



SANSKRITHI SCHOOL OF BUSINESS

Approved by AICTE, New Delhi. Affiliated to JNTUA, Anantapur.
Beedupalli Road, Prasanthigram, Puttaparthi, Sri Sathya Sai District – 515 134.

6.3.1 FILE NO 10- INSURANCE FOR STAFF



Dr. Balakoteswari

PRINCIPAL
Sanskriti School of Business,
Beedupalli Road, Prasanthigram,
PUTTAPARTHI - 515134,
Ananthapuramu (Dt.) A.P.

Policy No. FGP-15-22-7006858-00-000

Date : 28/04/2022

Customer ID 58099636

SANSKRITHI SCHOOL OF ENGINEERING

C/O.SANSKRITHI SCHOOL OF, BUSINESS BEHIND SATYASAI, SUPER SPECIALITY HOSPITAL,

ANANTAPUR,PUTTAPARTHI,

ANANTAPUR,PUTTAPARTHI, ANDHRA PRADESH - 515134

Telephone(Off) :

Intermediary Name :MAMILLAPALLI PRADYUMNA KOWSIK

Dear SANSKRITHI SCHOOL OF ENGINEERING

Welcome to the Future Generali Experience.

We thank you for choosing us for your insurance requirements. Your Policy No. is FGP-15-22-7006858-00-000.

Our initiatives will provide you with the highest standards of service, convenience and quality in insurance and it is our endeavour to constantly better your experience by innovating and evolving our basket of conveniences.

In case of any service requirement, do call our care lines below:
1800-220-233, 1860-500-3333, 022-67837800.

It will always be our endeavour to constantly better your experience by innovating and evolving our basket of conveniences. We strive to deliver service which is personalized and is totally transparent. It is our aim to be with you in your time of need.

We would request you to peruse the policy and satisfy yourself that it meets your requirements fully.

The claims would be serviced through In-House Health Administrator ,Future Generali Health(FGH)Team. The claim documents can be submitted directly to the below mentioned address.

It is mandatory to intimate the accidents to Future Generali through: Email ID - fgf@futuregenerali.in

Claims Department

Future Generali Health (FGH)

Future Generali India Insurance Company Ltd

Office No. 3, 3rd Floor, Building A, G - O - Square

Sr. No. 249 + 250, Near Mankar Chowk

Aundh Hinjewadi Link Road, Wakad

Pune, Maharashtra - 411 057

For any claim related queries please call :

Toll free number - 1800 209 1016 / 1800 103 8889


Toll free Fax - 1800 209 1017 / 1800 103 9998

Email ID - fgf@futuregenerali.in

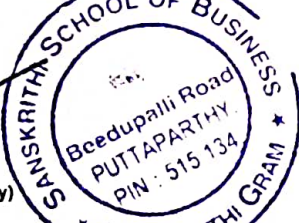
Once again, thank you for choosing to insure with Future Generali and we look forward to being of service to you.

Assuring you of our best services at all times.

For Future Generali India Insurance Co. Ltd.



(Authorized Signatory)



Please review the communication address, email or contact nos. noted on this letter for correctness. In case of any change please contact our nearest branch or call our care lines mentioned above. This will ensure you do not miss out on 'Service Updates' and 'Renewal Reminders'.

Now you can buy Health, Personal Accident, Travel, Home, Motor insurance & also renew your Future Generali Private Car Insurance policy online. Visit us at www.futuregenerali.in

For any service request please sms SERVE to 9222211100. To provide feedback on our service, kindly sms HAPPY or UNHAPPY to 9222211100. We will call you back.



Dr. Balakrishna Oori
PRINCIPAL
Sanskriti School of Business,
Beedupalli Road, Prashanthi Gram,
PUTTAPARTHI - 515134,
Ananthapuramu (Dt.) A.P.

