

e- Tender Enquiry Document (e-TED)

FOR
RENEWAL OF INSURANCE POLICIES
[which includes Medical Claim Policy, Employees Compensation Policy, Assets and
Other Non-Medical Insurance]

e-TEDRef: HLL/CHO/HR/Insurance/24-25



BY

HLL Lifecare Limited
(A Government of India Enterprise)

HLL Bhavan - Corporate Head Office,
Poojappura - PO | Thiruvananthapuram - 695012,
Kerala, India

URL: www.lifecarehll.com

Email: thomaspa@lifecarehll.com

Phone: 0471-2354949

CIN: U25193KL1966GOI002621.

NOTICE INVITING e-TENDER

**HLL Lifecare Limited
(A Government of India Enterprise)
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Kerala, India
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TED No.: HLL/CHO/HR/Insurance/24-25 10/06/2024

Sub: RENEWAL OF INSURANCE POLICIES [which includes Medical Claim Policy, Employees Compensation Policy, Assets and Other Non-Medical Insurance]of HLL Lifecare Limited (HLL).

1. HLL Lifecare Limited (HLL) is a Mini Ratna Government of India Enterprise, under the Ministry of Health & Family Welfare, originally established in 1966 to manufacture and supply condoms to Family Planning Program of Government of India. We are the major suppliers of condoms and other contraceptive products including IUD's, tubal rings, and Oral contraceptive Pills for the Government of India – National Family Programs. We are also one of the major players in the commercial market in India, and our flagship brand MOODS Condoms is the second largest in the Indian commercial Market. We are also one of the largest producers of Blood collection bags in the country. We are also suppliers to UNFPA and other global procurement agencies.

Over the last 2 decades, HLL has transformed – from a Condom company to a Healthcare delivery company. HLL diversified into other areas in healthcare including hospital products, pharmaceuticals, hospital infrastructure management, procurement consultancy, pharma retailing, vaccines and diagnostic services.

At present HLL has 8 state-of-the art manufacturing facilities spread across India. HLL also has 4 subsidiary / associate organizations, HLL Infratech Services Limited (HITES) for hospital infrastructure development, Hindustan Latex Family Planning Promotion Trust (HLFPPT), a not-for-profit trust engaged in Social Marketing, Life Spring Hospitals for maternity care, Goa Antibiotics and Pharmaceuticals Limited (GAPL) and HLL Management Academy (HMA). HLL also had a subsidiary company named HLL Biotech Limited which got hived off from the parent company subsequently by MoHFW, Govt. of India.

HLL is also the implementing partner across the country for Health Ministry's flagship program – AMRIT (Affordable Medicines and Reliable Implants for Treatment) through which drugs are made available at highly discounted rates.

2. Accordingly, HLL invites online bids from the eligible, competent and experienced Insurance Companies (licensed and registered with IRDA) in India who are meeting the eligibility Criteria mentioned in this document to provide RENEWAL OF INSURANCE POLICIES [which includes Medical Claim Policy, Employees Compensation Policy, Fixed Assets and Other Non Medical Insurance] of HLL Lifecare Limited (HLL), its subsidiary company HLL Infratech Services Limited (HITES) and the Mediclaim Policy of former subsidiary of HLL viz HLL Biotech Limited.
3. Bidders may download the TED document from the websites URL address: <http://www.lifecarehll.com/tender&> <https://etenders.gov.in/eprocure/app> and submit their Applications online.
4. Any conditional bid shall be summarily rejected.
5. It is the responsibility of participants to go through the Tender Document to ensure furnishing all required documents as per the e-TED.
6. The Bidder should mention the complete contact address with pin code, e-mail id and Mobile no. / Landline no. of the authorized official.
7. The bidder shall quote for all the three schedules (except optional schedule 4 & 5) given in the price bid. If not, such bids will be treated as non-responsive/ non-eligible and will not be considered for evaluation.
8. Other details in this tender are indicated below:-

Sl.	Description	Schedule
a	Tender Processing Fee	Nil
b	EMD	Nil
c	<p>Last date for submission of queries: e-mail id for submission of queries: thomaspa@lifecarehll.com</p> <p>The subject in the email should be 'Selection of Insurance Company for the Insurance cover of HLL Lifecare Limited and its subsidiary / associate organisations'</p> <p><u>Note:</u> Any query received after the scheduled time may not consider.</p>	15-06-2024, 12:00hrs IST,

Sl.	Description	Schedule
d	Closing date & time for submission of online bids	20-06-2024, 15:00 hrs IST
e	Time and date of opening of bids	21-06-2024, 15:30hrs IST
f	Venue for :- • E-Tender Opening of Technical Bid	HLL Bhavan - Corporate Head Office, Poojappura - PO Thiruvananthapuram - 695012, Kerala, India

9. The Bids shall be submitted online only as mentioned below:

- (i) Technical Bid (Consisting of documents fulfilling eligibility criteria & Commercial Conditions). Bidders may name the files indicating the nature of content in pdf format which would be required to be attached in e-tender.
- (ii) Financial Bid (To be filled up as per the attached Performa, Signed, Stamped, and Scanned to pdf mode & attach under PRICE BID).

DO NOT'S

Bidders are requested **NOT** to submit the hard copy of the Financial/Price bid. In case the Financial/Price bid is submitted in physical form (hard copy), the tender shall be straightaway rejected. Also, uploading of the financial/price bid in Technical bid will **RESULT IN REJECTION** of the tender.

A) Technical Bid (Un priced Tender)

All Technical details {eg. Eligibility Criteria, Detailed Scope of Work and Terms & Conditions} should be attached in C-Folder of e-tendering module in pdf form, failing which the tender stands invalid & REJECTED.

B) Financial Bid:

1. Prices are to be quoted in the attached Price Bid format online on e-tender portal in pdf format & apply digital signature certificate. **While uploading the price, the tenderer has to ensure that the FILE NAME of the attached document SHOULD BE SAME as that of provided price bid format.**
2. The prices should be quoted for the accounting unit indicated in the e-tender document.

The bidder shall not submit hard copy of financial/price bid otherwise his/her tender shall be straightaway rejected. Also, uploading the financial/price bid in prequalification bid or Technical bid will result in rejection of the tender.

Note:

It is the responsibility of tenderer to go through the Tender Enquiry Document to ensure furnishing all required documents in addition to

above, if any. Any deviation would result in REJECTION of tender and would not be considered at a later stage at any cost by HLL.

10. In case of any queries, all prospective tenderers may send their queries, if any on the email id: thomaspa@lifecarehll.com, within the scheduled time and date mentioned in clause no. 8 above. Any query received after the scheduled time may not consider. The reply to the query will be posted in the website - www.lifecarehll.com and in CPP portal.
11. In the event of any of the above mentioned dates being declared as a holiday in the organisation, the next working day will be considered as per prescribed venue & time.
12. There is NO PROVISION of uploading late tender beyond stipulated date & time in the e-tendering system. HLL reserves the right to accept or reject all/or any of the tenders in full or part without assigning any reason thereof.
13. Amendments, if any, to the tender will be published only in the website www.lifecarehll.com and / or in CPP portal.

14. **SPECIFIC Instructions for e-Tender Participation:-**

- i. Applicants should have valid Class 3 Digital Signature Certificate with encryption.
- ii. Applicants are requested to read the tenderer help document on e-tender web site link before proceeding for submitting their Application.
- iii. The prospective Applicants have to register with the E-procurement system of HLL at <https://etenders.gov.in/e procure/app>. On completion of the registration process, the Applicants will be provided user ID and password within 7 working days. In order to submit the Applications electronically Applicants are required to have a valid Class 3 Digital Signature Certificate (signing and encryption/ decryption certificates).
- iv. Applicants are requested to register for issuance of User ID and Password well in advance in order to avoid last minute rush. The process normally takes 03 days' time.
- v. Post receipt of User ID & Password, Applicants can log on for downloading & uploading tender document.
- vi. Tenderer may download the TED document from the web site www.lifecarehll.com or www.etenders.gov.in/e procure/app.
- vii. The submission of online documents can only be done through <https://etenders.gov.in/e procure/app>.

- viii. This TED is an e-Tender and is being published online in Government eProcurement portal, <https://etenders.gov.in/eprocure/app>.
- ix. Applicants shall ensure that their submissions are complete in all respects and are to be submitted **online through e-procurement portal (as described above). No DEVIATION is acceptable.**
- x. A person signing (manually or digitally) the TED form or any documents forming part of the contract on behalf of another shall be deemed to warrantee that he has authority to bind such other persons and if, on enquiry, it appears that the persons so signing had no authority to do so, the purchaser may, without prejudice to other civil and criminal remedies, cancel the contract and hold the signatory liable for all cost and damages.
- xi. All the necessary documents as prescribed in the TED document shall be prepared and scanned in different files (in PDF format as prescribed) and uploaded for on-line submission of tender/Application.
- xii. Documents should be uploaded **online only** in the prescribed format given in the website. No other mode of submission shall be acceptable.
- xiii. The prospective Applicants may **scan the documents in low resolution (75 to 100 DPI)** instead of 200 DPI. The documents may be scanned for further lower resolution (if possible). This would reduce the size of the Cover and would be uploaded faster. The tenderer should however ensure the clarity and legibility of the text.
- xiv. The Individual file size of uploading is restricted to 3 MB. Applicants may upload multiple files (Not exceeding 3 MB individually) & relevant file name indicating the contents.

