

GROUP PERSONAL ACCIDENT

KEY INFORMATION SHEET

DISCLAIMER NOTE: The information mentioned below is illustrative and not exhaustive. The information must be read in conjunction with the policy wordings. In case of any conflict between the Key Information Sheet and the policy wordings, the terms and conditions mentioned in the policy wordings shall prevail.

S. No	Title	Description	Refer to Policy Wordings
1	Product Name	Group Personal Accident	
2	What is covered under the policy ?	The policy covers the Insured Person (or his Nominee/ legal heir, as the case may be) for the occurrence of any Insured Event, as specifically described, under different Benefit(s) (and Extensions - if any) arising due to an Injury sustained by the Insured Person during the Policy Period but not exceeding the Sum Insured as specified under the respective Benefits (and Extensions - if any) under Policy Schedule. The cover is for 24 hours or as mentioned in Part 1 of the policy and on a worldwide basis.	Part I of the Policy
3	Coverage and Optional Add-ons	Benefits: <ul style="list-style-type: none"> • Death • Permanent Total Disablement • Permanent Partial Disablement • Temporary Total Disablement Extensions: <ul style="list-style-type: none"> • Cover for Expenses related to Burns • Modification of residential accommodation & vehicle: • Repatriation of Mortal Remains • Ambulance Charges • Transportation Allowance (Compassionate visit) • Travel Expenses for Medical Treatment • Catastrophe Evacuation: • Cost of Clothing Damage • Loss of Job Cover • Improved Disability Benefit/ Dismemberment • Daily Cash Allowance: • Carriage of Dead Body • On Duty Cover • Children's Education Grant • Accidental Hospitalization Expenses • Mysterious disappearance • Treatment outside India (along with travelling cost & boarding & lodging of the attendant): • Medical Expenses • Out Patient Department (OPD) expenses • Loss/damage to School Bag/Books • Widowhood Cover • Purchase of Blood • Prosthesis & Artificial Limbs • Broken Bones • Legal Expenses 	Part II of the policy Clause No. 2 (Benefits) and Clause No. 3 (Extensions)
4	What are the major Exclusions in the Policy	<ul style="list-style-type: none"> • Suicide, attempt to Suicide or intentionally self- inflicted injury, sexually transmitted conditions, mental disorder, anxiety, stress or depression. • Being under influence of drugs, alcohol, or other intoxication or hallucinogens • Participation in actual or attempted felony, riot, civil commotion, crime misdemeanor 	Part I and Part II (Clause 4) of the policy Indicative list of Exclusions

		<ul style="list-style-type: none"> • Committing any breach of law of land with criminal intent. • Death or disablement resulting from Pregnancy or childbirth • Professional sports team in respect of specific benefit for inability to perform • Participation in any kind of motor speed contest • While engaged in aviation, or whilst mounting or dismounting from or traveling in any aircraft. (Not applicable for fare Paying Passengers) • Underground mining & contractor specializing in tunneling • Naval, military or air force personnel • Radioactivity, Nuclear risks, ionizing radiation 	
5	Payout Basis	<ul style="list-style-type: none"> • Reimbursement claims of covered benefits upto specified sum insured as per the scope of cover 	Part II of the policy clause 4 (i, ii, iii and iv)- Claim Administration
6	Terms of Renewal	<p>(i) The Policy can be renewed as a separate contract under the then prevailing ICICI Lombard Group Personal Accident Insurance product or its nearest substitute (in case the product ICICI Lombard Group Personal Accident Insurance is withdrawn by the Company) approved by IRDA.</p> <p>(ii) The policy shall ordinarily be renewable except on grounds of fraud, moral hazard or misrepresentation or non- cooperation by the insured.</p>	Part II of the policy Clause 10- Terms of renewal
7	Cancellation	<ul style="list-style-type: none"> • The Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact. • Insured or the Company may cancel this Policy by giving the Company or the insured, as the case may be, 15 days written notice for the cancellation of the Policy, and then the Company shall refund premium on short term rates (if initiated by the insured) or pro rata rates (if initiated by the Company) for the unexpired Policy Period. The Company shall follow the short period scale unless otherwise mutually agreed. 	Part III of the policy Clause 9- Cancellation/ Termination

