Bajaj Allianz General Insurance Company Limited



## Welcome to Bajaj Allianz Family

### Harikrishna Sivaprasad

Thandassery Parambil House Thevara Ferry Thevara Colony Thevara P.O Pincode: , , Ernakulam,Ernakulam,682013 Kerala Mobile No.: 7736861990 e-mail : harikrishnas12e@gmail.com **Customer ID : PI31016341** 

Dear Customer,

Thank you for choosing Bajaj Allianz General Insurer as your preferred insurer. Bajaj Allianz General Insurance Company Limited, a consistently profitable insurer enjoys a reputation of expertise, stability and strength. We are a customer focused market leader present in over 200 locations across India. As an organization we strive to understand the risk management needs of our consumers and translate it into affordable products and services of global quality that deliver value for money. Bajaj Allianz has an ISO Certified claims process and has received iAAA rating for the last three consecutive years from ICRA Limited, an associate of Moody's Investors Service, for claims paying ability. The rating indicates highest claims paying ability and a fundamentally strong position in the industry.

We request you to kindly go through the contents of the policy schedule and the terms and conditions. In case of any clarification or disagreement, please write to us at travel@bajajallianz.co.in within fifteen days of receipt of this policy.

We assure you the best of our services and look forward to a continual patronage and association with you.

For & on the behalf

Bajaj Allianz General Insurance Company Ltd.

**Authorized Signatory** 

Policy issuing office & correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc: WEB SALES-Bajaj Finserv Building,1st Floor,Behind Weikfield It-Park,Viman Nagar,Pune,Maharashtra,INDIA,411014 Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune – 411006 (India).

Email: travel@bajajallianz.co.in , Website www.bajajallianz.com

(@) WhatsApp Number: +91 7507245858

Bajaj Allianz General Insurance Company Limited



#### Bajaj Allianz General Insurance Company Ltd

#### [Corporate Identity Number (CIN): U66010PN2000PLC015329]

#### [Unique Identification Number (UIN):BAJTIOP24007V042324]

#### Registered and Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune

#### **Transcript of Proposal for INDIVIDUAL TRAVEL**

Dear Harikrishna Sivaprasad,

Policy No. 12-9910-0005497903-00

We wish to inform you that the your contract will based on the information and declaration given by you through telephonic conversation / email / web-inputs / TAB or other means which would be considered as the final proposal, the transcript of which is as follows:

You are requested to yourself reconfirm the same at your end. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back immediately and before start of your journey. In case of our non-receipt of your disagreement or objection or any changes [as mentioned hereinabove] with respect to information mentioned below, it shall be deemed that you have positively confirmed to us the correctness of the below mentioned transcript and declaration.

Where you disagree to any of information/contents of this transcript, standard Terms or conditions, you have the option to return, immediately before start of your travel, the original Policy stating the reasons for your objection, and upon our receipt of original Policy together with your request to cancel the Policy, shall be entitled to a refund of the premium paid, subject only to there being no claim made under the Policy and also subject to a deduction of the expenses incurred by us and the stamp duty charges.

Personal Information of Proposer								
First Name	Harikrishna	Harikrishna						
Middle Name		Last Name Sivaprasad						
Email Address	harikrishnas12e@g mail.com	Mobile Number	7736861990					
Date of Birth	04/10/2002	Nationality	Indian					
Passport No.	U2397701							

Permanent Address		Mailing Address				
House No/ Building No/ Flat No	Thandassery Parambil House Thevara Ferry Thevara Colony Thevara P.O Pincode:	House No/ Building No/ Flat No	Thandassery Parambil House Thevara Ferry Thevara Colony Thevara P.O Pincode:			
Street/ Locality/ Landmark		Street/ Locality/ Landmark				
State	Kerala	State	Kerala			
City	Ernakulam	City	Ernakulam			
Area	Ernakulam	Area	Ernakulam			
Pincode	682013	Pincode	682013			

#### Bajaj Allianz General Insurance Company Limited



#### **Insured / Beneficiary Details**

Serial No.	Insured/ Beneficiary Name	Date of Birth	Gender	Passport No.	Nominee
1	Harikrishna Sivaprasad	04/10/2002	Male	U2397701	Bindhu Ns

Kindly note that as the information/contents and declarations/confirmations provided by you as contained in this transcript is the basis on which we are issuing / have issued the Policy to you, we advise you to please ensure that you have provided/disclosed and or not withheld any material facts/information and declarations, as Policy becomes Void ab-initio if material facts are not provided/disclosed and or withheld and in such case no claim, if any, will be considered by us apart from forfeiture of the premium.