Senior Vice President (HR)

HLL Lifecare Ltd.

(A Government of India Enterprise)

HLL Bhavan - Corporate Head Office,

Poojappura - PO | Thiruvananthapuram - 695012,

Kerala, India

SECTION-1
QUALIFICATION CRITERIA

QUALIFICATION CRITERIA:

1. The insurance company should be registered under Insurance Act, 1938/IRDA (Insurance Regulatory Development Authority) and should have a valid license to carry out insurance business as required in this tender document. Copy of license should be submitted.
2. The insurance company should have a valid PAN and registered under Goods and Service Tax (GST) Act. Copy of PAN, GST should be submitted.
3. Past Experience of Similar Services: The Insurance Company should currently be providing insurance to at least 05 Government/ Semi-government/ PSU/ Govt. Undertaking/ Autonomous bodies/ Educational institutes of national repute. Copies of contracts / orders in support of Past Experience of Similar Services should be submitted.
4. The Insurance company should have average annual turnover of INR 8000.00 Crore for last 3 financial years and should submit the audited balance sheets or profit & loss accounts statement or CA certificate for turnover of last 3 financial years i.e., FY2020-21, FY2021-22 & FY2022-23. Documentary evidence in the form of certified Audited Balance Sheets of relevant periods or a certificate from the Chartered Accountant / Cost Accountant indicating the turnover details for the relevant period shall be uploaded with the bid.
5. Either the Registered Office or one of the Branch Offices of the bidder should be located in district/municipal territory of Trivandrum, Kerala.
6. The Insurance Company must have been in the Insurance business in India for at least 10 years.
7. The Insurance Company should be providing insurance to at least 5 clients in India where the annual premium is more than INR 5 crores for each client on portfolio basis.
8. The Insurance Company should be providing insurance to at least 5 clients in India where the insurance cover (sum insured) is more than INR 1000 Crores for each client.

9. The bidder should have a claim settlement ratio of 95 % and above for all types of General Insurance over the last 3 years.

10. The bidder should submit the duly sealed and signed declaration enclosed as Format-01 in this tender document.

Note:

A. Documentary evidence in support of above shall be submitted with the Technical bid.

B. The bidder should also furnish the copies of following documents in addition to the documents asked for in the tender document:

1. IRDA Accreditation Certificate

2. Details of the TPA.

3. A dummy copy of Insurance policy with detailed terms and conditions. Please note that such terms and conditions should not be in contradiction with the terms and conditions in this tender document and in any such case the terms & Condition in this tender document will supersede.

SECTION-2
POLICY WISE REQUIREMENTS

I. Insurance Coverage

A. Medical Claim Policy

1	Coverage for the Medical Claim Insurance (Family Floater Health Insurance)	Employee + 5 dependents (1+5 = 6 lives)
2	<u>Sum Insured for Normal Illness</u> (a) All Employees (Except AVP & above) (b) Associate Vice Presidents (AVPs) upto Directors (c) Chairman & Managing Director	(a) 2.5 Lakhs (b) 4 Lakhs (c) 7 Lakhs
3	Sum Insured for Critical Illness on family floater basis	Rs.2.5 Lakhs
4	Critical Illness cover	Rs.2.00 Crores
5	Accident cover	Rs. 1 Lakh for Accidental death of an employee.
6	Definition of Dependents	<p>a) Dependent parents - Father and mother whose income from all sources put together shall not exceed the financial limit prescribed by the Government of India from time to time, which at present is Rs.9000/- per month plus the amount of Dearness Relief admissible on Rs.9000/-.</p> <p>b) Dependent spouse - If spouse is employed, medical benefits are to be availed from their respective organization and in the absence of such facility in the respective organization, the concerned employee and spouse have to give joint declaration to this effect that no such facility is available from the spouse's organization, in order to avail HLL medical scheme.</p> <p>c) Dependent children</p> <p>i) Son – Till he starts earning or attain the age of 25 years whichever is earlier except in the case of mentally retarded son.</p> <p>ii) Daughter – Till she starts earning or gets married whichever is earlier except in the case of Mentally/widowed daughters.</p> <p>d) Dependent Siblings</p> <p>(i) Unmarried or Widowed sisters</p> <p>(ii) Mentally retarded sibling.</p>

7	Illness covered under Critical Illness	<ol style="list-style-type: none"> 1. Cancer 2. Heart Attack and Serious Heart Ailments 3. Stroke with Permanent Neurological Deficit 4. Coronary Artery By-pass Surgery 5. Kidney Failure and Serious Kidney Disease, Kidney Transplantation and Nephritis of any etiology plus bacterial renal failure requiring kidney transplantation/dialysis 6. Cerebral Hemorrhage 7. Irreversible Aplastic Anemia 8. End stage Lung Disease 9. Liver Failure and Cirrhosis 10. Liver Transplantation 11. Heart Valve Surgery and Major Cardiac Surgery 12. Major Burns 13. Major Organ/Born Marrow Transplantation 14. Multiple Sclerosis 15. Fulminant Hepatitis 16. Motor Neurone Disease 17. Primary Pulmonary Hypertension 18. HIV Due to Blood Transfusion and Occupationally Acquired HIV 19. Severe Encephalities 20. Severe Bacterial Meningitis 21. Blindness(Irreversible Loss of Sight) 22. Severe Glaucoma 23. Major Head Trauma 24. Paralysis(Irreversible Loss of use of Limbs) 25. Persistent Vegetative State(Apallic Syndrome)/Coma 26. Necrotising Fasciitis 27. Severe Myasthenia Gravis 28. Infective Endocarditis 29. Tuberculosis Meningitis 30. Severe Pulmonary Fibrosis 31. Severe Cardiomyopathy 32. Acquired Brain Damage 33. Brain Surgery 34. Medically Acquired HIV Infection 35. Occupationally Acquired Hepatitis B or C 36. Resection of the whole small intestine (duodenum, jejunum and ileum) 37. Severe Bronchiectasis 38. Intra cranial injury 39. Spinal Injury resulting in paraplegia 40. Total Replacement of Joints 41. Compound/ Multiple Fracture of femur
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		42. Any other life threatening illnesses requiring long term hospitalization or terminal illness expected to result in death, certified by the treating Doctor.
8	Critical Illness Claim	In the event of claims for critical illness, the sum insured in the critical illness cover shall be utilized first for the critical illness medical expenses and any additional expenses for the medical treatment over and above the critical illness cover shall be met from the normal medical illness cover of Rs.2.5 Lakhs.
9	Maternity Limit	a) Rs.50,000/- for Normal b) Rs.75,000/- for Caesarean
10	Sterilization & Infertility Treatment	Rs.10,000/ for 10 cases each per year.
11	Room charges	a) 1.5% of Sum Insured per day. b) If admitted in ICU – 2.5% of Sum Insured per day. c) Room Eligibility: A/C private room for employees in the grade of DGM & above. A/C rooms eligible for all employees in case of non availability of non A/C rooms.
12	Ambulance Charges	1 % of Sum Insured
13	Pre-existing Disease	Waived for all
14	30 days waiting Period	Waived for all
15	1 year, 2 year, 3 year, 4 year waiting period for some specific disease	Waived for all
16	9 Months waiting period for Maternity	Waived
17	Pre and Post Hospitalization Coverage	30 days for Pre-hospitalization and 60 days for Post-hospitalization.
18	New born baby cover	a) From day one of birth b) Coverage within the the normal sum insured c) Well Baby Charges upto Rs.3000/- d) Critical illness cover to be extended to the new born baby suffering from the above listed critical illnesses.
19	Accident	Sudden, unforeseen and involuntary event caused by external, visible and violent means to be covered
20	Alternative treatment	Forms of treatment other than Allopathy or modern medicines and includes Ayurveda, Unani, Sidha, Naturopathy and Homeopathy in the Indian context are to be covered upto the Sum Insured.

