Bajaj Allianz General Insurance Company Limited



### Welcome to Bajaj Allianz Family

### Muhammed Ziyaraf Thanduparakkal

Thanduparakkal House Palamadam, , Karad,Malappuram,679339 Kerala Mobile No.: 9383448689 e-mail : Itzmeziyaraf@gmail.com **Customer ID : PI31088331** 

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: TRIVANDRUM-5th Floor,,Rema Plaza,,Ss Kovil Road, ,Thampanoor,,Thiruvananthapuram,Kerala,INDIA,695001 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 Muhammed Ziyaraf Thanduparakkal,

Policy No. 12-9910-0005537641-00

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	Muhammed	Muhammed					
Middle Name	Ziyaraf	Ziyaraf Last Name Thanduparakkal					
Email Address	Itzmeziyaraf@gmai l.com	Mobile Number	9383448689				
Date of Birth	22/09/1999	Nationality	Indian				
Passport No.	S5263979						

Permanent Address		Mailing Address			
House No/ Building No/ Flat No House Palamadam		House No/ Building No/ Flat No	Thanduparakkal House Palamadam		
Street/ Locality/ Landmark		Street/ Locality/ Landmark			
State	Kerala	State	Kerala		
City	Malappuram	City	Malappuram		
Area	Karad	Area	Karad		
Pincode	679339	Pincode	679339		

Bajaj Allianz General Insurance Company Limited



### **Insured / Beneficiary Details**

Serial No.	Insured/ Beneficiary Name	Date of Birth	Gender	Passport No.	Nominee
1	Muhammed Ziyaraf	22/09/1999	Male	S5263979	Legal Heir
	Thanduparakkal				

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 Standard
- 2. Geographical Coverage : Worldwide Excluding USA and Canada
- 3. Departure Date : 07-OCT-24
- 4. Return Date : 06-OCT-25
- 5. No of Journey Days : 365 Days
- 6. Rider Details:

Rider Name

**Rider Sum Insured** 

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?

VEC	 NO			
YES	NO			
120	110	./		
		v		

If Yes Please provide the details in the below table

(\*) Applicable in case of family plan.

Medical Declaration of		Member 1 - No Declaration
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#### **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:

Version (1) | Printed on : 16-07-2024 08:36:48 AM|NA|BANCS|

#### 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:

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12-9910-0005537641-00

**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 PROPOSER DETAILS POLICY DETAILS Policy No. 12-9910-0005537641-00 Customer ID : PI31088331 16/07/2024 | Policy Status: ACTIVE POLICY Proposer Name: Muhammed Zivaraf Thanduparakkal Issued on Corresp. Address: Thanduparakkal House Palamadam Karad Malappuram Kerala PIN-Period of From: 07/10/2024 00:00 Hrs. 679339 Insurance To : 06/10/2025 Midnight Mobile No.: 9383448689 | e-mail id: Itzmeziyaraf@gmail.com Endorsement Dt. NA Wef. NA For intimation of Hospitalization please use our miss call facility by dialing +91 124 6174720 this will help us **IMPORTANT** Note: 24 +91 124 6174720 to assist you better. You can also write an email to travel@bajajallianz.co.in. Planned hospitalization to be notified at least 7 days in travel@bajajallianz.co.in advance before admission and emergency hospitalization within 24 hours or as soon as possible before discharge. Plan Chosen **Geographical Coverage** Worldwide Excluding USA and Canada **Travel Prime Student Standard** Member Name Date of Birth Age Gender Passport Number Nominee Name Relation Muhammed Ziyaraf Thanduparakkal 22/09/1999 Male S5263979 Legal Heir Legal Heir 24 **Basic Benefits** Max Limit Deductible **Basic Benefits** Max Limit Deductible Personal Accident \*\*\* USD 10000 USD 25000 Nil Accident to Sponsor Nil USD 500 USD 50000 USD 100 **USD 50** Medical Expense and Evacuation Bail Bond Insurance USD 100 USD 7500 **Emergency Dental Pain Relief** USD 500 Family Visit Nil USD 50000 Personal Liability USD 100000 USD 200 Repatriation Nil Loss of Checked Baggage \*\* USD 1000 Ni Tuition Fees USD 10000 Nil Accidental Death and Disability (Common USD 2500 Ni Carrier) Total Trip duration: NA Add-on Cover/ Rider Limits (Max for entire policy period) Deductible Premium Please Note: INR indicates Indian National Rupees Remarks \* Travel Prime Student Standard USD 50000: For benefit of Loss of Baggage- Per Baggage maximum of 50% and per item in the baggage 10% \*\*\* For benefit of Personal Accident- Proposer and earning spouse 100 % of sum assured. For Non-earning spouse and every additional adult 50% of Sum Assured, For Child 25% of Sum Assured \*\*\*\* For benefit of Emergency Cash Advance - Cash Advance would include delivery charges This policy does not cover any pre-existing medical condition/injury/illness/deformity and complications arising out from them that are declared or Important Note: undeclared. You will not be travelling against the advice of a physician for the purpose of obtaining medical treatment and will consent to Bajaj Allianz seeking medical information from any doctor in respect of any matter relating to my physical or mental health and you authorize and consent to him giving such information to Baiai Allianz and / or to the claims administrator or medical advisors. However this policy covers emergency medical treatment for life-threatening conditions arising out of any pre-existing medical condition up to USD 3000. Mr Muhammed Ziyaraf Thanduparakkal:No Declaration Pre-existing disease This policy covers Medical Expenses arising out of Covid-19 outside India, including Medical Expenses incurred during Quarantine period subject to the policy Special terms & condition terms and conditions. Accommodation and non-medical incidental expenses arising during Quarantine period stand excluded. We understand that this policy has been issued based on the information provided by us/our representative and the policy is not valid if any of the Declaration by Insured information provided is incorrect. We also understand that this policy does not cover pre-existing illnesses or disability or conditions arising there from as per terms and conditions mentioned in the policy Geographical Exclusion Note: Declined country list includes- Pakistan, Afghanistan, DR Congo, Iran, Iraq, Yemen, Syria, N Korea, and similar terror prone and politically unstable countries. Additionally Haj and Manasarovar Yatra are not covered. Premium before tax Rs. 5066 Premium Details: Receipt No: SYS-24-000004803514/1 Date: 16/07/2024 Instrument No: NA Bank & Branch name receipt Amount Rs. 5978 Premium Payer ID: 80063606 | Payment Mode: Agent Float | If Premium paid through SGST @9% CGST @9% IGST @ % Cess @0% Rs. 912 Cheque, the Policy is void ab-initio in case of dishonour of Cheque. Rs. 5978 Total Premium Total Premium in words: Rupees Five Thousand Nine Hundred Seventy-Eight Only Proposer GSTIN/UIN: |Place of Supply: 32 - KERALA | Company GST.No.: 32AABCB5730G126 |Invoice Number: 3224071000000001 |Company PAN: AABCB5730G | 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. Previous Policy No: NA Expiry Dt. NA Code: 10043783 Name: RAJEEVR. R | Contact No.:09349802323, E-Mail : RAJEEV.R@GMAIL.COM | | |