I/We hereby give voluntary consent to BAGIC/Company to share my/our personal information and data provided in this proposal form with its group companies or any other person in connection with the Insurance Policy or otherwise, including for providing products and services of group companies that may be of interest to me/us, to be used in accordance with their respective privacy policies and subject to appropriate measures being in place to safeguard my/our personal information.

#### A. Coverage Details:

- 1. Plan Name : Travel Prime Student Gold
- 2. Geographical Coverage : Worldwide Excluding USA and Canada
- 3. Departure Date : 16-JAN-25
- 4. Return Date : 14-JUL-25
- 5. No of Journey Days : 180 Days
- 6. Rider Details:

Rider Name	Rider Sum Insured
Track a Baggage Service	NIL
Trip Delay Delight	USD 60

#### 7. Medical Declaration

Is the proposed insured's ever been diagnosed with or advised to seek treatment for any illness/ disease / ailment up to the date of making this proposal or suffer from physical defect or deformity?.

YES NO

 $\checkmark$ 

If Yes Please provide the details in the below table

(\*) Applicable in case of family plan.

Medical Declaration of

Member 1 - No Declaration

#### **B.** EXCLUSIONS AND TERMS AND CONDITIONS:

The detailed list of exclusions, standard terms and conditions, including the exclusion of pre-existing ailments/diseases, as mentioned in this transcript were fully explained to you and for full details thereof please refer to the Policy wordings:

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#### Bajaj Allianz General Insurance Company Limited



Answer given by You: Yes, I/we have been explained in full the details of exclusions, standard terms and conditions including the exclusion of pre-existing ailments/diseases and knowing the same I/we have opted and proposed for this Policy.

- **C.** The contents of the proposal [transcript of proposal of you is this document] and connected documents have been fully explained to you and you have fully understood the significance of the proposed contract basis which you have confirmed for policy issuance.
- **D.** In case of Disagreement or objection or any changes with respect to information, declarations, Terms and Conditions, exclusions and contents mentioned hereinabove, please contact our toll free number & register your objections / changes / disagreement to the contents of this transcript or you may also send us email or written correspondence at the following details immediately and before start of your journey.

#### **DECLARATION:**

1. I hereby declare, on my behalf and on behalf of all persons proposed to be insured, that the above statements, answers and/or particulars given by me as in this transcript are true and complete in all respects to the best of my knowledge and that I am authorised to propose on behalf of these other persons.

2. I understand that the information provided by me, as in this transcript, will form the basis of the insurance policy, is subject to the Board approved underwriting policy of the insurer and that the policy will come into force only after full payment and realisation of the premium chargeable.

3. I further declare that I will notify in writing any change occurring in general health of me and other persons to be insured/proposer after the proposal has been submitted [as in this transcript] but before communication of the risk acceptance by the company.

4. I declare that I consent to the company seeking medical information from any doctor or hospital who/which at any time has attended on the person to be insured/proposer or from any past or present employer concerning anything which affects the physical or mental health of the person to be insured/proposer and seeking information from any insurer to whom an application for insurance on the person to be insured /proposer has been made for the purpose of underwriting the proposal and/or claim settlement.

5. I authorize the company to share information pertaining to my proposal [as in this transcript] including the medical records of the insured/proposer for the sole purpose of underwriting the proposal and/or claims settlement and with any Governmental and/or Regulatory authority.

**NOTE**: No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.

WhatsApp Number: +91 7507245858 Email address: travel@bajajallianz.co.in Website: www.bajajallianz.com

#### Contact our Policy servicing branch at: BAJAJ ALLIANZ GENERAL INSURANCE CO. LTD.BAJAJ ALLIANZ HOUSE,AIRPORT ROAD, YERAWADA,PUNE - 411006

For Bajaj Allianz General Insurance Company Ltd,

\*\* This is print of electronic records maintained by us in accordance with law and hence does not require signature. Scrutiny No:

12-9910-0005497903-00

**Bajaj Allianz General Insurance Company Limited** 



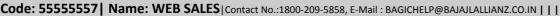
(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDAI] vide Regd. No.113)