21	Day care Treatment	Medical treatment and/or surgical procedure which is: a) undertaken under general or local anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and b) which would have otherwise required a hospitalization of more than 24 hrs., are to be covered.
22	Hospitalization	Admission in a hospital as an in-patient for a minimum period of 24 consecutive hours except for specified procedure /treatment where such admission could be for a period of less than 24 consecutive hours. Relaxation to 24 hrs minimum duration for hospitalization is allowed in dialysis, parental chemotherapy, radiotherapy, eye surgery, lithotripsy (Kidney stone removal), dilatation and curettage (D&C), tonsillectomy, dental surgery due to accident, hysterectomy, coronary angioplasty, coronary angiography, surgery of gall bladder, pancreas & bile duct, surgery of hernia, surgery of hydrocele, surgery of prostate, gastrointestinal surgery, genital surgery, surgery of nose, surgery of throat, surgery of appendix, surgery of urinary system, knee surgery, laparoscopic therapeutic surgeries, any surgery under anesthesia, treatment of fractures/dislocation excluding hairline fracture, contracture release & minor reconstructive procedures of limbs. <u>Colonoscopy Standalone, Biopsy Standalone, Endoscopy Standalone.</u>
23	Cataract Limit	Cover up to 20% of Sum Insured or Rs. 75,000, whichever is less, for each eye
24	Dog Bite Treatment	To be covered
25	Dental Treatment	Excluded, except medical expenses incurred towards dental treatment necessitated due to an accident/injury/illness requiring Hospitalization as Inpatient treatment
26	Mental Illness cover	The medical (including Pre and Post Hospital Hospitalization Expenses) related to Mental Illness, provided the treatment shall be undertaken at a hospital with a specific department for Mental Illness, under a Medical Practitioner qualified as Psychiatrist shall be covered. Any kind of Psychological behavior, cognitive/ family/ group/ behavior/ palliative therapy or psychotherapy shall not be covered
27	Organ Donor's Medical Expenses	The Medical Expenses (excluding Pre and Post Hospitalisation Expenses) incurred for organ donor's treatment during the course of organ transplant to any Insured Person is to be covered, Provided that

		<p>(i) the donation conforms to 'The Transplantation of Human Organs Act 1994'</p> <p>(ii) the Insured Person has been Medically Advised to undergo organ transplant, or the Insured Person has been certified by a qualified Medical Practitioner to be suitable for organ donation.</p>
28	Correction of Refractive Error	The Medical Expenses (including Pre and Post Hospitalisation Expenses) incurred for expenses related to the treatment for correction of eyesight due to refractive error equal to or more than 7.5 dioptries is to be covered
29	Claim Settlement	Cashless facility to be extended invariably. In exceptional cases if cashless facility is not provided by the hospital, reimbursement of claim should be settled within 15 days of submission of bills. Such payments should be paid to HLL account.
30	Co-payment	Not applicable
31	Premium per employee	<p>Premium shall be computed per employee consisting of one employee and a maximum of 5 dependents considering as a single unit. The medical premium for employees getting covered in the Medclaim policy after the commencement of the policy period shall be computed on prorate basis for the rest of the period of the policy.</p> <p>An insured employee and his dependents shall continue to get the medical policy coverage during the policy period even though he/she got superannuated during the coverage of existing policy for whom the premium is fully paid.</p> <p>This is not applicable in the case of resigned / terminated/ disengaged employees, for whom the benefit of medical insurance shall cease on the day of his/her resignation /termination/ disengagement from service.</p>
32	Number of Members	Above 2225 employees and dependents
33	Modern Treatments	<p>Advanced Procedures/ Treatments wherever Medically Indicated either as inpatient or as part of day care treatment in a hospital or at home, coverage up to 50% of Sum Insured for below mentioned treatment procedure shall be provided</p> <p>a. Uterine Artery Embolization and HIFU (High Intensity Focuses Ultrasound)</p>

		<ul style="list-style-type: none"> b. Balloon Sinuplasty c. Deep Brain Stimulation d. Oral Chemotherapy e. Immuno Therapy f. Iodine Therapy g. Radio Therapy h. Targeted Therapy i. Intra Vertebral Injection j. Intra Vitreal Injection k. Robotic Surgeries l. Stereotactic Radio Surgeries m. Bronchical Thermoplasty n. Vaporization of the prostate (Green laser treatment for holmium laser treatment) o. Intra Operative Neuro Monitoring (IONM) p. Stem Cell Therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.
34	Additions and deletion	<ul style="list-style-type: none"> • Inclusions of employees/dependents without any restrictions during the policy period. • Inclusion of dependents without any restrictions from the date of inclusion of the employee in the policy
35.	Continuation of all the terms and conditions of the existing policy	<ul style="list-style-type: none"> • All the terms and conditions of the expiring policy shall get extended to the new policy including the additions/modifications specifically provided above.

B. The Employees Compensation Policy

The Workmen’s Compensation Insurance policy is to cover the legal liability of the employers under the Employee’s Compensation Act 1923 and Fatal Accident Act 1855 to pay the compensation to the employees or for their family in case of death or bodily injury (permanent partial disablement / permanent total disablement / temporary disablement) caused due to injury and accident at workplace (including certain occupational disease) arising out of and in the course of employment.

C. Fixed Assets and Other Non Medical Insurance to be insured:

- (i) Fixed assets of the HLL Lifecare Ltd are spread across various offices/ units/ divisions outlets of HLL across India

- (ii) The places wherein the Fixed Assets are located may be increased/decreased subject to the decision of the company to open/ close new/existing offices.
- (iii) Fixed Assets insurance and Marine Insurance, sum insured may be revised at the discretion of the company during the currency of the policy with prorate adjustment / payment of premium.

Types of Policies and Risks Covered:-

The various risks covered in the insurance policy are as below:-

SI No	Policy Type	Risk Details
1	Standard fire & peril insurance Policy	It covers various assets like Building, Plant and Machinery, Furniture & Fixtures, Electrical Equipment's & Intstallation, Lab equipment's, and other immovable and movable assets against loss or damage due to, Fire, Lightning, Explosion / Implosion, Aircraft Damage, Riot, Strike, Malicious Damages, Tempest, Cyclone, Typhoon, Hurricane, Tornado, flood, Bush Fire, Bursting and/or overflowing of Water Tanks etc
2	Electronic equipment insurance Policy (Lab equipments)	This Policy is for electronic equipment like Medical, and Biomedical Equipment's. It covers three risks – Material Damage (Equipment), External Data Media and Increased cost of working.
3	Electronic equipment insurance Policy (IT Assets)	This Policy is for electronic equipment like Computers and Peipherals, Networking items and other IT Assets. It covers three risks – Material Damage (Equipment), External Data Media and Increased cost of working.
4	Boiler & pressure Insurance policy	This policy covers the Damage to the Boiler or Pressure Plant described in the Policy Schedule due to accident (other than by fire) and covers Liability towards death of or bodily injury to any person or damage to property not belonging to the Insured in the event of explosion or collapse of the Insured Boiler/Pressure Plant
5	Machinery Breakdown Insurance policy	It covers unforeseen and sudden physical damage caused to the machinery mentioned in the policy schedule at the covered location
6	Special contingency Insurance policy	This is taken only for Laptops, and it covers all specified damages related to Laptops.
7	Fire declaration Policy	It covers Loss or damage to insured property due to fire. Now we have this policy only for Inventory handling at the factory/HCS/C&F/RBD
8	Burglary insurance Policy	It covers Loss or damage to insured property due to burglary. Now we have this policy only for Inventory handling at the factory/HCS/C&F/RBD. It is proposed to cover the Burglary insurance for Fixed Assets which are included in the Standard fire & peril insurance Policy as above.

9	Fidelity insurance policy	It covers financial losses in the event of a breach of trust by an employee. This policy covers monetary loss as a result of forgery, embezzlement, or fraud / dishonesty or fraudulent conversion of money or money's worth or goods by our company salaried employees
10	Money insurance policy	It covers loss of money in transit, Loss of money in safe.
11	Marine insurance Policy	It covers, loss or damage to goods whilst being transported by rail, road, sea and/or air. This policy included Marine incoming, outgoing, Furnace oil/gas, marine imports, exports etc.

Sum to be insured for assets:-

The sum to be insured for assets based in Company offices (All over India) at the beginning shall be as below:-

SI No	Policy Type	Amount (in Rs./ Lacs)
1	Standard fire & peril insurance Policy (Burglary should be covered)	88,880.15
2	Electronic equipment insurance Policy (Lab equipments)	2860.79
3	Electronic equipment insurance Policy (IT Assets)	3239.46
4	Boiler & pressure Insurance policy	691.38
5	Machinery Breakdown Insurance policy	7854.31
6	Special contingency Insurance policy	217.97
7	Fire declaration Policy	48040.80
8	Burglary insurance Policy	48040.80
9	Fidelity insurance policy	6666.10
10	Money insurance policy	1881.42
11	Marine insurance Policy	70203.63
	Total	2,78,576.81

“The insured value of assets may be revised during the course of validity of policy.”

D. Post retirement Medical Insurance Cover – Group Mediclaim Policy for Retired employees and their spouse.(optional quote)

A Medical policy to cover the retired Employees & their Spouses including spouses of Deceased Employees with all existing diseases and no age bar with annual limit of Rs. 200000/- or Rs. 300000/- or Rs. 400000/- or Rs. 500000/- for Inpatient Treatment. All the costs towards treatment shall to be made admissible including consumable except the items in IRDA inadmissible list. All the policy conditions of the existing medical policy for the serving employees shall be made applicable in the post retirement medical policy except the sum insured and the critical illness cover.

Retired employees and their spouses & spouses of deceased employees covered under above Group Medclaim Policy and who wish to opt for Super Top-up Cover by paying additional premium directly to the Insurance Company may be facilitated to avail the same.

E. Medical Claim Policy Riders

Additional coverage or benefits that can be provided to cover allied expenses involved in the medical treatment/ procedures.

Note: The above optional item ('D' & 'E') and will not be considered for evaluation purpose.
The bidder at its discretion may opt to quote for this insurance and hence not compulsory.

