



FORM NO.- MEDI-5(GR.)

THE NEW INDIA ASSURANCE CO. LTD.

Regd. & Head Off. : New India Assurance Building, 87, Mahatma Gandhi Rd., Fort, Mumbai - 400 001.
GROUP MEDICLAIM (HOSPITALISATION AND DOMICILIARY HOSPITALISATION BENEFIT) POLICY

1 Where as the Insured designated in the Schedule hereto has by a proposal and declaration dated as stated in the schedule which shall be the basis of this Contract and is deemed to be incorporated herein, has applied to THE NEW INDIA ASSURANCE COMPANY LTD. (herein after called the Company) for the insurance herein after set forth in respect of Employees/Members (including their eligible Family Members) named in the schedule hereto (herein after called the INSURED PERSON) and has paid premium as consideration for such insurance.

1.1 NOW THIS POLICY WITNESSETH that subject to the terms, Conditions, exclusions and definitions contained herein or endorsed or otherwise expressed hereon the company undertakes that if during the period stated in the schedule or during the continuance of this policy by renewal any Insured Person shall contract any disease or suffer in from any illness (herein after called DISEASE) or sustain any bodily injury through accident (herein after called INJURY) and if such disease or injury shall require any such Insured person, upon the advice of a duly qualified Physician/Medical Specialist/Medical Practitioner (herein after called MEDICAL PRACTITIONER) or of a duly qualified surgeon (herein after called SURGEON) to incur hospitalisation/Domiciliary Hospitalisation expenses for medical /surgical treatment at any Nursing Home/Hospital in India as herein defined (herein after called HOSPITAL) as an inpatient, the company will pay to the Insured Person the amount of such expenses as would fall under different heads mentioned below, and **as are reasonably and necessarily incurred** thereof by or on behalf of such Insured Person, but not exceeding the sum Insured for the person in any one period of such insurance as mentioned in the schedule hereto.

- A) Room, Boarding Expenses as provided by the Hospitalisation/Nursing Home
- B) Nursing Expenses
- C) Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialists Fees
- D) Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Radiotherapy, Cost of Pacemaker, Artificial Limbs&Cost of Organs and similar expenses.

Note : Company's Liability in respect of all claims admitted during the period of insurance shall not exceed the Sum Insured for the person as mentioned in the schedule.

2. DEFINITIONS :

2.1 "HOSPITAL/NURSING HOME" means any institution in India established for indoor care and treatment of sickness and Injuries and which Either
(a) Has been registered either as a Hospital or Nursing Home with the local authorities and is under the supervision of a registered and qualified Medical Practitioner.

OR

(b) should comply with minimum criteria as under :

- i) it should have atleast 15 in-patient beds
- ii) fully equipped operation theatre of its own wherever surgical operations are carried out.
- iii) fully qualified Nursing Staff under its employment round the clock.
- iv) fully qualified Doctor(s) should be in-charge round the clock.

(N.B. * In Class 'C' town condition of number of beds be reduced to 10).

2.1.1 The term "HOSPITAL/NURSING HOME" shall not include an establishment which is a place of rest, a place for the aged, a place for drug-addicts or place for alcoholics, a hotel or a similar place.

2.2 "SURGICAL OPERATION" means manual and/or operative procedures for correction of deformities and defects, repair of injuries, diagnosis and cure of diseases, relief of suffering and prolongation of life.

2.3 Expenses on Hospitalisation for minimum period of 24 hours are admissible. However, this time limit is not applied to specific treatments i.e. Dialysis, Chemotherapy, Radio therapy, Eye Surgery, Dental Surgery, Lithotripsy (Kidney stone removal), D. & C. Tonsillectomy, if taken in the Hospital/Nursing Home and the Insured is discharged on the same day; the treatment will be considered to be taken under Hospitalisation Benefit.

