

पॉलिसी अनुसूची/ Policy Schedule-Professional Indemnity - Medical Establishments	
पॉलिसी संख्या / <b>Policy Number:</b> <b>26020149251000091</b>	व्यवसाय स्रोत/ Business Source: 874750
जारीकर्ता कार्यालय/ <b>Issuing Office</b> कार्यालय कोड/ Office Code: 260201 कार्यालय पता/ Office Address: MUMBAI BUSINESS OFFICE II First Floor, Sterling Cinema Building, 65,Murzaban Street, Fort, Mumbai, - 400001. राज्य कोड/ <b>State Code:</b> 27 , Maharashtra जीएसटीएन/ <b>GSTIN:</b> 27AAACN9967E1Z3 संपर्क संख्या/ <b>Contact Number:</b> 22 22018390 मोबाइल संख्या / <b>Mobile Number:</b> 0	विक्रय चैनल विवरण/ <b>Sales Channel Details</b> कोड/ Code: 91069400000001 नाम/ Name: POLICY ERA INSURANCE BROKING PRIVATE LIMITED - HO संपर्क संख्या/ <b>Contact Number:</b> 9833341817  <b>Customer Care Toll Free Number:</b> <b>1800 345 0330</b> <b>email:customer.support@nic.co.in</b>



ग्राहक का नाम/Customer Name: DR ULHAS PATIL MEDICAL COLLEGE & HOSPITAL	ग्राहक आईडी/ Customer ID: 9702475303	पैन/ PAN:
पता/ Address: DR. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON BHUSAWAL ROAD, JALGAON KHURD, शहर/City: JALGAON - DISTRICT OTHERS, जिला/District: JALGAON, राज्य/State: MAHARASHTRA, पिन/ PIN: 425309. सेल/Cell: *****08	फोन/ Phone: *****08	ई-मेल/ E-Mail: *****cj@yahoo.in

पॉलिसी प्रभावी समय घंटे को <b>Policy Effective from 10:00 hours, on 29/04/2025</b> की मध्य रात्रि तक प्रभावी/ <b>to midnight of 28/04/2026 .</b>			
प्रीमियम /Premium	₹ 1,44,428.00	कवर नोट संख्या तथा तिथि/ Cover Note Number and Date	NA
सीजीएसटी/CGST	₹ 12,998.00	प्रस्ताव संख्या और तिथि /Proposal Number and Date	8800250429832352 दिनांक/Dt. 29/04/2025
एसजीएसटी/यूटीजीएसटी SGST/UTGST	₹ 12,998.00		
आईजीएसटी/GST	₹ 0.00		
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00	रसीद संख्या और तिथि/ Receipt Number and Date	260201812510000871 दिनांक/Dt. 29/04/2025
वसूली योग्य स्टाम्प शुल्क / Recoverable Stamp Duty	₹ 0.00	पिछली पॉलिसी संख्या तथा समाप्ति तिथि/ Previous Policy Number and Expiry Date	NA
कुल / Total	₹ 1,70,424.00		
(रूपए /Rupees One Lakh Seventy Thousand Four Hundred Twenty Four केवल/Only.)			

<b>Insurance details</b>	
Retroactive date:	29/04/2025
<b>Professional Category:</b>	<b>Medical Establishments</b>
Name of the establishment/Professionals:	DR ULHAS PATIL MEDICAL COLLEGE & HOSPITAL
Address:	Dr. Ulhas Patil Medical College & Hospital, Jalgaon Bhusawal Road, Jalgaon Khurd,,Jalgaon - District Others,Jalgaon,Maharashtra,425309.
Limit Any one accident:	8,00,00,000.00
Limit any one year:	8,00,00,000.00
Unqualified Persons:	Covered
Territorial Limits:	ANYWHERE IN INDIA
Excess:	Voluntary Excess:NA
	Compulsory Excess:-0.25% on AOO limit subject to minimum of Rs. 25,000/- and maximum of RS. 10,00,000/- in India,-0.50% on AOO limit subject to minimum of Rs. 1,00,000/- and maximum of RS. 15,00,000/- ROW excluding USA/Canada and -1% on AOO limit subject to minimum of Rs. 5,00,000/- and maximum of RS. 50,00,000/- for each and every loss in USA/Canada.

As per IRDAI Circular Ref: IRDAI/NL/CIR/MISC/188/10/2023, Dated: 27/10/2023, Arbitration Clause wherever applicable in RETAIL policies shall be deemed deleted.

टिप्पणियां/ <b>Remarks:</b> ODR60374
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पॉलिसी अनुसूची/ Policy Schedule-Professional Indemnity - Medical Establishments	
पॉलिसी संख्या / <b>Policy Number:</b> <b>260201492510000091</b>	व्यवसाय स्रोत/ <i>Business Source:</i> 874750
जारीकर्ता कार्यालय/ <b>Issuing Office</b> कार्यालय कोड/ <i>Office Code:</i> 260201 कार्यालय पता/ <i>Office Address:</i> MUMBAI <i>BUSINESS OFFICE II First Floor, Sterling Cinema Building, 65,Murzaban Street, Fort, Mumbai, - 400001.</i> राज्य कोड/ <b>State Code:</b> 27 , Maharashtra जीएसटीएन/ <b>GSTIN:</b> 27AAACN9967E1Z3 संपर्क संख्या/ <i>Contact Number:</i> 22 22018390 मोबाइल संख्या / <i>Mobile Number:</i> 0	विक्रय चैनल विवरण/ <b>Sales Channel Details</b> कोड/ <i>Code:</i> 91069400000001 नाम/ <i>Name:</i> POLICY ERA INSURANCE BROKING PRIVATE LIMITED - HO संपर्क संख्या/ <i>Contact Number:</i> 9833341817  <b>Customer Care Toll Free Number:</b> <b>1800 345 0330</b> <b>email:customer.support@nic.co.in</b>