SECTION-3
OTHER TERMS & CONDITIONS

1. The tenderer should sign on each page of the tender documents before uploading.
2. All the regular and Fixed Term contract employees of the HLL, HITES, HLL Biotech Limited and their family members irrespective of age group should be eligible to join the scheme. At present, the retirement age for all employees is 60 years.
3. Bids, which are late/ vague/ conditional/ incomplete/ not confirming to the laid down procedure in any respect, will be rejected.
4. Tenders sent by Physical submission, courier, Fax & E-mail or any other mode other than specified in this tender document will not be accepted.
5. In case of differences arising in the terms and conditions of the tender documents with the firm(s), the decision of HLL shall prevail.
6. The Policies related to Employees should have provisions for new entrants in service to get coverage from the date of joining the services of HLL.
7. The successful Company shall at its own cost comply with the provision of orders and notifications issued by IRDA and Government from time to time.
8. In case of any unsatisfactory service, suitable penalties as decided by the Competent Authority shall be levied after issuing notice.
9. In case of failure in settlement of claims within the period, the penalty will be enforced as per HLL policies / norms.
10. The period of contract will initially be for one year extendable further on mutually agreed terms and conditions, which is liable to be terminated with one month's notice, if any lapse or unsatisfactory performance of the Company/firm is noticed.

11. Courts at Thiruvananthapuram / High Court, Kerala will only have the jurisdiction to try any matter, dispute or reference between parties arising out of this TED and subsequent contract to the successful bidder. Further, it shall be governed in all respects by and constructed in accordance with the laws of India.

12. HLL reserves the right to modify/change/delete/add any further terms and conditions prior to issue of agreement.

13. Tenders submitted by the party shall remain valid for acceptance by HLL for a period of 180 days from the date of opening of the tender which period may be extended by mutual agreement and the bidder shall not cancel or withdraw the bid during this period.

14. Financial bid must include in their rates, applicable GST and any other tax and stamp duty or other levy in force levied by the Central Government or any State Government or Local Authority, if applicable.

15. HLL does not bind itself to accept the lowest or any tender and reserves to itself the right to accept or reject any or all the Tenders, either in whole or in part, without assigning any reasons for doing so.

16. It may be noted that no advisor/broker is involved in the tender.

17. The successful insurance company shall provide the services strictly in accordance with scope of work and as per detailed instructions of the Company

18. Payment Terms: Policy premium payment shall be made to the company after acceptance of offer against proforma invoice, which should be in line with the Tender requirement.

19. The Insurance Company should cover the insurance from Day 1 of commencement of policy(s) or from the retroactive date (if applicable) as specified in the policy.

20. In case of policies under retroactive dates, the Insurance Company should compulsorily cover all the terms and conditions as per the existing policy.

21. During the validity of the current policy, no revision in premium shall be considered by HLL on the basis of actual claim ratio or any enhancement in the premium pointed out by

any statutory or other authority.

22. Once assigned the insurance for any given period, the insurance company shall have no right to unilaterally terminate the operation of the policy during this period.

23. Confidentiality of all HLL information/documents to be ensured by the insurance company at all times.

24. More than one bid from the same insurance company will be treated as disqualification of all bids submitted by the same party.

25. Canvassing, Fraud and Corrupt practices: Bidders are hereby informed that canvassing in any form for influencing the process of notification of award would result in disqualification of the Bidder. Further, they shall observe the highest standard of ethics and will not indulge in any corrupt, fraudulent, coercive, undesirable or restrictive practices, as the case may be.

26. Furnishing incorrect information in the offer, failure to act according to tender condition, non-fulfilment of any or whole of the contract may entail black listing in addition to taking other appropriate action as deemed fit in view of HLL.

27. This Tender is a two-bid system i.e. Technical Bid and Financial/Price Bid. The interested parties meeting Eligibility criteria may upload their offers /Technical & price quotations online as explained under **Instructions for submission of e-tenders** below:

- a) Technical Bid (Unpriced tender):** -It should have all the documents for meeting Eligibility Criteria and other Technical conditions without price quotations.

Documents to be enclosed in the Technical Bid are mentioned below-

- i) Power of Attorney issued by the competent authority in favour of person who is Digitally Signing/Uploading the tender/bid document.
- ii) Performance certificate as per Qualification Criteria
- iii) Valid Registration Certificate and other statutory permits / documents of Tenderer as per the Eligibility Criteria.
- iv) Copy of PAN No.
- v) Copy of GSTIN Registration.

- vi) Copies of documents as mentioned in the qualification criteria
 - vii) Sealed and signed declaration enclosed as Format-01 in this tender document.
 - viii) Schedule 4 & 5 (Optional)
- b) The validity of the offer/tender should be 180 days from the date of the opening of the tender. Any tender having lesser validity shall be liable for rejection.
- c) **Financial Bid:-** Price Quotations/Price Bid shall be submitted without any additional condition and are to be submitted in the recommended format only, failing which the tender will be liable for rejection.
- d) Price Quotations/Price Bids will be opened only when the tenderer fulfils the eligibility and Technical conditions.
- e) The tender currency should be only in Indian rupees..

Special Terms and Conditions:

1. Cashless facility should be provided in at least one major multi-specialty hospitals located in Head Office, all regional and branch offices of HLL, provided at www.lifecarehll.com. Details of such Hospitals are to be provided. All transactions with these hospitals should be totally cashless.
2. There should be a dedicated helpline (24 x 7) from the TPA of Insurance Company available and the contact details should be furnished in the tender. Contact details of the Third Party Administrator [TPA] should be provided by the Insurance Company including the name of the contact person, contact numbers and postal & email address.
3. Doorstep reimbursement facility for cases of reimbursement to individual and reimbursement amount can be made directly to the members only preferably within 15 days from the date of submission of required documents. The response time by the TPA at the time of admission should be maximum of six hours.
4. Reports including the claims of individuals and the details of settlement are to be furnished to HLL on monthly basis or as and when required by HLL.

5. Admission and discharge to and from the hospital preferably on 24x7 basis.
6. Consortium, Partnership and Alternative Tenders are not permitted.

SECTION-4
PRICE BID FORMAT

The premium should be quoted in the format as given below:

Schedule 1 [Medical Policy]	
Description	*Premium in Rs.
Medical Claim Policy	
Total	

***Exclusive of applicable GST**

Schedule 2 [Non-Medical Policies]		
SI No.	Description	*Premium in Rs.
1	The Employees Compensation Policy	
2	Fixed Assets and Other Non Medical Insurance Policy:	
	- Standard fire & peril insurance Policy	
	- Electronic equipment insurance Policy (Lab equipments)	
	- Electronic equipment insurance Policy (IT Assets)	
	- Boiler & pressure Insurance policy	
	- Machinery Breakdown Insurance policy	
	- Special contingency Insurance policy	
	- Fire declaration Policy	
	- Burglary insurance Policy	
	- Fidelity insurance policy	
	- Money insurance policy	
	- Marine insurance Policy	
	Total	

***Exclusive of applicable GST**

Schedule 3 [Combined Policy]		
SI No.	Description	*Premium in Rs.
1	Medical Claim Policy	
2	The Employees Compensation Policy	
3	Fixed Assets and Other Non Medical Insurance Policy:	
	- Standard fire & peril insurance Policy	
	- Electronic equipment insurance Policy (Lab equipments)	
	- Electronic equipment insurance Policy (IT Assets)	
	- Boiler & pressure Insurance policy	
	- Machinery Breakdown Insurance policy	
	- Special contingency Insurance policy	
	- Fire declaration Policy	

	- Burglary insurance Policy	
	- Fidelity insurance policy	
	- Money insurance policy	
	- Marine insurance Policy	
Total		

Exclusive of applicable GST

Schedule 4 Post Retirement Group Medclaim Policy Optional item #		
SI No.	Description	*Premium in Rs.
1	Post retirement Medical Insurance Cover – Group Medclaim Policy for Retired employees and their spouse	

***Exclusive of applicable GST**

Schedule 5 Medical Claim Policy Riders #		
SI No.	Description	*Premium in Rs.
1	Riders to cover the allied expenses in Medical Treatment/ Procedure.	

Exclusive of applicable GST*# Optional items shall not be considered for evaluation.****Note:**

1. The bidder should quote for all the policies mentioned in schedules 1, 2 & 3 (except optional Schedule 4 & 5 Policy) with individual rate exclusive of GST. If not the bid will be treated as non-responsive and will not be considered for evaluation.
2. Even though ranking of bidders will be done separately for the schedules 1, 2 & 3, HLL reserves the right to decide whether to renew Medical Policy alone or Non-medical Policies alone or both insurance policies in combined manner taking into consideration the best interest of HLL from the viewpoint of financial prudence.
3. Optional item in Schedule 4 & 5 will not be considered for evaluation purpose. However, HLL may place order to the lowest optional quote, if the quote is found justifiable.
4. The format given is only for illustrative purpose and the premium amount (Financial bid) should quote only in the allotted place in the CPP Portal and not to upload as a scan copy with Technical bid documents. The bidder should not upload/disclose the premium amount in the technical bid.

SECTION-5

SPECIAL CONDITIONS OF CONTRACT [SCC]

1. The bidder shall quote for all the policies in schedules 1, 2 &3 (except optional Schedule 4 &5) in SECTION-4 of this tender document. If not, such bid will be treated as non-responsive and will not be considered for evaluation.

FORMAT-01

DECLARATION

TED Ref: HLL/CHO/HR/Insurance/24-25

I / We, hereby agreed to abide all the terms and condition of the (TED)

No.**HLL/CHO/HR/Insurance/24-25**

I / We, hereby declare that I am / we are fulfilling the eligibility criteria mentioned in this (TED) No.
HLL/CHO/HR/Insurance/24-25

I/ We, hereby certify that all the information and data furnished by me/our organization with regard to this TED are true and complete to the best of our knowledge. I/ We have gone through the conditions and stipulations in details and agree to comply with the requirements and intent of it as mentioned in TED.