Tax Invoice

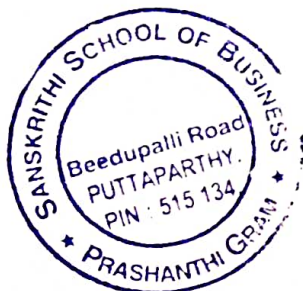
INSURED DETAILS			
Policy Number	FGP-15-22-7006858-00-000	Address of Service Provider	1st Floor D.No.7-1-21a Apdl Estate Opp Country Club Begumpet, Hyderabad, Telangana - 500016. Phone: +91 040-66038600 Fax: +91 22 67001606
Customer Id	58099636		
Invoice Number	202236ENT0022591		
Reverse Charge	No	Area Code	HYDERABAD
Name of Insured/Proposer	SANSKRITHI SCHOOL OF ENGINEERING	FGI State Code	36
Address	C/O.SANSKRITHI SCHOOL OF, BUSINESS BEHIND SATYASAI, SUPER SPECIALITY HOSPITAL, ANANTAPUR,PUTTAPARTHI, ANANTAPUR,PUTTAPARTHI, ANDHRA PRADESH - 515134	FGI GSTIN Number	36AABCF0191R1ZA
		FGI PAN Number	AABCF0191R
		Intermediary Name/Code	MAMILLAPALLI PRADYUMNA KOWSIK / 60090380
Period of Insurance	From 22 Apr 2022 To midnight of 21 Apr 2023	Date of Issue	28/04/2022
State Code	37	HSN/SAC	997133
GSTIN/UIN Number			
Nature of Service	General Insurance Service		

Received with thanks from SANSKRITHI SCHOOL OF ENGINEERING a sum of Rs.15452.00 towards Premium on the above mentioned policy.

PARTICULARS	TAX(%)	PREMIUM (Rs.)
Gross Premium		13095.00
Add : IGST Payable	18.00	2357.10
Add : Cess Payable	0.00	0.00
Total		15452.00

NOTE :

1. This is a computer generated receipt and does not require a signature.
2. In case of payment by cheque, in the event of dishonour of cheque for any reason whatsoever, insurance cover provided under this receipt automatically stands cancelled from the inception irrespective of whether a separate communication is sent or not.
3. Upon issuance of this receipt, all previously issued temporary receipts, if any related to this policy, are considered null and void.
4. Excess amount, if any, will be adjusted against subsequent policies, or will be refunded on demand.



Dr. Balakrishna Veni

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Group Personal Accident (Revised) - Policy Schedule

Policy Servicing Office: 1st Floor D.No.7-1-21a Apdl Estate Opp Country Club Begumpet, Hyderabad, Telangana - 500016. Phone: +91 040-66038600 Fax: +91 22 67001606	
Policy Number : FGP-15-22-7006858-00-000	Period of Insurance : From 22 Apr 2022 To midnight of 21 Apr 2023
Proposer : SANSKRITHI SCHOOL OF ENGINEERING	Intermediary Name/Code : MAMILLAPALLI PRADYUMNA KOWSIK / 60090380
Address : C/O SANSKRITHI SCHOOL OF, BUSINESS BEHIND SATYASAI, SUPER SPECIALITY HOSPITAL, ANANTAPUR, PUTTAPARTHI, ANANTAPUR, PUTTAPARTHI, ANDHRA PRADESH - 515134	Telephone (Mob) : Email Id : Slbginsurance@gmail.com Previous Policy No : NA
Beneficiary Type : Nominee/Insured	

In consideration of the Policyholder named herein paying to the Future Generali India Insurance Company Limited (hereinafter called the Insurer) the premium as stated in the Schedule and in reliance upon the statements made by the Policyholder in the proposal including its attachments or otherwise, and the material incorporated therein, the Insurer agrees to provide insurance against loss damage liability or expense to the extent and in the manner herein provided subject to all terms, conditions, exceptions and warranties hereinafter set forth.

Co-insurance Details		Schedule Of Premium (Rs.)	
Insurer	Share (In %)	Total Sum Insured	37500000.00
Future Generali India Insurance Company Limited	100%	Gross Premium	13095.00
		Goods and Service Tax	2357.10
			0.00
			0.00
		Total Premium	15452.00

Schedule of Insured Persons

Detailed List As per Annexure Attached

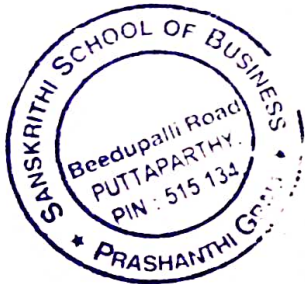
Location :	C/O.SANSKRITHI SCHOOL OF, BUSINESS BEHIND SATYASAI, SUPER SPECIALITY HOSPITAL,
Business	New Business
Total Number of Insured Persons Covered	750
Member	750
Dependents	0
Type of Policy	Individual
Employer-Employee Relationship	No
Policy Basis(Duration)	Yearly basis