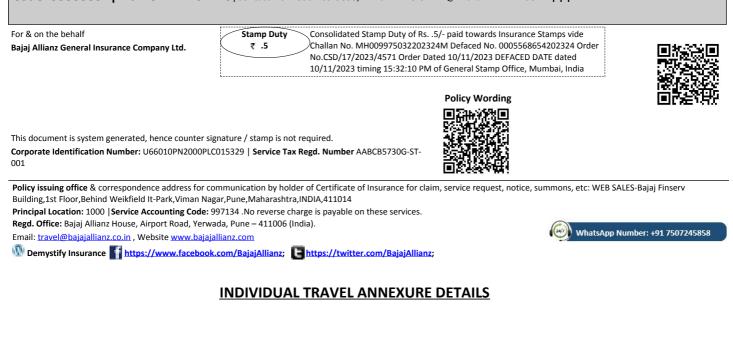
### Travel Prime Policy Certificate cum Policy Schedule UIN. BAJTIOP24007V042324

			Certi	ificate cum	Po	licy Sched	ule uin		07V042324	
PROPOSER DETAILS Customer ID : PI31016341				-	POLICY DETAILS Policy No. 12-9910-0005497903-00					
Customer ID : PI31016341 Proposer Name: Harikrishna Sivaprasad Corresp. Address: Thandassery Parambil House Thevara Ferry Thevara Colony Thevara P.O Pincode: Ernakulam Ernakulam Kerala PIN-682013 Mobile No.: 7736861990   e-mail id: harikrishnas12e@gmail.com				Policy No.         12-9910-0005497905-00           Issued on         08/07/2024   Policy Status: ACTIVE POLIC           Period of         From: 16/01/2025 00:00 Hrs.						
				Insurance		/07/2025 Midnigh				
				Endorsement	Dt. NA V		-			
Missed cal +91 124 6174 travel@bajajallia	720 to		You can	also write an em	ail to	<u>travel@bajajalli</u>	anz.co.in.		lialing +91 124 6174720 tion to be notified at leabefore discharge.	
Plan Chosen	Travel F	Prime Student	Gold	1	Geog	raphical Covera	ge	Worldwi	de Excluding USA and Ca	nada
Member Nam	ne	Date of Birth	Age	Gender		Passport N	umber	N	ominee Name	Relation
Harikrishna Sivap	rasad	04/10/2002	21	Male		U23977	01		Bindhu Ns	Mother
Basic Benet	fits	Max Limit		Deductible			Basic Be	nefits	Max Limit	Deductible
Personal Accident ***		USD 25000		Nil		Accident to S	onsor		USD 10000	Nil
Medical Expense and Evacu	uation	USD 200000		USD 100		Bail Bond Insu	irance		USD 500	USD 50
Emergency Dental Pain Rel	ief	USD 500		USD 100		Family Visit			USD 7500	Nil
Repatriation		USD 50000		Nil		Tuition Fees			USD 10000	Nil
oss of Checked Baggage *	*	USD 1000		Nil		·				
Accidental Death and Disat Carrier)	oility (Common	USD 2500		Nil						
Personal Liability		USD 100000		USD 200						
otal Trip duration: NA										
	Add-on (	Cover/ Rider				Limits (Max	for entire	e policy period)	Deductible	Premium
Track a	a Baggage Service I	JIN. BAJTGBA2405	8V0123	324			Include	b	Nil	INR 32
Trip	Delay Delight UIN	I. BAJHLIA19077V	D11819				USD 60	1	4 Hrs.	INR 204.24
	Assure	nefit of Personal A ed. For Child 25% o nefit of Emergence	of Sum A	ssured					ing spouse and every add	ditional adult 50% of Su
Important Note:	undeclared. You medical inform information to	u will not be travel ation from any do Bajaj Allianz and	ling aga octor in / or to t	inst the advice of respect of any n the claims admin	f a ph nattei iistrat	ysician for the p r relating to my or or medical a	urpose of physical dvisors.	obtaining medical or mental health a	ons arising out from the reatment and will conse nd you authorize and co e-existing medical condi	nt to Bajaj Allianz seek nsent to him giving su
Pre-existing disease	Mr Harikrishna	Sivaprasad:No Deo	laratior	ı						
Special terms & condition	terms and cond			-			•		d during Quarantine peri	od subject to the polic
Declaration by Insured	information pro		We als	o understand tha					ntative and the policy r disability or conditions	
Geographical Exclusion		country list inclu tionally Haj and N					raq, Yeme	en, Syria, N Korea,	and similar terror prone	e and politically unsta
Premium before tax		Rs. 3999		Premium Detail	s: Rec	eipt No: 54-24-1	0000038	)297/1 Date: 08/0	/2024 Instrument No: 1	05197565 Bank & Brai
GST @ % CGST @ % IGST	@18% Cess @ %	Rs. 720				•			m Payer ID: PI31016341	
Total Premium		Rs. 4719		Payment   If Pre	mium	n paid through (	heque, th	e Policy is void ab-	nitio in case of dishonou	ur of Cheque.
Total Premium in words: F	Rupees Four Thous	and Seven Hundre	d Ninet	een Only						
Proposer GSTIN/UIN:  Pla					)G1ZX	Invoice Numb	er: 32240	71000000001 <b> Con</b>	pany PAN: AABCB5730G	i
I/We hereby declare that 48, we are not required to Previous Policy No: NA Exp	prepare an invoic				-		vards is m	ore than the aggre	gate turnover notified u	nder sub-rule (4) of ru