GROUP PERSONAL ACCIDENT

UIN- ICIPAGP22077V062122 Misc 05

Part I of Policy: Policy Schedule

Policy No 4005/324829149/00/000 (TRUE COPY)

1. Name of the Insured:

Issued at MUMBAI

IDEAL INSTITUTE OF TECHNOLOGY

2. Mailing Address of the Insured:

Ideal Institute Of Technology, Vidyut Nagar, Kakinada

East Godavari

Andhra Pradesh Pin- 533005

3. Politically Exposed Persons (PEP)/close relative of PEP

No

4. Intermediary Details:

Agency Code1:

9872973

Agency Name:

BASHERUDDIN SD

Agent's mobile no.:

9246692910

Agent's E-mail ID :

basheer_74@rediffmail.com

5. Period of Insurance :

From: 09/01/2024 Time: 00:00 Hours

To Midnight of 08/01/2025

6. Total number of persons to be insured:

71

7. Total Capital Sum Insured:

71,000,000.00

8. Details of persons to be insured:

As per annexure attached

Benefit Table:

9. Premium

Premium Break Up	(Rs.)	Premium (Rs.)
Stamp Duty	(Rs.)	50.00
*Total Premium	(Rs.)	14,179.32

*Premium value mentioned above is inclusive of taxes applicable

10. Conditions/Endorsements

1.	A-Death
2.	B-Death +PTD
3.	C-Death +PTD +PPD
4.	Animal/Snake/Insect Bite Covered except Mosquito bite
5.	Terrorism is covered in the policy except for that arising out of Nuclear, Biological and/or Chemical means which is out side the scope of the policy.
6.	Premium for Addition & deletion to be charged on pro - rata
7.	Premium shall not be refunded for deletion if any claim is paid during the policy.
8.	Any endorsements will be from the date of addition and not from the inception of the policy.
9.	Exclusion: Being under influence of drugs, alcohol, or other intoxication or hallucinogens
10.	Exclusion: Radioactivity, Nuclear risks, ionizing radiation
11.	Exclusion: Professional sports team in respect of specific benefit for inability to perform
12.	Exclusion: Participation in any kind of motor speed contest.
13.	Exclusion: Underground mining & contractor specializing in tunneling
14.	Exclusion: Suicide, attempt to Suicide or intentionally self- inflicted injury, sexually transmitted conditions, mental disorder, anxiety, stress or depression.
15.	Exclusion: Participation in actual or attempted felony, riot, civil commotion, crime misdemeanor
16.	Exclusion: Perils of the sea are excluded from the scope of the policy While engaged in aviation, or whilst mounting or dismounting from or traveling in any aircraft. (Not applicable for fare Paying Passengers)
17.	Exclusion: While engaged in aviation, or whilst mounting or dismounting from or traveling in any aircraft. (Not applicable for fare Paying Passengers)
18.	Exclusion: Persons working in mines, explosives, Electrical installations on high tension lines, Racing, Circus People, skiing,

	mountaineering, big game hunting, ballooning, hang gliding, river rafting, winter sports, skiing, ice hockey ,polo & such other persons engaged in occupation of similar hazard.
19.	Exclusion: Animal bite/Snake Bite/Insect bite is not covered.(*This will be a part of exclusion list on pdf only when it is not covered*)
20.	Exclusion: Risk Category III people are out of the scope of the policy
21.	Exclusion: Committing any breach of law of land with criminal intent.
22.	Exclusion: Death or disablement resulting from Pregnancy or childbirth
23.	Exclusion: Naval, military or air force personnel
24.	Exclusion: Drivers are excluded from the policy

11. Clauses:

1. The Cover is subject to inclusion of loss/damage/Liability due to terrorism activity

12. Warranties:

1.	The Claim should be intimated within three months of the occurrence of the event, failing to which company shall not be liable to pay the claim
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Subject otherwise to terms and conditions of Group Personal Accident Insurance Policy.