2.4 DOMICILIARY HOSPITALISATION BENEFIT means :

Medical treatment for a period exceeding three days for such illness/disease/injury which in the normal course would require care and treatment at a hospital/nursing home but actually taken whilst confined at home in India under any of the following circumstances namely :

- 1)The condition of the patient is such that he/she cannot be removed to the hospital/nursing Home or
- 2)The patient cannot be removed to hospital/nursing home for lack of accommodation therein

Subject however that domiciliary hospitalisation benefits shall not cover :-

- 1) Expenses incurred for pre and post hospital treatment and
- 2) Expenses incurred for treatment for any of the following diseases
 1. Asthama
 2. Bronchitis
 3. Chronic Nephritis and Nephritic Syndrome
 4. Diarrhea and all type of Dysenteries including Gastro-enteritis
 5. Diabetes Mellitus and Insipidus
 6. Epilepsy
 7. Hypertension
 8. Influenza, Cough and Cold
 9. All Psychiatric or Psychosomatic Disorders
 10. Pyrexia of unknown Origin for less than 10 days
 11. Tonsillitis and Upper Respiratory Tract Infection including Laryngitis and Pharyngitis
 12. Arthritis, Gout and Rheumatism

Note : When treatment such as Dialysis, Chemotherapy, Radiotherapy etc. is taken in the Hospital/Nursing Home and the Insured is discharged on the same day, the treatment will be considered to be taken under Hospitalisation Benefit section.

Liability of the Company under this clause is restricted as stated in the schedule attached hereto.

3.0 ANY ONE ILLNESS

Any one illness will be deemed to mean continuous period of illness and it includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment may have been taken. Occurrence of same illness after a lapse of 45 days as stated above will be considered as fresh illness for the purpose of this policy.

3.1 PRE-HOSPITALISATION

Relevant medical expenses incurred during period up to 30 days prior to Hospitalisation/Domiciliary hospitalisation on disease/illness/injury sustained will be considered as part of claim mentioned under item 1.1 above.

3.2 POST-HOSPITALISATION

Relevant Medical Expenses incurred during period up to 60 days after Hospitalisation/Domiciliary hospitalisation on disease/illness/injury sustained will be considered as part of claim as mentioned under item 1.1 above.

3.3 MEDICAL PRACTITIONER

Means a person who holds a degree/diploma of a recognised institution and is registered by Medical Council of respective State of India. The term Medical Practitioner would include Physician, Specialist and Surgeon.

3.4 QUALIFIED NURSE

Means a person who holds a certificate of a recognised Nursing Council and who is employed on recommendation of the attending Medical Practitioner.

3.5 MATERNITY EXPENSES BENEFIT Means treatment taken in Hospital/Nursing Home arising from or traceable to pregnancy, childbirth including Caesarean section. This is an optional benefit available on payment of additional premium. When Maternity Expenses Benefit is opted for in the policy, Exclusion 4.12 of the policy stands deleted.

4. EXCLUSIONS :

4.0 The Company shall not be liable to make any payment under this policy in respect of any expenses whatsoever incurred by any Insured Person in connection with or in respect of:-

4.1 All diseases / injuries which are pre-existing when the cover incepts for the first time.

4.2 Any disease other than those stated in clause 4.3, contracted by the Insured Person during the first 30 days from the commencement date of the policy. This exclusion shall not however, apply if in the opinion of Panel of Medical Practitioners constituted by the Company for the purpose, the Insured Person could not have known of the existence of the Disease or any symptoms or complaints thereof at the time of making the proposal for insurance to the Company. This condition 4.2 shall not however apply in case of the insured person having been covered under this scheme or group insurance scheme with any of the Indian Insurance Companies for a continuous period of proceeding 12 months without any break.

4.3 During the first year of the operation of insurance cover, the expenses on treatment of diseases such as Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma, Hernia, Hydrocele, Congenital Internal diseases/defect, Fistula in anus, piles, Sinusitis and related disorders are not payable. If these disease (other than congenital internal diseases/defect) are pre-existing at the time of proposal they will not be covered even during subsequent period of renewal too. If Insured is aware of the existing of congenital internal disease/defect before inception of the policy, it will be treated as pre-existing.

4.4 Injury or Disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).

4.5 Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an accident, vaccination or inoculation or change of life or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.

