GROUP PERSONAL ACCIDENT POLICY - SCHEDULE

IntermediaryCode IntermediaryName Contact

OA510599 Nkosi L. 9443166377

Policy Number

Name and Address of the Insured

AG00064878000100

Period of Insurance:

AAA COLLEGE OF ENGINEERING AND TECHNOLOGY

13/08/2024 From

KAMARAJAR EDUCATIOANL ROAD

AMATHUR

VIRUDHUNAGAR DIST SIVAKASI 626005

12/08/2025 To

INSURED PERSON DETAILS	
No of persons covered: 2620	
As per Specification attached	

SUMINSUREI	DETAILS	
SCATINGUE	DELIBILA	151 350 000 00
Total Sum Insured	Rs.	454,250,000.00

	PREMIUM DETAILS	
remium	Rs.	76,383.00
TPA Fees	Rs.	0.00
SGST	Rs.	6,874.00 6,874.00
CGST	Rs.	6,874.00
Total	Rs.	90,131.00

Table of Benefits

For Student- 1225Benefit1 - 4 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit, For Staff- 170 Benefit 1-5 with wider medical benefit 1-5 wit

As per Group Personal Accident Policy Terms and Conditions attached

This Schedule is subject to the Group Personal Accident Policy Terms and Conditions and the following endorsements attached herewith:

excluded.

THIRD PARTY ADMINISTRATOR: N.A.

Address: CA

Phone: Website:

Please quote the Policy Number in all your correspondence.

IN WITNESS WHEREOF, this Policy of Insurance has been signed on 16/08/2024

Receipt No. 2400016066 Dt 14/08/2024

GSTIN No.: 33AABCR7106G1ZQ PAN Number: AABCR 7106G

Consolidated Stamp Duty paid to Government of Tamil Nadu

Issued at: Chennai

Policy Servicing Office: ATP TOWERS, No. 12-A, 5th Floor, Bye Pass Road Madurai 625 010

For Royal Sundaram General Insurance Co. Limited

Digitally Signed: S Mahalakshmi 16/08/2024@18:05:03 IST

Authorised Signatory

UIN: RSAHLGP21438V022021 IRDA Regn. No. 102