Signed for and on behalf of the ICICI Lombard General Insurance Company Limited, at Mumbai on this date 10/01/2024 .

Gaurav Arora

Authorized Signatory

ICICI Lombard General Insurance Company Ltd.

GSTIN Reg. No: 37AAACI7904G1ZM

IL GIC GSTIN Address : F6 Fourth The Landmark Sampath Vinayak Temple Road,Vishakaptnam Andhra Pradesh 530003

HSN/SAC code : 997133 - GENERAL INSURANCE SERVICES

Policy shall stand cancelled ab initio in the event of non realisation of the premium

The stamp duty of Rs 50.0000 paid in cash or by demand draft or by payorder, vide Receipt/Challan no. CSD1820234850 dated 30/11/2023

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115

CIN: L67200MH2000PLC129408

Mailing Address:

401 & 402, 4th Floor, Interface 11,
New Linking Road, Malad (West),
Mumbai - 400 064.

Registered Office:

ICICI Lombard House, 414, Veer Savarkar Marg,
Near Siddhi Vinayak Temple, Prabhadevi,
Mumbai - 400 025.

Toll free No. : 1800 2666

Alternate No. : +9192236 22666 (chargeable)

Email : customersupport@icicilombard.com

Website : www.icicilombard.com

TAX INVOICE**(ORIGINAL FOR RECIPIENT)****Name of the Customer :** IDEAL INSTITUTE OF TECHNOLOGY**Address of the Customer :** IDEAL INSTITUTE OF TECHNOLOGY, VIDYUT NAGAR, KAKINADA . INDIA
ANDHRA PRADESH EAST GODAVARI PIN - 533005**GSTIN/ Unique Id of registered recipient :**

Invoice Number	100124829455	ICICI LOMBARD GENERAL INSURANCE COMPANY LIMITED		
Policy Number	4005/324829149/00/000	Bill from Address (IL GSTIN Address)	Aiyappa Towers,2nd floor, No 5-1-61/1 Main Road,Suryaraopet, Kakinada - 533002, Andhra Pradesh, 533002	
Invoice Date	09/01/2024	GSTIN	37AAACI7904G1ZM	

Sr. No	Particulars	PAN	SAC Code of service	Amount (₹)
1	GENERAL INSURANCE SERVICES	AAACI7904G	997133	11974

Total value of services (Premium Value without Tax) (₹) 11974

Sr No.	Applicable taxes	Rate of applicable taxes (%)	Tax Amount (₹)
1	CGST	9	1077.66
2	SGST	9	1077.66
3	IGST	0	0
4	UTGST	0	0
Total Tax Amount (₹)			2155.32
Whether tax payable under reverse charge?			No
Tax payable by the receiver (₹)			0
Total Premium inclusive Tax (₹)			14129.32

Place of Supply: ANDHRA PRADESH

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.

IRDA Reg. No. 115**Mailing Address:**
401 & 402, 4th Floor, Interface 11,
New Linking Road, Malad (West),
Mumbai - 400 064.**CIN: L67200MH2000PLC129408****Registered Office:**
ICICI Lombard House, 414, Veer Savarkar Marg,
Near Siddhi Vinayak Temple, Prabhadevi,
Mumbai - 400 025.**Toll free No. :** 1800 2666**Alternate No. :** +9192236 22666 (chargeable)**Email :** customersupport@icicilombard.com**Website :** www.icicilombard.com



Employees' State Insurance Corporation

Contribution History Of 62620357580011303 for May2022

IP Contribution	Total Employer Contribution	Total Contribution	Total Government Contribution	Total Monthly Wages
5.00	3,643.00	4,488.00	0.00	112,064.00