4.6 Cost of spectacles and contact lenses, hearing aids.

4.7 Any dental treatment or surgery which is a corrective cosmetic or aesthetic procedure, including wear and tear, unless arising from disease or injury and which requires hospitalisation for treatment.

4.8 Convalescence, general debility, "Run-down" condition or rest cure, congenital external disease or defects or anomalies, sterility, venereal disease, intentional self-injury and use of intoxicating drugs/alcohol.

4.9 All expenses arising out of any condition directly or indirectly caused to or associated with Human T - Cell Lymphotropic Virus type III (HTLB-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS.

4.10 Charges incurred at Hospital or Nursing Home primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at a Hospital/Nursing Home.

4.11 Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.

4.11.1 Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons/materials.

4.12 Treatment arising from or traceable to pregnancy childbirth, miscarriage, abortion or complications of any of this, including caesarian section.

4.13 Naturopathy treatment.

5 CONDITIONS

5.1 Every notice of communication to be given or made under this policy shall be delivered in writing at the address as shown in the schedule.

5.2 The premium payable under this policy shall be paid in advance. No receipt for premium shall be valid except on the official form of the company signed by a duly authorised official of the company. The due payment of premium and the observance and fulfillment of the terms, provisions, conditions and endorsements of this policy by the Insured person in so far as they relate to anything to be done or complied with by the Insured Person shall be a condition precedent to any liability of the company to make any payment under this policy. No waiver of any terms provisions, conditions and endorsements of this policy shall be valid unless made in writing and signed by an authorised official of the company.

5.3 Upon the happening of any event which may give rise to a claim under this policy, notice with full particulars shall be sent to the company within 7 days from the date of Hospitalisation.

5.4 Claim must be filed within 10 days of discharge from the Hospital.

Note : Waiver of this Condition may be considered in extreme cases of hardship where it is proved to the satisfaction of the Company that under the circumstances in which the insured was placed it was not possible for him or any other person to give such notice or file claim within the prescribed time limit.

5.5 The Insured person shall obtain and furnish the company with all original bills, receipts and other documents upon which a claim is based and shall also give the company such additional information and assistance as the company may require in dealing with the claim.

5.6 Any medical practitioner authorised by the company shall be allowed to examine the insured person in case of any alleged injury or disease requiring Hospitalisation when and so often as the same may reasonably be required on behalf of the company.

5.7 The company shall not be liable to make any payment under this policy in respect of any claim if such claim be in any manner fraudulent or supported by any fraudulent means or device whether by the Insured person or by any other person acting on his behalf.

5.8 If at the time when any claim arises under this policy, there is in existence any other insurance (other than Cancer insurance policy in collaboration with Indian Cancer Society) whether it be effected by or on behalf of whom the claim may have arisen covering the same loss, liability, compensation, costs of Expenses, the company shall not be liable to pay or contribute more than its rateable proportion of any loss, liability, compensation, costs or expenses. The benefits under this policy shall be in excess of the benefits available under Cancer Insurance Policy.

5.9 The policy may be renewed by mutual consent. The company shall not however be bound to give notice that it is due for renewal and the Company may at any time cancel this policy by sending the Insured 30 days notice by registered letter, at the Insured's last known address and in such event the company shall refund to the insured a pro-rata premium for unexpired period of Insurance. The

company shall, however, remain liable for any claim which arose prior to the date of cancellation. The Insured may at any time cancel this policy and in such event the company shall allow refund of premium at company's short period rate only (table given here below) provided no claim has occurred up to the date of cancellation.

<u>PERIOD ON RISK</u>	<u>RATE OF PREMIUM TO BE CHARGED</u>
Up to one month	1/4th of the annual rate
Up to three months	1/2 of the annual rate
Up to six months	3/4th of the annual rate
Exceeding six months	Full annual rate

5.10 If any dispute or difference shall arise to the quantum to be paid under the policy liability being otherwise admitted such difference shall independently all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to of if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as herein before provided, if the Company has disputed or not accepted liability under or in respect of this policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this Policy that award by such arbitrator/arbitrators of the amount of the loss or damage shall be first obtained.