12-9910-0005497903-00

### Bajaj Allianz General Insurance Company Limited





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12-9910-0005497903-00

Bajaj Allianz General Insurance Company Limited



#### **IMPORTANT NOTICE: International Contact Numbers**

Country	Toll Free Number with Exact Dialing Pattern	Mobile	PayPhone/Landline	
AUSTRALIA	1800161400	Yes	Yes	
AUSTRIA	0800296764	Yes	Yes	
BELGIUM	080019946	Yes	No	
CANADA	18339371046	Yes	Yes	
DENMARK	80254114	Yes	Yes	
	0800916110			
FINLAND	0800916111	Yes	Yes	
FRANCE	0800992597	Yes	Yes	
GERMANY	08000801356	Yes	Yes	
HONG KONG	0800938183	Yes	Yes	
HUNGARY	0680080529	Yes	Yes	
IRELAND	1800947246	Yes	Yes	
		No access from Paltel &		
ISRAEL	1809455174	Jawal/Watania mobile networks.	Yes	
ITALY	0800729207	ITFS mobile accessible from following mobile networks: Tim, Vodafone, Wind.	Yes	
	06633814376	Mobile networks access:	Yes	
	06633814377	NTT Docomo,Au (KDD)		
JAPAN	06633814378	and Softbank.		
	06633814379			
MALAYSIA	1800819860	Yes	Yes	
NETHERLANDS	08000231639	Yes	Yes	
NEW ZEALAND	0800497242	Yes	Yes	
PHILIPPINES	180011102860	Mobile access available from Sun Cellular & Smart Mobile networks.	No	
PORTUGAL	800827716	Yes	Yes	
SINGAPORE	8001014293	Accessible through Mobile1, Singtel & Starhub - airtime charged. All mobile callers need to pre- register with Singtel. UIFN not available to prepaid subscribers.	ITFS access from Payphones is available from Singtel network only, free of charge and for UIFN, there is a local charge.	
SOUTH KOREA	00798142030103	Yes	Yes	
JOOTTI KOREA	00798142030103	105	res	
SPAIN	900805804	Yes	No	
THAILAND	1800014035	Yes	Yes	
UK	08000314801	Yes	No	
UNITED STATES	18339371059	Yes	Yes	

Our overseas travel assistance department:

Tel: +91 7507245858

e-mail: travel@bajajallianz.co.in

Missed Call Number: +91 124 6174720

Contact Details

Bajaj Allianz General Insurance Co. Ltd., 2nd Floor, Bajaj Finserv Building, Survey No. 208 / B - 1, Behind Weik field IT Park, Off Nagar Road, Viman Nagar, Pune - 411014

www.bajajallianz.co.in

For any queries please contact:

Email: travel@bajajallianz.co.in



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

Authorized Signatory

12-9910-0005497903-00

Bajaj Allianz General Insurance Company Limited

### **RECEIPT**

**Receipt Number** 54-24-00000380297/1 : **Receipt Date** : 08/07/2024 **Business Channel** Websales : Harikrishna Sivaprasad Received with thanks from (Customer ID: PI31016341) a total sum of Rupees FOUR THOUSAND SEVEN HUNDRED NINETEEN ONLY Inst./Ref. No. Instrument Type Instrument Date Bank Name **Branch Name** Amount (Rs.) 105197565 08-Jul-2024 BN00000158 BN00000158 4,719.00 **Online Payment Total Amount** 4719

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued. \* Cheque/DD/PO receipt is valid subject to realisation of the instrument.

On specific request and subject to terms and conditions, record of information exchange will be made available.

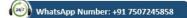
For & on behalf of

Bajaj Allianz General Insurance Company Ltd.

**Authorised Signatory** 

Policy issuing office & correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc: WEB SALES-Bajaj Finserv Building,1st Floor, Behind Weikfield It-Park, Viman Nagar, Pune, Maharashtra, INDIA, 411014

Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune – 411006 (India). Email: travel@bajajallianz.co.in , Website www.bajajallianz.com



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