12-9910-0005117513-00

Bajaj Allianz General Insurance Company Limited



Welcome to Bajaj Allianz Family

Midhun Raj Raju

Thettumoolayil Veedu South Arayathuruthy Chirayinkeezhu P O Trivandrum, , Chirayinkeezhu,Thiruvananthapuram,695304 Kerala Mobile No.: 9746235564 e-mail : rajmidhun6@gmail.com **Customer ID : PI30285390**

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: PERUMBAVOOR (VSO)-3rd Floor, Coastal Chambers, Opp. Mercy Estate,,Perumanoor Po, Mg Road,,Ernakulam, Cochin,Ernakulam,Kerala,INDIA,682015 Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune – 411006 (India).

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



12-9910-0005117513-00

Bajaj Allianz General Insurance Company Limited



Bajaj Allianz General Insurance Company Ltd

[Corporate Identity Number (CIN): U66010PN2000PLC015329]

[Unique Identification Number (UIN):BAJTIOP24006V032324]

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

Transcript of Proposal for INDIVIDUAL TRAVEL

Dear Midhun Raj Raju,

Policy No. 12-9910-0005117513-00

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	Midhun	Midhun							
Middle Name	Raj	Raj Last Name Raju							
Email Address	rajmidhun6@gmail. Mobile Number 9746235564								
Date of Birth	23/07/1995	Nationality	Indian						
Passport No.	U2353777								

Permanent Address		Mailing Address			
House No/ Building No/ Flat No	Thettumoolayil Veedu South Arayathuruthy Chirayinkeezhu P O Trivandrum	House No/ Building No/ Flat No	Thettumoolayil Veedu South Arayathuruthy Chirayinkeezhu P O Trivandrum		
Street/ Locality/ Landmark		Street/ Locality/ Landmark			
State	Kerala	State	Kerala		
City	Thiruvananthapur am	City	Thiruvananthapuram		
Area	Chirayinkeezhu	Area	Chirayinkeezhu		
Pincode	695304	Pincode	695304		

Bajaj Allianz General Insurance Company Limited



Insured / Beneficiary Details

Serial No.	Insured/ Beneficiary Name	Date of Birth	Gender	Passport No.	Nominee
1	Midhun Raj Raju	23/07/1995	Male	U2353777	Sruthi Raj R

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 Student Elite Gold
- 2. Geographical Coverage : Worldwide Excluding USA and Canada
- 3. Departure Date: 02-OCT-24
- 4. Return Date : 01-OCT-25
- 5. No of Journey Days : 365 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

~	

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:

12-9910-0005117513-00





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

Travel Companion Certificate cum Policy Schedule UIN. BAJTIOP24006V032324											
PROPOSER DETAILS					POLICY DETAILS						
Customer ID : PI302853	90					Policy No.	12-9910-000	05117513-00			
Proposer Name: Midhun Raj Raju			Issued on	27/04/2024	Policy Statu	s: ACTIVE	POLICY				
Corresp. Address: Thettumoolayil Veedu South Arayathuruthy Chirayinkeezhu P O			Period of	-)/2024 00:00 H						
Trivandrum , Chirayinkeezhu,Thiruvananthapuram, Kerala PIN-695304 Mobile No.: 9746235564 e-mail id: rajmidhun6@gmail.com				_	Insurance		/2025 Midnig	ht			
		hun6@gmail.com				Endorsement	Dt. NA Wef.				
Missed call +91 124 6174720 travel@bajajallianz.co.in kavel@bajajallianz.co.in											
Plan Chosen	Travel	Student Elite	Gold		Geogr	raphical Covera	ge	Worldw	ide Exclud	ing USA and Can	ada
Member Nar	ne	Date of Birth	Age	Gender		Passport Nu	ımber	1	Nominee N	lame	Relation
Midhun Raj R	aju	23/07/1995	28	Male		U23537	77		Sruthi Ra	aj R	Sister
Basic Bene	fits	Max Limit		Deductible			Basic Benef	its		Max Limit	Deductible
Family Visit		USD 7500		Nil		Emergency De	ental Pain Reli	ef		USD 500	USD 100
Personal Liability		USD 100000		USD 200		Loss of Check	ed Baggage **	k		USD 1000	USD 100
Accident to Sponsor		USD 10000		Nil			ath and Disab	ility (Common		USD 2500	Nil
Bail Bond Insurance		USD 500		USD 50		Carrier) Tuition Fees				USD 10000	Nil
Personal Accident ***		USD 25000		Nil			nses,Evacuatio	on and Repatri	ation	USD 200000	USD 100
Total Trip duration: NA						(Sublimits *)					
	Add-on	Cover/ Rider				Limits (Max	for entire po	licy period)	De	ductible	Premium
Track	a Baggage Service	UIN. BAJTGBA2405	8V01232	24			Included			Nil	INR 32
Tri	o Delay Delight UI	N. BAJHLIA19077VC	011819			USD 60			4 Hrs.	INR 1531.8	
Remarks Please Note: INR indicates Indian National Rupees * Travel Student Elite Gold USD 200000: ** 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 Important Note: This policy does not cover any pre-existing medical condition/injury/illness/deformity and complications arising out from them that are declared or 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 Bajaj 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 upto USD 3000.											
Pre-existing disease	Mr Midhun Raj Raju:No Declaration										
Special terms & condition	terms and con	This policy covers Medical Expenses arising out of Covid-19 outside India, including Medical Expenses incurred during Quarantine period subject to the policy terms and conditions. Accommodation and non-medical incidental expenses arising during Quarantine period stand excluded.									
Declaration by Insured	information pr	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 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.									