5.11 If the company shall disclaim liability to the insured for any claim hereunder and if the insured shall not within 12 calendar months from the date of receipt of the notice of such disclaimer notify the company in writing that he does not accept such disclaimer and intends to recover his claim from the company then the claim shall for all purposes be deemed to have been abandoned and shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

5.12 All medical/surgical treatments under this policy shall have to be taken in India and admissible claims thereof shall be payable in Indian currency.

5.13 LOW CLAIM RATIO DISCOUNT (BONUS) :

Low claim Ratio Discount at the following scale will be allowed on the Total premium at renewal only, depending upon the incurred claims ratio for the entire group insured under the Group Medclaim Insurance Policy for the preceding 3 completed years excluding the year immediately preceding the date of renewal. Where the Group Medclaim Insurance Policy has not been in force for 3 completed years, such shorter period of completed years excluding the years immediately preceding the date of renewal will be taken in to account.

<u>Incurred Claims ratio under the group Policy Discount (%)</u>	
Not Exceeding 60%	5
Not Exceeding 50%	15
Not Exceeding 40%	25
Not Exceeding 30%	30

5.14 HIGH CLAIM RATIO LOADING (MALUS)

The Total Premium payable at renewal of the group policy will be loaded at the following scale depending upon the incurred claims ratio for the entire group insured under the Group Medclaim Insurance Policy for the preceding 3 completed years excluding the year immediately preceding the date of renewal. Where the Group Medclaim Policy has not been in force for the 3 completed years, such shorter periods of completed years excluding the year immediately preceding the date of renewal will be taken in to account.

<u>Incurred Claims Ratio under the Group Policy</u>	<u>Loading %</u>
Between 70% and 100%	25
Between 101% and 125%	55
Between 126% and 150%	90

Between 151% and 175%	120
Between 176% and 200%	150
Over 200%	Cover to be reviewed

- Note :**
1. Low claim Ratio Discount (Bonus) or High Claim Ratio Loading Malus will be applicable to the Premium at renewal of the policy depending on the incurred Claims Ratio for the entire Group insured.
 2. Incurred claim would mean claims paid plus claims outstanding in respect of entire group insured under the policy, during the relevant period.
 3. Total of all discounts put together should not exceed 30%.

5.15 MATERNLTY EXPENSES BENEFIT (Wherever applicable) :

This is an optional cover which can be obtained on payment of 10% of the Total basic premium for all the Insured Persons under the Policy. Total basic premium means the total premium computed before applying Group Discount and/or High Claim Ratio Loading, Low Claim Discount and special discount in lieu of agency commission.

- 5.16** Option for Maternity Benefits has to be exercised at the inception of the policy period and no refund is allowable in case of Insured's cancellation of this option during the currency of the policy.
- 5.17** The maximum benefit allowable under this clause will be up to Rs. 50,000/- or the Sum Insured opted by the member of the group whichever is lower.
- 5.18** Special conditions applicable to Maternity Expenses benefit extension.
1. These Benefits are admissible only if the expenses are incurred in Hospital/Nursing Home as in-patients in India.
 2. A waiting period of 9 months is applicable for payment of any claim relating to normal delivery or caesarian section or abdominal operation for extra uterine pregnancy. The waiting period may be relaxed only in case of delivery, miscarriage or abortion induced by accident or other medical emergency.
 3. Claim in respect of delivery for only first two children and/or operations associated there with will be considered in respect of any one Insured Person covered under the policy or any renewal thereof. Those Insured Persons who are already having two or more living children will not be eligible for this benefit.
 4. Expenses incurred in connection with voluntary medical termination of pregnancy during the first 12 weeks from the date of conception are not covered.
 5. Pre-natal and post-natal expenses are not covered unless admitted in Hospital/Nursing Home and treatment is taken there.

- Note :** When Group Policy is extended to include Maternity Expenses Benefit, the exclusion 4.12 of the policy stands deleted.

Endorsement Attached to and forming part of Policy

It is hereby declared and agreed that the Insured person will contact the Third Party Administrator who is licensed by Insurance Regulatory & Development Authority for assistance and claim administration in the event of a claim occurring during the course of the policy. The Company will pay through Third Party Administrator to the hospital/nursing home/to the insured person the amount of such admissible expenses as per terms, conditions, limitations of the policy.