Jawal/Watania mobile ISRAEL 1809455174 Yes networks. ITFS mobile accessible from following mobile ΙΤΔΙ Υ 0800729207 Yes networks: Tim. Vodafone, Wind Mobile networks access 06633814376 NTT Docomo, Au (KDD) 06633814377 JAPAN and Softbank. Yes 06633814378 06633814379 MALAYSIA 1800819860 Yes Yes NETHERLANDS 08000231639 Yes Yes NEW ZEALAND 0800497242 Yes Yes Mobile access available from Sun Cellular & PHILIPPINES 180011102860 No Smart Mobile networks PORTUGAL 800827716 Yes Yes Accessible through ITES access from Mobile1, Singtel & Payphones is Starhub - airtime available from charged. All mobile Singtel network SINGAPORE 8001014293 callers need to preonly, free of charge register with Singtel. and for UIFN, there UIFN not available to is a local charge. prepaid subscribers. 00798142030103 SOUTH KOREA Yes Yes 00798142030103 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

## INDIVIDUAL TRAVEL ANNEXURE DETAILS

Mobile

Yes

No access from Paltel &

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

PayPhone/Landline

Yes

Yes

No

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

	'	0	,	0		•				
Corporate Identi	ificatio	n Number:	U66010PN2000P	LC015329	)   Se	ervice T	ax Regd.	Number A/	ABCB5730	G-S1
001										

Policy issuing office & correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc: TRIVANDRUM-5th Floor,,Rema Plaza,,Ss Kovil Road, ,Thampanoor,,Thiruvananthapuram,Kerala,INDIA,695001

Principal Location: 1602 |Service Accounting Code: 997134 .No reverse charge is payable on these services.

Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006 (India).

Toll Free Number with Exact Dialing Pattern

1800161400

0800296764

080019946

18339371046

80254114

0800916110

0800916111

0800992597

08000801356

0800938183

0680080529

1800947246

This document is system generated, hence counter signature / stamp is not required.

Stamp Duty

₹.5

For & on the behalf

Country

AUSTRALIA

AUSTRIA

BELGIUM

CANADA

DENMARK

FINLAND

FRANCE

GERMANY

HONG KONG

HUNGARY

IRELAND

Bajaj Allianz General Insurance Company Ltd.

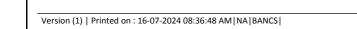
Email: travel@bajajallianz.co.in , Website www.bajajallianz.com

🖤 Demystify Insurance 📑 https://www.facebook.com/BajajAllianz; 🔲 https://twitter.com/BajajAllianz;

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12-9910-0005537641-00

### **Bajaj Allianz General Insurance Company Limited**





WhatsApp Number: +91 7507245858

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Allianz 🕕



Consolidated Stamp Duty of Rs. .5/- paid towards Insurance Stamps vide

No.CSD/17/2023/4571 Order Dated 10/11/2023 DEFACED DATE dated 10/11/2023 timing 15:32:10 PM of General Stamp Office, Mumbai, India

Challan No. MH009975032202324M Defaced No. 0005568654202324 Order

## 

12-9910-0005537641-00

Bajaj Allianz General Insurance Company Limited

Allianz (1) Caringly yours

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

Authorized Signatory

#### 

12-9910-0005537641-00

**Bajaj Allianz General Insurance Company Limited** 

### **RECEIPT**

Receipt Number	:	SYS-24-000004803514/1
Receipt Date	:	16/07/2024
Business Channel	:	Multiline

#### (Customer ID: PI31088331) a total sum of Rupees

Instrument Type	Inst./Ref. No.	Instrument Date	Bank Name	Branch Name	Amount (Rs.)
CD-IMD	NA	16-Jul-2024	NA	NA	5,978.00
				Total Amount	5978

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: TRIVANDRUM-5th Floor, Rema Plaza, Ss Kovil Road, Thampanoor, Thiruvananthapuram, Kerala, INDIA, 695001

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



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