Benefits Covered

Group1	Accidental Death
	Permanent Total Disablement
	Permanent Partial Disablement

Additional Coverages

Group1	NA
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Special Clauses, Conditions and Warranties

- ** Cover:- Student
- 1) Sum insured is flat Rs. 50 Thousand per Student
 - 2) In case of minor student - claim will be paid to the parent of the student
 - 3) The policy is on unnamed basis
 - 4) Students only above 5 years age are covered under the policy
- ** All definition, terms and conditions would be as per Latest "HEALTH REGULATION" as applicable **

Exclusions

1. Intentional self Injury
2. Accident while under the influence of alcohol or drugs.
3. Participation in felony, not
4. attempted violation of the law
5. Whilst engaging in Aviation or Ballooning
6. Participating in motor racing
7. Curative treatments
8. Pregnancy and childbirth
9. War, invasion, acts of foreign enemies
10. Nuclear energy, radiation
11. Any existing disablement prior to the inception of the Policy
12. sexually transmitted diseases
13. Any expense not recommended as Medically Necessary
14. Any expense incurred which is not exclusively medical in nature
15. Expenses incurred for emergency medical evacuation
16. non payable items

Important :-

1. All other Terms, Conditions and Exclusions stands as per Standard Group Personal Accident (Revised) Policy Wordings
2. In case of payment by cheque, in the event of dishonour of cheque for any reason whatsoever, insurance provided under this document automatically stands cancelled from the inception irrespective of whether a separate communication is sent or not.
3. Kindly note that this policy will not cover any claims incurred in any country which is in the sanctioned list of travel restrictions issued by Government of India or prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or the United States of America.

Claims assistance

This policy is administered by :-

In-house Administrator - Future Generali Health(FGH)

Future Generali India Insurance Co. Ltd.

Office No. 3, 3rd Floor

Building A, G - O - Square

Sr. No. 249 + 250, Near Mankar Chowk

Aundh Hinjewadi Link Road, Wakad

Pune, Maharashtra - 411057

Toll free number - 1800 209 1016 / 1800 103 8889

Toll free fax - 1800 209 1017 / 1800 103 9998

Email ID - fgh@futuregenerali.in

It is mandatory to intimate accidents to Future Generali through :

Email ID : fgh@futuregenerali.in

Receipt No : 1202272642997

Date of Issue :

2 8 0 4 2 0 2 2

Place of Issuance :

HYDERABAD

For FUTURE GENERALI INDIA INSURANCE CO. LTD.

(Signature)
(Authorised Signatory)

*Address as mentioned below.

This policy is not valid unless it is countersigned by an authorised signatory

Stamp duty of Rs. 5.00/- is paid as provided under Article Policy of Insurance 47C(b) of Indian Stamp Act, 1899 and included in Consolidated Stamp Duty Paid to the Government of Maharashtra Treasury vide Order of Addl. Controller Of Stamps, Mumbai at General Stamp Office, Fort, MUMBAI-400001. Vide This Order No. (NO. LOA/CSD/317/2022/Validity Period Dt. 16/04/2022 To Dt. 31/03/2023)/1665, Dated 07-04-2022.).



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Disclaimer : (Wherever applicable)

1. Unnamed – **For Employee**
2. If the Policy is on unnamed basis Following conditions will be applicable: —
3. Policy to be issued on all or none basis.
4. The group should have non-tamperable registers or records or procedures to identify the member insured / covered.
5. Policy should be issued position wise and grade wise.
6. Monthly declaration of addition / deletions & relevant endorsement to be passed.
7. At any point of time the total number of employees in each grade should not exceed as declared under the policy as per last endorsement.
8. At any given time the attendance sheet / roll should be available for Inspection.
9. Violation in number of persons covered will prejudice claim under the policy.
10. At the time of claim, employment proof & salary certificate should be submitted along with letter of HR certifying that claimant is the employee of organization along with his / her name and designation.



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