Every notice or communication in respect of a claim under this policy shall be delivered at the address of the Third Party Administrator (TPA) as shown below :

Name of TPA : **Paramount Health Services Pvt. Ltd.**

Address : 81, Barodawala Mansion,
Dr. Annie Besant Road, Worli Naka,
Mumbai - 400 018.

Telephone : (022) 56620800

Toll Free Number : 1600-22-6655

Other Call Center Numbers : Delhi (011) 26536938
Mumbai (022) 56620808
Kolkatta (033) 23216789
Chennai (044) 28586852

Fax No. : (022) 24985505 / 06

E-mail : paramount@phmhealth.com

Website : www.phmhealth.com

Name of CEO : Dr. Nayan Shah

PREMIUM SHEDULE

SUM INSURED (Overall Liability)	LIMIT OF LIABILITY - FOR DOMICILIARY - HOSPITALISATION	AGE	COMPLETED YEARS						
		Upto 35	36 - 45	46-55	56-65	66-70	71-75	76-80	
©./Rs.	©./Rs.	©./Rs.	©./Rs.	©./Rs.	©./Rs.	©./Rs.	©./Rs.	©./Rs.	©./Rs.
15000	3000	213	232	331	379	427	455	551	
20000	4000	275	298	427	490	545	586	730	
25000	5000	341	371	537	606	683	730	909	
30000	6000	366	398	572	648	724	779	972	
35000	7000	390	424	606	689	772	827	1020	
40000	8000	543	589	848	965	1075	1151	1419	
45000	9000	610	663	951	1082	1213	1295	1585	
50000	10000	676	736	1055	1199	1344	1441	1778	
55000	11000	749	815	1165	1323	1482	1585	1957	
60000	12000	787	854	1220	1392	1557	1667	2053	
65000	13000	853	928	1323	1502	1689	1805	2219	
70000	14000	920	1001	1427	1620	1813	1943	2412	
75000	15000	982	1066	1530	1736	1943	2081	2563	
80000	16000	1048	1140	1633	1854	2074	2226	2756	
85000	17000	1115	1213	1736	1971	2212	2370	2935	
90000	18000	1183	1286	1840	2088	2336	2508	3114	
95000	19000	1250	1358	1943	2205	2467	2646	3280	
100000	20000	1310	1425	2039	2322	2598	2784	3445	
105000	20750	1372	1490	2136	2433	2722	2921	3632	
110000	21500	1432	1557	2232	2543	2846	3059	3817	
115000	22250	1494	1623	2329	2653	2970	3197	4004	
120000	23000	1554	1690	2425	2763	3094	3335	4189	
125000	23750	1615	1755	2522	2874	3218	3473	4376	
130000	24500	1676	1822	2618	2984	3342	3610	4561	
135000	25250	1737	1888	2715	3094	3466	3748	4748	

