Policy Printed By: 460958 IP:

Policy Printed On: 30-DEC-22 15:41:02 MAC:

Authorised Signatory

For and on behalf of

The Oriental Insurance Company Limited

Place: **BANGALORE**

30/12/2022 Date:





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The Oriental Insurance Company Limited

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