I/We further certify that myself/ our organization meets all the conditions of eligibility criteria laid down in this TED document.

I/ We, further specifically certify that our company is not been Black Listed/De-Listed/ debarred / suspended or put to any Holiday by any Institutional Agency/ Govt. Department/ Public Sector Undertaking/ Court in the last three years.

I /We hereby certify that in the last three years, our company has not failed to perform on any contract or have had any contract terminated for breach on our part.

I/We further certify that there is no criminal case registered against our company or against our Director.

I / We, hereby certifying that we are offering 100% services from India for the services required under this TED and hence falls under the category of 'Class 1 local supplier' as defined in Public Procurement (Preference to Make in India), Order 2017 as amended from time to time.

I / We, hereby declare that our company is not from those countries sharing borders with India and not restricted UNDER RULE 144 (XI) OF GFR 2017.

I / We, hereby declare that the terms and conditions of the Tender document issued by HLL will supersede in case of conflict with any of terms and conditions of the policy issued by us, if the order place to us.

I/We hereby confirm that during and after conclusion of the assignment, the details shall not disclose or make use in any manner, any information/data or any other material whether written or oral collected in connection with the assignment, without the prior written consent of the Authority(ies) of HLL. All material shall be the property of HLL.

I/We hereby confirm that we have quoted for all the three schedules (schedules 1,2 & 3) given in the price bid.

Sealed and signed by the Authorized representative

Annexure 1

HLL Lifecare Limited – Employee’s and dependent’s details summary

Sum Insured	250000	400000	700000	TOTAL
No. of Self	2145	36	0	2181
Total SI	550650000			

Policy Type	Floater
Self	2181
Spouse	1714
Children	2395
Parents/ in laws	2401
Dependent Siblings (unmarried or widowed sisters/ mentally retarded sisters)	3
TOTAL	8694

Age	250000	400000	700000	TOTAL
0.25 - 1	187	0	0	187
2 - 18	1725	18	0	1743
19 - 25	432	26	0	458
26 - 30	487	1	0	488
31 - 35	821	0	0	821
36 - 40	859	0	0	859
41 - 45	595	4	0	599
46 - 50	525	24	0	549
51 - 55	557	23	0	580
56 - 60	637	14	0	651
61 - 65	491	1	0	492
66 - 70	490	1	0	491
71 +	760	16	0	776
TOTAL	8566	128	0	8694

Data mandatory in case of Maternity		
Age band	Female Employees	Female Spouse
0.5 - 18	0	0
19 - 25	5	51
26 - 30	56	233
31 - 35	118	352
36 - 40	122	247
TOTAL	301	883

Annexure 2

- (i) Current year claims analysis report is provided as Enclosure 'A'**
- (ii) Critical Illness Claim Report for 3 years**

Policy No	Count of Claims	Critical Amount Claimed
571600/50/21/10002859	44	2824446
571600/50/22/10001559	33	3863921
571600/50/23/10001683	31	2827874
Grand Total	108	9516241

- (iii) No of Lives covered at the Start and end of the policy for past 3 years.**

Policy No	Lives at Inception	Lives at end of Policy
571600/50/21/10002859	7,099	8,569
571600/50/22/10001559	8,481	9,677
571600/50/23/10001683	8,990	9,669

Annexure 3

Employees Compensation policy – Number of employees to be covered in each age group and pay range is provided as Enclosure ‘B’.

Annexure 4

Details of the current insurance policies are provided as Enclosure ‘C’.

Annexure 5

(i) **SUMMARY- ASSET AND OTHER NON MEDICAL INSURANCE 01.07.2024 to 30.06.2025**

Sl No	Policy Type	Sum insured-in Lacs
		01.07.2024 to 30.06.2025
1	Standard fire & peril insurance Policy	88,880.15
2	Electronic equipment insurance Policy (Lab equipments)	2,860.79
3	Electronic equipment insurance Policy (IT Assets)	3,239.46
4	Boiler & pressure Insurance policy	691.38
5	Machinery Breakdown Insurance policy	7,854.31
6	Special contingency Insurance policy	217.97
7	Fire declaration Policy	48,040.80
8	Burglary insurance Policy	48,040.80
9	Fidelity insuarnc policy	6,666.10
10	Money insuarnc policy	1,881.42
11	Marine insurance Policy	70,203.63
	Total	2,78,576.81

(ii) Summary of Policy wise insurance Sum insured breakup (01.07.24 to 30.06.25)

2024-25,

Prev. Policy Number	Policy Type	Sum insured-in Lacs
571600/11/23/10000266	Standard fire & peril insurance Policy	61,115.39
571600/11/23/10000265	Standard fire & peril insurance Policy	12,160.17
571600/11/23/10000264	Standard fire & peril insurance Policy	15,604.60
571600/44/23/10000019	Electronic equipment policy-Lab Equip	2,860.79
571600/44/23/10000020	Electronic equipment policy-IT assets	3,239.46
571600/44/23/10000022	Boiler & pressure Insurance policy	691.38
571600/44/23/10000021	Machinery Breakdown Insurance policy	7,854.31
571600/59/23/10000197	Special contingency Insurance policy	217.97
571600/11/23/10000262	Fire declaration Policy	48,040.80
571600/59/23/10000198	Burglary insurance Policy-20% First loss	19,184.30
571600/59/23/10000198	Burglary insurance Policy-40% First loss	28,856.50
571600/59/23/10000199	Fidelity Insurance policy	6,666.10
571600/59/23/10000200	Money Insurance policy	1,881.42
571600/21/23/10000054	Marine -Incoming	3,753.00
571600/21/23/10000055	Marine -Outgoing	52,986.03
571600/21/23/10000056	Marine-Furnace Oil/Gas	1,241.58
571600/21/23/10000057	Marine-Imports	543.00
571600/21/23/10000058	Marine-Imports	1,141.36
571600/21/23/10000059	Marine Indore - outgoing	50.00
571600/21/23/10000060	Marine-Exports	10,000.00
571600/21/23/10000061	Marine -Outgoing-Assets	300.00
571600/21/23/10000062	Marine -Incoming Assets	188.65
	Total	2,78,576.81

(iii) Assets & other non-medical Insurance coverage Locations

SI No.	UNIT/Division	Company	Address
1	CMO	HLL	Central Marketing Office, Chennai. No. 185, Plot No. 1, Lingavel Tower, 100 ft. Bye Pass Road Vijayanagar, Velachery – 600042. Chennai
2	KFB	HLL	HLL kanagala factory,kanagala,belgaum-591225,Karnataka,India
3	PFT	HLL	HLL Peroorkada factory, Peroorkada, Trivandrum-695005,Kerala,India
4	KFC	HLL	KAKKANAD FACTORY COCHIN,PLOT NO:16-A/1,CSEZ,KAKKNAD,ERNAKULAM-682037
5	KFC	HLL	KAKKANAD FACTORY COCHIN,PLOT NO:16-A/1,CSEZ,KAKKNAD,ERNAKULAM-682037, Godowns Inside CSEZ
6	IFC	HLL	HLL Irapuram Factory, Plot no 1 & 2 ,Rubber park.Valayanchirangara post,Ernakulam-683557, Kerala,India
7	MFG	HLL	HLL LIFECARE LIMITED PLOT NO.70-71, SECTOR-7, IMT MANESAR GURGAON, HARYANA-122051 PHONE NO. 0124-4030949
8	CHO	HLL	HLL BHAVAN, Poojappura,Trivandrum-695012,Kerla-India
9	RND	HLL	HLL Lifecare Limited Akkulam Unit, Sreekariyam Akkulam Road, Thiruvananthapuram, Kerala 695583, India
10	AFT	HLL	HLL Akkulam factory, Sreekariyam post, Trivandrum-695017,Kerala,India
11	IBD	HLL	International busineses division, ,PLOT NO:16-A/1,CSEZ,KAKKNAD,ERNAKULAM-682037
12	HMA	HLL	HLL management academy, T.C-4/1607(1) & 4/1607(2), Kowdiar, Keston Rd, Kanaka Nagar, Nanthancodu, Thiruvananthapuram, Kerala 695003
13	LO (NOIDA)	HLL	HLL Lifecare ltd, Noida B-14A, Sector-62, Noida-201301,Uttar pradesh, India
14	ID Noida	HLL	HLL Lifecare ltd, Noida B-14A, Sector-62, Noida-201301,Uttar pradesh, India
15	PCD Noida	HLL	HLL Lifecare ltd, Noida B-14A, Sector-62, Noida-201301,Uttar pradesh, India
16	IDD South	HLL	Golden jublee block,HLL BHAVAN, Poojappura,Trivandrum-695012,Kerla-India
17	Hites North	Subsidiary Company	HLL Infra Tech Services Ltd., B-14 A, Sector 62,Noida-201 307
18	Hites South	Subsidiary Company	HLL Infra Tech Services Ltd., HLL Bhavan,Poojappura.P.O,Thiruvananthapuram-695 012
19	HCS	HLL	PAN INDIA
20	RBD	HLL	PAN INDIA
21	C&FA	HLL	PAN INDIA
22	PFT	HLL	FARADAY OZONE PRODUCTS PVT LTD 106/4A, Revenue Nagar, Saravanampatti , North, Coimbatore-641049, Tamil Nadu, India
23	PFT	HLL	Aswathy Auditorium, Building No. 62/1283, Vizhinjam village, Neyyattinkara Taluk, Thiruvananthapuram
24	Pharma Factory, Indore	HLL	Unit Chief, HLL Lifecare Limited 11/12C, Sector E Sanwer Road Industrial Area Indore - 452015. Madhaya Pradesh, India