140000	26000	1798	1955	2811	3204	3590	3886	4933
145000	26750	1859	2020	2908	3315	3714	4024	5120
150000	27500	1920	2087	3004	3425	3838	4162	5305
155000	28250	1975	2147	3094	3528	3955	4293	5484
160000	29000	2030	2206	3138	3632	4073	4423	5664
165000	29750	2085	2266	3273	3734	4189	4555	5843
170000	30500	2139	2326	3362	3838	4307	4685	6022
175000	31250	2194	2385	3452	3941	4423	4817	6201
180000	32000	2249	2444	3541	4045	4541	4947	6380
185000	32750	2304	2505	3632	4148	4658	5078	6559
190000	33500	2359	2564	3721	4252	4775	5209	6738
195000	34250	2414	2624	3811	4354	4892	5340	6918
200000	35000	2469	2683	3900	4458	5010	5471	7097
205000	35500	2518	2736	3982	4555	5120	5595	7269
210000	36000	2566	2789	4065	4651	5230	5719	7441
215000	36500	2615	2842	4148	4748	5340	5843	7614
220000	37000	2664	2895	4230	4844	5451	5967	7786
225000	37500	2713	2948	4313	4941	5561	6091	7958
230000	38000	2761	3001	4396	5037	5671	6215	8130
235000	38500	2810	3054	4479	5134	5781	6339	8303
240000	39000	2859	3107	4561	5230	5891	6463	8475
245000	39500	2908	3160	4644	5327	6002	6587	8647
250000	40000	2956	3213	4727	5423	6112	6711	8819
255000	40500	3005	3266	4809	5519	6222	6835	8992
260000	41000	3054	3319	4892	5616	6332	6959	9164
265000	41500	3103	3372	4975	5712	6443	7083	9336
270000	42000	3151	3425	5057	5809	6553	7207	9508
275000	42500	3200	3478	5140	5905	6663	7331	9681
280000	43000	3249	3531	5223	6002	6773	7455	9853
285000	43500	3298	3584	5305	6098	6884	7579	10025
290000	44000	3346	3637	5388	6195	6994	7703	10197
295000	44500	3395	3690	5471	6291	7104	7827	10370
300000	45000	3444	3743	5553	6388	7214	7951	10542
305000	45500	3486	3790	5630	6477	7317	8069	10707
310000	46000	3529	3836	5705	6567	7421	8185	10872
315000	46500	3572	3883	5781	6656	7524	8303	11038
320000	47000	3615	3928	5857	6746	7628	8420	11203
325000	47500	3657	3975	5933	6835	7731	8537	11369
330000	48000	3699	4022	6008	6925	7834	8654	11534
335000	48500	3743	4068	6084	7014	7937	8772	11699
340000	49000	3785	4114	6160	7104	8041	8888	11865
345000	49500	3828	4161	6236	7193	8144	9006	12030
350000	50000	3870	4207	6311	7283	8248	9122	12195
355000	50000	3914	4254	6388	7372	8351	9240	12361
360000	50000	3956	4299	6463	7462	8455	9357	12526
365000	50000	3998	4346	6539	7551	8557	9474	12691
370000	50000	4041	4393	6614	7642	8661	9591	12857
375000	50000	4084	4439	6691	7731	8764	9709	13022
380000	50000	4127	4485	6766	7821	8868	9825	13187
385000	50000	4169	4532	6842	7910	8971	9943	13353
390000	50000	4211	4578	6918	8000	9075	10059	13518

395000	50000	4255	4625	6994	8089	9177	10177	13684
400000	50000	4297	4670	7069	8179	9281	10294	13849
405000	50000	4340	4717	7145	8268	9384	10411	14014
410000	50000	4382	4764	7221	8358	9488	10528	14180
415000	50000	4426	4810	7297	8447	9591	10646	14345
420000	50000	4468	4856	7372	8537	9695	10762	14510
425000	50000	4510	4903	7449	8626	9798	10880	14676
430000	50000	4553	4949	7524	8716	9901	10996	14841
435000	50000	4596	4996	7600	8805	10004	11114	15006
440000	50000	4639	5041	7675	8896	10108	11231	15172
445000	50000	4681	5088	7752	8985	10211	11348	15337
450000	50000	4723	5135	7827	9075	10315	11465	15503
455000	50000	4767	5181	7903	9164	10418	11583	15668
460000	50000	4809	5227	7979	9254	10522	11699	15833
465000	50000	4852	5274	8055	9343	10624	11817	15999
470000	50000	4894	5320	8130	9433	10728	11933	16164
475000	50000	4937	5367	8207	9522	10831	12051	16329
480000	50000	4980	5412	8282	9612	10935	12168	16495
485000	50000	5022	5459	8358	9701	11038	12285	16660
490000	50000	5065	5506	8433	9791	11142	12402	16825
495000	50000	5108	5552	8510	9880	11244	12520	16991
500000	50000	5151	5598	8585	9970	11348	12636	17156

+ 8% SERVICE TAX

N.B. IN THE EVENT OF DISHONOUR OF PREMIUM CHEQUE THE POLICY
AUTOMATICALLY STANDS CANCELLED AS FROM INCEPTION.