No.	Is Disable	IP Number	IP Name	No. Of Days	Total Wages	IP Contribution	Reason
-		6207989761	B SOMARAJU	31	14200.00	107.00	-
-		6207989803	D V S S SUDHAKARA RAO	0	0.00	0.00	On Leave
-		6207989808	K KRISHNA	31	8500.00	64.00	-
-		6207989814	K SWAMY VISWANADH	31	9200.00	69.00	-
-		6207989820	K VEERA VENKATA LAKSHMI	31	10500.00	79.00	-
-		6207989828	K SATHIBABU	31	10000.00	75.00	-
-		6207989834	K SRINIVASA RAO	24	7747.00	59.00	-
-		6207989864	P RATNA BHUSHAN	0	0.00	0.00	On Leave
-		6207989871	P SUSEELA	31	6500.00	49.00	-
-		6207989878	P VEERESH BABU	31	6500.00	49.00	-
-		6207989904	R JAYA KUMAR	0	0.00	0.00	On Leave
-		6207989908	R PARAMESWARA RAO	0	0.00	0.00	On Leave
-		6207989911	S DEVI	31	6500.00	49.00	-
-		6207989929	S TATARAO	21	5417.00	41.00	-
-		6207989949	V A S R KUMAR	0	0.00	0.00	On Leave
-		6209088427	VASAMSETTI KIRAN KUMAR	31	9500.00	72.00	-
-		6209088434	NALLALA SRIRAMA HANUMANTHARAO	31	10500.00	79.00	-

8:37:01PM

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T. Sh
Principal
IDEAL INSTITUTE OF TECHNOLOGY
VIDYUTNAGAR, KAKINADA

Member Details :-

SI. No.	UAN	Name as per		Wages						Contribution Remitted				Refunds	PMRPY / ACRY Benefit			Posting Location of the member
		ECR	UAN Repository	Gross	EPF	EPS	EDLI	EE	EPS	ER	NCP Days	Pension Share	ER PF Share		EE Share			
1	101047388786	B.SOMIA RAJU	BANDI SOMARAJU	14,200	14,200	14,200	14,200	1,704	1,183	521	0	-	-	-	-	-	N.A.	
2	101614180948	GUNAPU DURGA BHAVANI PRASAD	GUNAPU DURGA BHAVANI PRASAD	7,000	7,000	7,000	7,000	840	583	257	0	-	-	-	-	-	N.A.	
3	100182980271	K. SRINIVASA RAO	KANDULA SRINIVAS	8,300	7,747	7,747	7,747	930	645	284	2	-	-	-	-	-	N.A.	
4	101047388842	K SWAMY VISWANADH	KARRI SWAMY VISWANADH	9,200	9,200	9,200	9,200	1,104	766	338	0	-	-	-	-	-	N.A.	
5	100638971132	K KRISHNA	KONDAPALLI KRISHNA	8,500	8,500	8,500	8,500	1,020	708	312	0	-	-	-	-	-	N.A.	
6	100184406802	K. SATHI BABU	KOPPISETTI SATHIBABU	10,000	10,000	10,000	10,000	1,200	833	367	0	-	-	-	-	-	N.A.	
7	101614102826	NALLALA SRIRAMA HANUMANTHAR AO	NALLALA SRIRAMA HANUMANTH ARAO	10,500	10,500	10,500	10,500	1,260	875	385	0	-	-	-	-	-	N.A.	
8	101047388793	P.VEERESH BABU	POLISETTI VEERESH BABU	6,500	6,500	6,500	6,500	780	541	239	0	-	-	-	-	-	N.A.	
9	101047388826	P.SUSEELA	PONAGANTI SUSEELA	6,500	6,500	6,500	6,500	780	541	239	0	-	-	-	-	-	N.A.	
10	101047388755	S.DEVI	SALADI DEVI	6,500	5,417	5,417	5,417	650	451	199	5	-	-	-	-	-	N.A.	
11	101047388772	S.TATARAO	SWARNA TATARAO	9,500	9,500	9,500	9,500	1,140	791	349	0	-	-	-	-	-	N.A.	
12	101614102819	VASAMSETTI KIRAN KUMAR	VASAMSETTI KIRAN KUMAR	10,500	10,500	10,500	10,500	1,250	875	385	0	-	-	-	-	-	N.A.	
13	101047388857	K.VEERA VENKATA LAKSHMI	VEERAVENK ATALAKSHMI K	10,500	10,500	10,500	10,500	1,250	875	385	0	-	-	-	-	-	N.A.	

T. Sk
Principal

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