Corporate Analysis Report

Policy Details:

Corporate Name: HLL LIFECARE LIMITED
Insurer Policy Number: '571600502310001683'
Policy Start Date: 01-Jul-2023
Policy End Date: 30-Jun-2024
Total Premium:(in Rs.) 58316373
Earned Premium:(in Rs.) 55129685
Lives Covered:(in Nos.) 9669
Report Generated By: RINO S BABU
Report Generated Date: 11-Jun-2024 11:09

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1. Incurred Claims Ratio (ICR):

Claim Status	Cashless		Member		Total	
	Nos.	Amt. (in Rs.)	Nos.	Amt. (in Rs.)	Nos.	Amt. (in Rs.)
Reported	663	44391826	306	18577334	969	62969160
Settled	528	36037047	228	11102029	756	47139076
Rejected	57	2592862	32	837491	89	3430353
Cancelled	16	1456987	0	0	16	1456987
Awaiting Utr	23	1768288	10	770401	33	2538689
Shortfall	2	70000	24	966308	26	1036308
Approved	3	94049	2	87608	5	181657
Underprocess	7	284940	5	348695	12	633635
Bills Pending	27	1187067	0	0	27	1187067
Recommended For Repudiation	0	0	3	68776	3	68776
Recommended For Approval	0	0	2	54572	2	54572
Outstanding Claims	62	3404344	46	2227584	108	5631928
Incurred (Os+Settled)	590	39441391	274	13329613	864	52771004

ICR On EP*			
Incidence Rate			95.7%
Disposal Rate	94%	88%	92%
Cost per Claims(CPC)	68410	49833	62795

2. Hospitalisation Type Details:

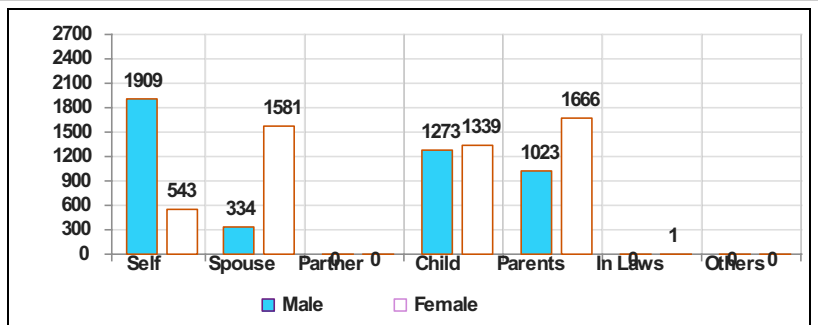
Claim Subtype	Cashless		Member	
	Nos.	Amt. (in Rs.)	Nos.	Amt. (in Rs.)
Claim Benefits	0	0	0	0
Daycare	56	1695600	23	966648
Domiciliary	0	0	0	0
Health_Check_Up	0	0	0	0
Hospitalization	498	36203784	217	10993390
Opd	0	0	0	0
Total	554	37899384	240	11960038

*Considering Only Settled ,Approved and UTR Awaiting (Cheque Pending)

Notes:
ICR = (Settled Amt + Outstanding Amt) / Annual Premium
ICR on EP* = (Settled Amt + Outstanding Amt) / Earned Premium
Earned Premium = Prorated premium as on report generated date
Cost Per Claim(CPC) = Approved Amt / Number of Events(Main Claims) for IPD + Daycare Cases
Incidents Rate = No of Claim Events/ Lives
Disposal Rate = (Settled+Rejected+Awaiting UTR+Cancelled) / Claims Reported)
* EP- Earned Premium / O/S - Outstanding
* Event = Main Claims Only (Excluding Prepost and Addendum)

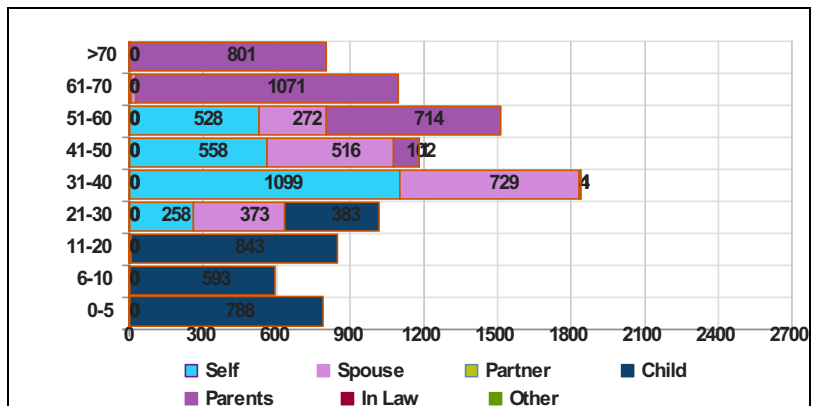
3. Member Details - Relationship & Gender wise :

Relation	Male	Female	Total	%
Self	1909	543	2452	25.36%
Spouse	334	1581	1915	19.81%
Partner	0	0	0	0.00%
Child	1273	1339	2612	27.01%
Parents	1023	1666	2689	27.81%
In Laws	0	1	1	0.01%
Others	0	0	0	0.00%
Total	4539	5130	9669	100.00%
%	47%	53%	100%	



4. Member Details - Age Band & Relationship wise :

AgeBand	Self	Spouse	Partner	Child	Parents	In Law	Other	Total	%
0-5	0	0	0	788	0	0	0	788	8.15%
6-10	0	0	0	593	0	0	0	593	6.13%
11-20	0	6	0	843	0	0	0	849	8.78%
21-30	258	373	0	383	0	0	0	1014	10.49%
31-40	1099	729	0	4	1	0	0	1833	18.96%
41-50	558	516	0	0	102	1	0	1177	12.17%
51-60	528	272	0	0	714	0	0	1514	15.66%
61-70	9	18	0	0	1071	0	0	1098	11.36%
>70	0	1	0	1	801	0	0	803	8.30%
Total	2452	1915	0	2612	2689	1	0	9669	100.00%
%	25%	20%	0%	27%	28%	0%	0%	100%	



5. Claims Approved - Age Band & Relationship wise :

Age Band	Self		Spouse		Partner		Child		Parents		In Law		Other		Total		Total%		
	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No. %	Amt. %	
0-5	0	0	0	0	0	0	0	77	2107393	0	0	0	0	0	0	77	2107393	9.70%	4.23%
6-10	0	0	0	0	0	0	21	731475	0	0	0	0	0	0	21	731475	2.64%	1.47%	
11-20	0	0	2	192584	0	0	29	1444125	0	0	0	0	0	0	31	1636709	3.90%	3.28%	
21-30	8	395608	41	1585415	0	0	4	225330	0	0	0	0	0	53	2206353	6.68%	4.43%		
31-40	43	2622976	53	2342069	0	0	0	0	0	0	0	0	0	96	4965045	12.09%	9.96%		
41-50	47	3015382	46	3304361	0	0	0	0	5	219093	0	0	0	98	6538836	12.34%	13.11%		
51-60	82	6012806	39	2830387	0	0	0	0	40	2791607	0	0	0	161	11634800	20.28%	23.34%		
61-70	1	62775	2	474568	0	0	0	0	129	11629914	0	0	0	132	12167257	16.62%	24.40%		
>70	0	0	0	0	0	0	0	0	125	7871554	0	0	0	125	7871554	15.74%	15.79%		
Total	181	12109547	183	10729384	0	0	131	4508323	299	22512168	0	0	0	794	49859422	100.00%	100.00%		
%	23%	24%	23%	22%	0%	0%	16%	9%	38%	45%	0%	0%	0%	0%	100%	100%			

* Count is only for Approved Claims(Settled and Awaiting UTR(Cheque Pending)) .

6. Claims Approved - Amount Band & Relationship wise :

Amount Band	Self		Spouse		Partner		Child		Parents		In Law		Other		Total		Total%	
	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No. %	Amt. %
00K-10K	11	132366	13	161334	0	0	17	157948	16	174849	0	0	0	0	57	626497	7.18%	1.26%
10K-20K	25	402070	25	390161	0	0	48	727005	39	695888	0	0	0	0	137	2215124	17.25%	4.44%
20K-30K	32	808360	27	680183	0	0	26	653053	50	1326755	0	0	0	0	135	3468351	17.00%	6.96%
30K-40K	32	1163917	25	899970	0	0	10	339721	41	1438422	0	0	0	0	108	3842030	13.60%	7.71%
40K-50K	13	681324	23	1069475	0	0	8	360953	26	1189353	0	0	0	0	70	3301105	8.82%	6.62%
50K-60K	8	501222	12	643155	0	0	4	222293	13	786628	0	0	0	0	37	2153298	4.66%	4.32%
60K-70K	10	700102	7	509381	0	0	7	522770	14	910526	0	0	0	0	38	2642779	4.79%	5.30%
70K-80K	5	369880	18	1339884	0	0	2	153403	14	1039481	0	0	0	0	39	2902648	4.91%	5.82%
80K-90K	11	946958	5	439350	0	0	1	81015	9	758726	0	0	0	0	26	2226049	3.27%	4.46%
90K-100K	2	183713	2	191419	0	0	1	90028	6	563304	0	0	0	0	11	1028464	1.39%	2.06%
>100K	32	6219635	26	4405072	0	0	7	1200134	71	13628236	0	0	0	0	136	25453077	17.13%	51.05%
Total	181	12109547	183	10729384	0	0	131	4508323	299	22512168	0	0	0	794	49859422	100.00%	100.00%	
%	23%	24%	23%	22%	0%	0%	16%	9%	38%	45%	0%	0%	0%	0%	100%	100%		

* Count is only for Approved Claims(Settled and Awaiting UTR (Cheque Pending)).