Territory - Hospital Location (JALGAON) as mentioned in the policy  
Jurisdiction - India

Retroactive date subject to proof of continuous insurance, lesser limits and narrower coverage.  
Retroactive date under above Policy with LOI limit as mentioned Below-

29/04/2025 for AOY:AOA=1:1 8,00,00,000/-

Policy is subject to :  
KYC documents & valid Medical Registration certificate.  
Exclusion of losses due to violation of NDMA/Epidemic Act .  
No notification/claims/circumstances on the date of binding.  
Losses Known/occurred during Break in period are not covered.(00/00/0000 to 00/00/0000)  
Exclusion of known or reported losses, prior acts and pending litigation.  
Policy is on Claims made basis and Right to Defend Clause.  
Correctness of data provided.  
Subject to Production of valid Registration certificate and its validity.

Procedures performed by Doctors should be approved/recognised procedures by Indian Medical Council /relevant Regulatory Body.

All other terms and conditions are as per NIC PI policy.

All prior acts and litigation prior to inception of policy period of NIC are excluded.

Excess :The insured shall bear for each and every claim a Compulsory Excess of 0.25% (percent) of the limit of indemnity shown in the schedule subject to minimum of Rs. 25,000/ and maximum of Rs. 10,00,000/- or as specifically stated in the policy schedule whichever is higher.

Disclaimer : This Policy is issued based on the understanding that the Proposal form has been duly completed and digitally accepted by the Proposer. The validity of the Policy is subject to the accuracy and authenticity of the Information provided in the digitally accepted proposal form.

जिसकी गवाही में **29/April/2025** को उपरोक्त उल्लिखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवत अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाइट <https://nationalinsurance.nic.co.in> पर उपलब्ध है, को एक अनुबंध के रूप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लिखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक की अस्वीकृति के मामले में, यह दस्तावेज स्वतः आरंभ से ही निरस्त मानी जाएगी । **IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 29/April/2025.** This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website <https://nationalinsurance.nic.co.in> shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that **IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेंसइंडियालिमिटेड ओम्बड्समैन का विवरण/Ombudsman Details: Office of the Insurance Ombudsman,IIIrd Floor, Jeevan Seva Annexe S.V.Road, Santacruz West Mumbai-400 054.  
Tel.:022-69038800/ 022-69038833  
Email: bimalokpal.mumbai@cioins.co.in.

स्टांप ड्यूटी  
Stamp  
Duty:  
(₹ 0.50)

कृते नेशनल इन्श्योरेंस कंपनी लिमिटेड/  
**For and on behalf of National Insurance Company Limited**  
अधिकृत हस्ताक्षरकर्ता/ **Authorized Signatory**

टैक्स इनवॉयस/TAX INVOICE

इनवॉयस क्र.सं./Invoice Serial No: 30942L5PE0000091

इनवॉयस तिथि/Invoice Date: 29/04/2025

आपूर्तिकर्ता का विवरण/Details of Supplier:

नेशनल इन्श्योरेंस कंपनी लिमिटेड/National Insurance Company Limited.,  
MUMBAI BUSINESS OFFICE II First Floor, Sterling Cinema Building, 65,Murzaban Street, Fort, Mumbai, - 400001  
राज्य/State : 27 , Maharashtra  
जीएसटीआएन नंबर/  
GSTIN No : 27AAACN9967E1Z3

प्राप्तकर्ता का विवरण/Details Of Receiver : DR ULHAS PATIL MEDICAL COLLEGE & HOSPITAL

पता/Address : DR. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON BHUSAWAL ROAD, JALGAON KHURD  
शहर/City : JALGAON - DISTRICT OTHERS,  
जिला/District: JALGAON,  
राज्य/State: MAHARASHTRA,  
पिन/PIN: 425309.

आपूर्ति का स्थान/Place Of Supply State : Maharashtra  
राज्य कोड/State Code : 27  
जीएसटीआईएन नंबर/GSTIN No : NA  
यूआयएन नं./UIN No : NA

सैक कोड/SAC Code	सेवा का विवरण/Description of Service	कुल/Total(₹)	छूट/Discount	टैक्स योग्य/मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/CGST		एसजीएसटी/यूटीजीएसटी/SGST/UTGST		आईजीएसटी/IGST		Kerala Flood Cess
					दर/Rate	राशि/Amount(₹)	दर/Rate	राशि/Amount(₹)	दर/Rate	राशि/Amount(₹)	राशि/Amount(₹)
997139	Other non-life insurance services (excluding reinsurance services)	1,44,428	0%	1,44,428	9%	12,998	9%	12,998	0%	0	0
<b>TOTAL</b>		<b>1,44,428</b>		<b>1,44,428</b>		<b>12,998</b>		<b>12,998</b>		<b>0</b>	<b>0</b>

कुल इनवॉयस मूल्य (अंकों में )Total Invoice Value (In figures) : ₹ 1,70,424

कुल इनवॉयस मूल्य (शब्दों में)Total Invoice Value (In words) : रूपए/Rupees One Lakh Seventy Thousand Four Hundred Twenty Four केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि/ Amount of Tax Subject to Reverse Charge : No

E.&O.E

कृते नेशनल इन्श्योरेंस कंपनी लिमिटेड/  
For and on behalf of National Insurance Company Limited

अधिकृत हस्ताक्षरकर्ता/ Authorized Signatory