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. Geographical Exclusion

Premium before tax		Premium Details: Receipt No: 54-24-000000098777/1 Date: 27/04/2024 Instrument No: 104236356 Bank & Bra name BN00000158 BN00000158 receipt Amount Rs. 11627 Premium Payer ID: PI30285390 Payment Mode: On					
SGST @9% CGST @9% IGST @ % Cess @0%							
Total Premium	Rs. 11627	yment If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque.					
Total Premium in words: Rupees Eleven Thousand Six Hundred Twenty-Seven Only							
Proposer GSTIN/UIN: Place of Supply: 32 - KERALA Company GST.No.: 32AABCB5730G1Z6 Invoice Number: 3224041000139448 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: 90913001 Name: ACCESS INSURANCE BROKING PRIVATE LIMITED | Contact No.:7305735888, E-Mail : PO@ACCESSBROKING.COM | | |

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Bajaj Allianz General Insurance Company Limited

For & on the behalf

Stamp Duty	Consolidated Stamp Duty of Rs5/- paid towards Insurance Stamps vide
₹.5	Challan No. MH009975032202324M Defaced No. 0005568654202324 Order
	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



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This document is system generated, hence counter signature / stamp is not required. Corporate Identification Number: U66010PN2000PLC015329 | Service Tax Regd. Number AABCB5730G-ST-001

 Policy issuing office & correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc: PERUMBAVOOR (VSO)-3rd Floor,

 Coastal Chambers, Opp. Mercy Estate,,Perumanoor Po, Mg Road,,Ernakulam, Cochin,Ernakulam,Kerala,INDIA,682015

 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).

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

🚯 Demystify Insurance 📑 https://www.facebook.com/BajajAllianz; 🕒 https://twitter.com/BajajAllianz;

INDIVIDUAL TRAVEL ANNEXURE DETAILS

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	
ISRAEL	1809455174	No access from Paltel & Jawal/Watania mobile networks.	Yes	
ITALY	0800729207	ITFS mobile accessible from following mobile networks: Tim, Vodafone, Wind.	Yes	
JAPAN	06633814376 06633814377 06633814378	Mobile networks access: NTT Docomo,Au (KDD) and Softbank.	Yes	
	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	
PORTUGAL 800827/16 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.	
	00798142030103	Vac	Vac	
SOUTH KOREA	00798142030103	Yes	Yes	
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

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



12-9910-0005117513-00

Bajaj Allianz General Insurance Company Limited



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

Authorized Signatory

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12-9910-0005117513-00

Bajaj Allianz General Insurance Company Limited

RECEIPT

Receipt Number 54-24-00000098777/1 : :

Receipt Date Business Channel 27/04/2024

Retail and SME Brokers : Midhun Raj Raju

Received with thanks from

(Customer ID: PI30285390) a total sum of Rupees

Instrument Type	Inst./Ref. No.	Instrument Date	Bank Name	Branch Name	Amount (Rs.)
Online Payment	104236356	27-Apr-2024	BN00000158	BN00000158	11,627.00
				Total Amount	11627

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: PERUMBAVOOR (VSO)-3rd Floor, Coastal Chambers, Opp. Mercy Estate,,Perumanoor Po, Mg Road,,Ernakulam, Cochin,Ernakulam,Kerala,INDIA,682015 Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune – 411006 (India).

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