* Banding for Incurred Amount

7. Claims Approved - Top 15 Ailment wise :

Ailment Group	Self		Spouse		Partner		Child		Parents		In Law		Other		Total		Total%	
	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No.	Amt. (Rs.)	No. %	Amt. %
CIRCULATORY	28	2883556	11	764921	0	0	2	220811	52	5078388	0	0	0	0	93	8947676	11.71%	17.95%
RESPIRATORY	13	727214	12	552577	0	0	49	1435029	40	2561909	0	0	0	0	114	5276729	14.36%	10.58%
NEOPLASM	19	1166489	15	2121437	0	0	0	0	19	1548688	0	0	0	0	53	4836614	6.68%	9.70%
UROLOGY	11	498722	22	1555388	0	0	5	280534	26	1621685	0	0	0	0	64	3956329	8.06%	7.93%
INJURY	13	991620	8	564663	0	0	9	277283	12	1876865	0	0	0	0	42	3710431	5.29%	7.44%
ARTHROPATHIES	9	770907	4	127704	0	0	0	0	11	2165691	0	0	0	0	24	3064302	3.02%	6.15%
DIGESTIVE	18	1035493	10	722330	0	0	4	221687	18	1080055	0	0	0	0	50	3059565	6.30%	6.14%
PREGNANCY	7	363506	57	2664433	0	0	0	0	0	0	0	0	0	64	3027939	8.06%	6.07%	
INFECTIOUS	12	280372	15	427505	0	0	26	865294	14	1205376	0	0	0	0	67	2778547	8.44%	5.57%
EYE	11	435674	0	0	0	0	1	60000	50	1572856	0	0	0	0	62	2068530	7.81%	4.15%
ABNORMAL CLINICAL AND LABORATORY FINDINGS	12	418546	7	207448	0	0	7	113590	12	966391	0	0	0	0	38	1705975	4.79%	3.42%
SKIN	5	765900	4	84257	0	0	1	26219	6	801102	0	0	0	0	16	1677478	2.02%	3.36%
ENDOCRINE	2	57928	1	126355	0	0	2	73721	13	747055	0	0	0	0	18	1005059	2.27%	2.02%
BLOOD DISEASES	3	571280	1	5266	0	0	0	0	1	58644	0	0	0	0	5	635190	0.63%	1.27%
NERVOUS	2	137821	2	202965	0	0	0	0	7	203193	0	0	0	0	11	543979	1.39%	1.09%
OTHERS	16	1004519	14	602135	0	0	25	934155	18	1024270	0	0	0	0	73	3565079	9.19%	7.15%
%	23%	24%	23%	22%	0%	0%	16%	9%	38%	45%	0%	0%	0%	0%	100%	100%		
Total	181	12109547	183	10729384	0	0	131	4508323	299	22512168	0	0	0	794	49859422	100.00%	100.00%	

* Count is only for Approved Claims(Settled and Awaiting UTR (Cheque Pending)) .

8. Top 15 Cashless Hospital wise utilization :

Hospital_ID	Hospital_Name	No of Claims	Amount
HOS-KOC-661	COSMOPOLITAN HOSPITALS (P) LTD	40	3136759
HOS-KOC-151	LORDS HOSPITAL	5	963687
HOS-BLR-4697	KASBEKAR METGUD CLINIC	10	654990
HOS-THI-7004	CARITAS HOSPITAL	2	505083
HOS-KOC-52	KIMS (KERALA INSTITUTE OF MEDICAL SCIENCES)	50	3840768
HOS-KOC-53	SP FORT HOSPITAL	15	991661
HOS-KOC-2363	G. G. HOSPITAL (A UNIT OF PARAGON HOSPITAL KERALA PVT. LTD.)	20	842518
HOS-KOC-20	MEDICAL TRUST HOSPITAL	6	529743
HOS-KOC-1283	S.K. HOSPITAL	22	1526147
HOS-KOC-54	SREE UTHRADOM THIRUNAL HOSPITAL(A UNIT OF TRIVANDRUM SPECIALISTS HOSPITAL LTD)	18	872228
HOS-THI-013492	ASTER DM HEALTH CARE PVT LTD.	5	555778
HOS-KOC-1720	P. R. S. HOSPITAL	47	3413405
HOS-KOC-19	LISIE HOSPITAL	6	976325
HOS-KOC-2740	NIMS HOSPITAL	18	832408
HOS-THI-025138	NEYYAR HEALTH CARE	7	509469

9. Claims Approved - Cashless & Member Summary :

Type of claim	Events	Events%	Amount	Amount%
MEMBER	240	30.23%	11960038	23.99%
CASHLESS	554	69.77%	37899384	76.01%
TOTAL	794	100.00%	49859422	100.00%

10. Turn Around Time (TAT) :

Preauth Processing TAT :

TAT Band	Nos.	%
0 - 30 Mins	731	58.11%
30 Mins - 1 Hrs	227	18.04%
1 - 2 Hrs	173	13.75%
2 - 3 Hrs	73	5.80%
3 - 4 Hrs	30	2.38%
4 - 6 Hrs	23	1.83%
6 - 7 Hrs	1	0.08%
7 - 12 Hrs	0	0%
12 - 24 Hrs	0	0%
Above 24 Hrs	0	0%
Total	1258	100.00%

Note: Approved and Rejected transactions (all fresh and enhancements) have been shown - LDR to decision.

10. Turn Around Time (TAT) :

Claim Processing TAT :

TAT Band	Nos.	%
0-7	355	99.44%
8-15	2	0.56%
16-30	0	0%
31-45	0	0%
46-60	0	0%
61-90	0	0%
>90	0	0%
Total	357	100.00%

Note: Only Settled, Awaiting UTR, Approved and Rejected claims are considered
 * LDR to Decision date
 * only for Member claims

11. Month on Month

Admission Month	Hospitalization and Daycare		Otherthan Hospitalization		Total	
	Inc Count	Inc Amount	Inc Count	Inc Amount	Inc Count	Inc Amount
Jul 2023	78	5083213	0	0	78	5083213
Aug 2023	68	4528291	0	0	68	4528291
Sep 2023	66	4535794	0	0	66	4535794
Oct 2023	94	6058380	0	0	94	6058380
Nov 2023	88	5438990	0	0	88	5438990
Dec 2023	69	3085978	0	0	69	3085978
Jan 2024	69	3030689	0	0	69	3030689
Feb 2024	87	5796808	0	0	87	5796808
Mar 2024	64	4295215	0	0	64	4295215
Apr 2024	51	4020196	0	0	51	4020196
May 2024	59	3957622	0	0	59	3957622
Jun 2024	1	28246	0	0	1	28246
TOTAL	794	49859422	0	0	794	49859422

12. Payout Ratio

Claimed Amount	Settled Amount	Payout %
50311945	47139076	94%

13. Policy Details

Policy Number	Corporate Name	Total Premium	Earned Premium	Policy Start Date	Policy End Date	Lives
571600502310001683	HLL LIFECARE LIMITED	58316373	55129685	01-JUL-2023	30-JUN-2024	9669

DISCLAIMER: Confidential information, not intended for public dissemination. Vidal Health Insurance TPA Pvt Ltd makes no representations or warranties, express, implied or otherwise, regarding the accuracy and completeness of the information, and shall have no liability resulting from the use of the information. The Receiving Party will use information received in a safe and prudent manner and is responsible for all risk or loss arising out of its use of such information. Data will be refreshed on every day night. Report is based on previous Day Data.

