

Principal BMSCW <principal@bmscw.edu.in>

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**BMS GMC 2020**

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insurance@bmshospital.com <insurance@bmshospital.com>  
To: principal@bmscw.edu.in

Thu, Sep 10, 2020 at 1:02 PM




Dear sir/madam,

Please find the attachment for Insurance details.  
MAID no. will be continues same as existing cards for all old staffs.  
Thanking you,

regards,  
Insurance Team

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**3 attachments**

-  BMS EDUCATIONAL TRUST AND BMS HOSPITAL TRUST A\_1271066058.pdf  
47K
-  BMS EDUCATIONAL TRUST AND BMS HOSPITAL TRUST A\_1271067285.pdf  
39K
-  FORMING PART OF POLICY NO 67040034200400000287-converted.pdf  
2008K



POLICY SCHEDULE  
NEW INDIA FLEXI FLOATER GROUP MEDICLAIM POLICY  
IRDA/HLT/NIA/P-H/V.II/340/15-16

Insured Name		: BMS EDUCATIONAL TRUST AND BMS HOSPITAL TRUST	
<b>Insured's Details</b>		<b>Issuing Office Details</b>	
Customer ID	: PO70799372	Office Code	: BANCASSURANCE D.O. (670400) (670400)
Address	: SY NO. 618, SRI MALLIKARJUNA SWAMY TEMPLE STREET, N.R. COLONY, BENGALURU SOUTH BANGALORE, KARNATAKA, 560019	Address	: 10/1, KUKREJA HOUSE, 1ST FLOOR, KUMARAKRUPA ROAD, BANGALORE, 560001
Phone No	: 08026602547/9844193004	Phone No	: 08022265849 / 08022206832 / 8022206832
Fax	:	Fax	: 08022266128
E-mail/Fax	: trustoffice@bmshospital.com, /	E-mail/Fax	: nia.670400@newindia.co.in / 08022266128
PAN No	: AAATB9031C	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UN	: 29AAATB9031C1Z1 / NA	GSTIN	: 29AAACN4165C2ZM
		SAC	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>		<b>Business Source Code</b>	
Policy Number	: 67040034200400000287	Dev.Off level./Broker / Direct Corp. Agent/Web Aggregator	: VULCAN INT. INSURANCE BROKERS LTD. - (DM2392340) SITE 670400 (SI00103444)
Period of Insurance	: From:09/07/2020 12:00:01 AM To: 08/07/2021 11:59:59 PM	Agent/Bancassurance/Specified Person	:
Date of Proposal	: 09/07/2020	Phone No	: (080)2258673/2258681, / NA
Prev. Policy no.	: NA	E-mail/Fax	: vulcaninsbrokers@yahoo.co.in, / / /
Client Type	: Non-Corporate	Financier(s) Details	: NA

Premium	₹7035126	GST	₹1266322	Total	₹8301448	Receipt No. & Date:	6704008120000001382 23/07/2020
				(RUPEES EIGHTY-THREE LAC ONE THOUSAND FOUR HUNDRED FORTY-EIGHT ONLY)			

<b>Details of TPA</b>			
Name	: MEDI ASSIST INSURANCE TPA PVT. LTD.	Telephone	: 18002089449
Address	: MEDI ASSIST INDIA TPA PVT. LTD., TOWER D, FOURTH FLOOR, IBC KNOWLEDGE PARK, 4/1, BANNERGHATTA ROAD, BANGALORE	Fax	: 18004259559
	: IBC KNOWLEDGE PARK, 4/1, BANNERGHATTA ROAD, BANGALORE	Email	: info@mediassistindia.com,
		Toll Free No	: 18004259449

No. of Employees / Members covered	: 1318	No. of persons covered	: 3652
Maternity Benefits Opted	Normal Delivery Limit ₹ : NA	Zone Opted	: II (Delhi and Bangalore)
	Caesarian Section Limit ₹ : NA		
Deletion of 9 months waiting period	: NO		
Pre-existing cover Opted	: YES		
Deletion of 30 days waiting period	: YES		
Deletion of 2/4 year exclusion	: YES		
Limit of additional ambulance charges per person	: 0		
Additional cover Opted	: YES		
SL.No	Name of Cover	Limit per family	Overall Policy Limit

Signature Not Verified  
Digitally signed by Srinivasan Vaidyanathan  
Date: 2020.07.27

Policy No. : 67040034200400000287 Document generated by 31392 at 27/07/2020 16:49:24 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>.