



**ADDITIONAL ENDORSEMENT DOCUMENT  
NEW INDIA FLEXI FLOATER GROUP MEDICLAIM POLICY**

<b>Insured Name</b>	: UNITED FORUM OF BANK RETIREES	<b>Insurer Office Code</b>	: VIRUDHUNAGAR D.O. (730400)
<b>Address</b>	: SWAGAT CHINAR, B BLOCK CHINAR PARK, KOLKATA 700157, W.BENGAL KOLKATA ,WEST BENGAL, 700157	<b>Address</b>	: 105/1, 1ST FLOOR, MADURAI ROAD, VIRUDHUNAGAR 626001 ,626001
<b>Telephone</b>	: //XXXXXX2284	<b>Telephone</b>	: 04562244600 / 04562266700
<b>Fax</b>	:	<b>Fax</b>	:
<b>Email</b>	: indrajitsanyal60@gmail.com	<b>Email</b>	: nia.730400@newindia.co.in
<b>Insured Pan Number</b>	: AAIAA4386Q		
<b>GSTIN</b>	: NA	<b>GSTIN</b>	: 33AAACN4165C4ZV
<b>UIN</b>	: NA	<b>SAC</b>	: 997133 (Accident and health insurance services)

<b>Endorsement attached to forming part of Policy Number</b>	: 73040034220400000032		
<b>Department</b>	: Health Insurance	<b>Cover</b>	: NA
<b>Period of Insurance</b>	: From 01/11/2022 12:00:01 AM To 31/10/2023 11:59:59 PM	<b>Endorsement No</b>	: 73040034220483000102
		<b>Effective Date</b>	: 03 November 2022
<b>Date Signed</b>	: 16/11/2022	<b>Sum Insured ₹</b>	: 0.00
<b>Additional Premium ₹</b>	: 200,746.00	<b>Additional ST/GST ₹</b>	: 36134
<b>Refund Premium ₹</b>	: N/A	<b>Refund ST/GST ₹</b>	: N/A
<b>Policy Duration</b>	:		

<b>Number of Members Added</b>	: 0
<b>Number of Members Deleted</b>	: 0

It is hereby understood and agreed that the endorsement on policy 73040034220400000032 will be in effect from 03 November 2022.

<b>Reason</b>	NOTWITHSTANDING ANYTHING CONTAINED HEREIN TO THE CONTRARY IT IS HEREBY DECLARED AND AGREED THAT LOT2 IS ADDED WEF 03/11/2022 AS PER ATTACHMENT UPLOADED. ADDITION TOTAL NO.OF LIVES:54 INCONSEQUENCE OF WHICH ADDITIONAL PREMIUM OF ₹2,36,880/-(INCL GST) IS HEREBY COLLECTED FROM INSURED. ALL OTHER TERMS AND CONDITIONS REMAIN UNALTERED.
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**Premium and GST Details**

	Rate of Tax	Amount in INR
<b>Premium</b>		₹ 200,746.00
<b>SGST</b>	0	0
<b>CGST</b>	0	0
<b>IGST</b>	18	36134
<b>TOTAL PAYABLE</b>	:	236880
<b>TOTAL PAYABLE (In words)</b>	:	RUPEES TWO LAC THIRTY-SIX THOUSAND EIGHT HUNDRED EIGHTY ONLY

IN WITNESS WHEREOF THIS POLICY has been signed at \_\_\_\_\_ this 16-Nov-22.

Place : ,  
,626001

Signature Not Verified  
Digitally signed by JAGAT KAYEE PANIGRAHI  
Date: 2022.11.16

Policy No. : 73040034220400000032 Document generated by 35864 at 16/11/2022 17:59:32 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



Date :16-Nov-22

For and on behalf of  
The New India Assurance Company Limited

Authorized Signatory

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.

Tax Invoice No : 73040022E0011954

<b>IRDA Registration Number: 190</b> <b>NIA PAN NUMBER: AAACN4165C</b>
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