Employee Compensation Policy

Age Range	20-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66-70	Total No. of Employees in Wages wise
Wages Range											
21000-25000	2	43	84	52	35	6	0	1			223
26000-30000	1	29	33	38	16	11	1	2			131
31000-35000	2	14	37	62	25	6					146
36000-40000		8	25	109	51	23	6	3			225
41000-45000		9	9	12	13	10	9	6			68
46000-50000	1	10	12	13	12	8	12	12			80
51000-55000		4	10	7	4	9	2	9			45
56000-60000		1	11	7	8	2	1				30
61000-65000		1	6	7	4	3	0	1			22
66000-70000	1	2	14	7	6	4	2	1			37
71000-75000			8	9	5	7	4	9			42
76000-80000		2	8	2	11	7	2	6			38
81000-85000		2	5	5	10	10	4	3			39
86000-90000		1	0	2	5	6	5	4			23
91000-95000			1	1	4	18	12	4			40
96000-100000			4	3	2	4	7	14			34
101000-105000			6	4	4	1	3	9			27
106000-110000			2	2	2	3	7	9			25
111000-115000				3	2	4	5	8			22
116000-120000					6	5	8	17			36
121000-125000			2	18	6	3	5	10			44
126000-130000				10	12	5	7	11			45
131000-135000					1	6	7	19			33
136000-140000				1	1	0	6	17			25
141000-145000				5	5	2	4	11			27
146000-150000					1	2	3	4			10
151000-155000							1	3			4
156000-160000					1	2	1	5			9

Employee Compensation Policy											
Age Range	20-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66-70	Total No. of Employees in Wages wise
306000-310000											0
310000 +						1					1
Total No of Employees in Age Group	7	126	277	379	258	181	134	220	0		1582

पॉलिसी अनुसूची/Policy Schedule- Group Mediclaim Tailor

पॉलिसी नंबर/ Policy Number:

571600502310001683

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED

ग्राहक आईडी /Customer ID:
9702288542

पैन /PAN: AAACH5598K

पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,

आधार /AADHAR:

फोन /Phone: 9895934437

KERALA, INDIA, शहर/City: THIRUVANANTHAPURAM, जिला/District:
THIRUVANANTHAPURAM, राज्य/State: KERALA, पिन/PIN: 695012.

ई-मेल /E-Mail: thomaspa@lifecarehll.com

सेल/Cell: 9895934437

पॉलिसी प्रभावी होने का समय घंटे को Policy Effective from 00:00 hours, on 01/07/2023 की मध्य रात्रि तक प्रभावी/to midnight of 30/06/2024

Member Details

Provisional member basis: Yes

Sum Insured basis: family floater

Family size: self+5

Basis of Premium: Per family basis

Sum insured (INR) (Floater Sum Insured per family)	Summary of Insured Persons (Detailed list of insured person as per annexure)		Total Insured Member Count
	Total No. of Primary Members	Total No. of Dependent Members	
250000	2246	6601	8847
400000	40	100	140
700000	1	2	3

Risks Covered:

STANDARD GROUP MEDICLAIM (Tailor-made)(with following add-on covers, waivers and sub-limits)

Add-on Cover Name	Sum Insured	Description
Others		Dog Bite Treatment Medical Expenses (including Pre and Post Hospitalisation Expenses) incurred for expenses related to the treatment for correction of eyesight due to refractive error equal to or more than 7.5 dioptres Ambulance charges upto 1% of sum insured
Eye Treatment		The medical (including Pre and Post Hospital Hospitalization Expenses) related to Mental Illness, provided the treatment shall be undertaken at a hospital with a specific department for Mental Illness, under a Medical Practitioner qualified as Psychiatrist shall be covered. Any kind of Psychological behavior, cognitive/family/group/behavior/ palliative therapy or psychotherapy shall not be covered
Others		Medical Expenses (excluding Pre and Post Hospitalisation Expenses) incurred for organ donor's treatment during the course of organ transplant to any Insured Person is to be covered
Others		New born baby cover-(i) From day one of birth. b) Critical illness cover to be extended to the new born baby suffering from the above listed critical illnesses
Others		Forms of treatment other than Allopathy or modern medicines and includes Ayurveda, Unani, Sidha and Homeopathy in the Indian context are to be covered upto the Sum Insured provided such treatments are undergone in AYUSH Hospitals
Others		Excluded, except medical expenses incurred towards dental treatment necessitated due to an accident/injury/illness requiring Hospitalization as Inpatient treatment a) Dependent parents - Father and mother whose income from all sources put together shall not exceed the financial limit prescribed by the Government of India from time to time, which at present is Rs.9000/- per month plus the amount of Dearness Relief admissible on Rs.9000/-
Dental Treatment		

Out-patient cover			b) Dependent spouse - If spouse is employed, medical benefits are to be availed from their respective organization and in the absence of such facility in the respective organization, the concerned employee and spouse have to give joint declaration to the effect that no such facility is available from the spouse's organization, in order to avail HLL medical scheme.
Others	20000000		c) Dependent children i) Son Till he starts earning or attain the age of 25 years whichever is earlier except in the case of mentally retarded son. ii) Daughter Till she starts earning or gets married whichever is earlier except in the case of widowed daughters. d) Dependent Siblings (i) Unmarried or Widowed sisters (ii) Mentally retarded sibling. Excluded Corporate Buffer of maximum Rs 2.5 lac per family, for 42 listed Critical Illness as per 'Remarks'. Corporate Buffer shall not be applicable for employees of Co-Operative Society and Hindustan Latex Employees Welfare Society. In the event of claims for critical illness, the sum insured in the critical illness cover (corporate buffer) shall be utilized first for the critical illness medical expenses and any additional expenses for the medical treatment over and above the critical illness cover shall be met from the normal medical illness cover of Rs.2.5 Lakhs.
Others			
Sub-Limit Description	Limit		Description
Room Charges-Normal			Upto 1.5% of Sum Insured per day
Room Charges-ICU			Upto 2.5% of Sum Insured per day for ICU
Maternity-Normal	50000		Upto Rs.50,000/- for Normal delivery (upto 2 living children during the lifetime of the Insured Person)
Maternity-Caesarean	75000		Upto Rs.75,000/- for C-section (upto 2 living children during the lifetime of the Insured Person)
Cataract			Covered up to 20% of Sum Insured or Rs. 75,000, whichever is less, for each eye
Others	5000		Infertility - limited to Rs.5,000/- for 10 cases in Policy period
Waiver Detail		Remarks	
Waiver of 9 month waiting period		9 Months waiting period for Maternity stands waived	
4.3 Waiver of specific diseases		Restriction as per the clause stands waived	

पॉलिसी अनुसूची/ Policy Schedule- Group Mediclaim Tailor

पॉलिसी नंबर/ Policy Number:

571600502310001683

Babycover within Maternity Limit

Treatment of new born baby shall be within the maternity expenses benefit limit, till the mother is discharged after delivery. New Born Baby shall be automatically covered under the available Maternity Benefit limit from birth, upto 3 months

Waiver of 2.1, 2.2, 2.3

Room Eligibility: A/C private room for employees in the grade of DGM & above. A/C rooms eligible for all employees in case of non availability of non A/C rooms

4.1 Waiver of pre-existing diseases

Pre existing Disease stands waived

4.2 Waiver of 30 days waiting period

30 days waiting Period stands waived

Corporate Buffer : Yes

Corporate Buffer Sum Insured : 20000000

Excess and/or Co-Pay Conditions:

Co-Payment is applicable for :

Special Conditions and Warranties

NA

CLAIMS SERVICED BY TPA : VIDAL HEALTH TPA PVT LTD, VIDAL HEALTH TPA PVT LTD - KOCHI,

टिप्पणियाँ/ Remarks: TGMP family floater covering employee plus 5 family members (1+5). Family shall mean Employee, Spouse, Dependent Children and Dependant Parents, Dependent/mentally retarded Siblings and Unmarried or Widowed sisters. Parents-in-law shall be covered only if the spouse is also a current employee.

List of Illness covered under Corporate Buffer:

1. Cancer
2. Heart Attack and Serious Heart Ailments
3. Stroke with Permanent Neurological Deficit
4. Coronary Artery By-pass Surgery
5. Kidney Failure and Serious Kidney Disease, Kidney Transplantation and Nephritis of any etiology plus bacterial renal failure requiring kidney transplantation/dialysis
6. Cerebral Hemorrhage
7. Irreversible Aplastic Anemia
8. End stage Lung Disease
9. Liver Failure and Cirrhosis
10. Liver Transplantation
11. Heart Valve Surgery and Major Cardiac Surgery
12. Major Burns
13. Major Organ/Born Marrow Transplantation
14. Multiple Sclerosis
15. Fulminant Hepatitis
16. Motor Neurone Disease
17. Primary Pulmonary Hypertension
18. HIV Due to Blood Transfusion and Occupationally Acquired HIV
19. Severe Encephalities
20. Severe Bacterial Meningitis
21. Blindness(Irreversible Loss of Sight)
22. Severe Glaucoma
23. Major Head Trauma
24. Paralysis(Irreversible Loss of use of Limbs)
25. Persistent Vegetative State(Apallic Syndrome)/Coma
26. Necrotising Fasciitis
27. Severe Myasthenia Gravis
28. Infective Endocarditis
29. Tuberculosis Meningitis
30. Severe Pulmonary Fibrosis
31. Severe Cardiomyopathy
32. Acquired Brain Damage

पॉलिसी अनुसूची/Policy Schedule- Group Mediclaim Tailor

पॉलिसी नंबर/ Policy Number:

571600502310001683

33. Brain Surgery
34. Medically Acquired HIV Infection
35. Occupationally Acquired Hepatitis B or C
36. Resection of the whole small intestine (duodenum, jejunum and ileum)
37. Severe Bronchiectasis
38. Intra cranial injury
39. Spinal Injury resulting in paraplegia
40. Total Replacement of Joints
41. Compound/ Multiple Fracture of femur
42. Any other life threatening illnesses requiring long term hospitalization or terminal illness expected to result in death, certified by the treating Doctor.

Maternity Expenses means Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalisation)

Migration is allowed from the policy

ID cards shall be provided to all the insured employees and dependents within 10 days

Claims to be intimated to the Company or TPA through any of the recognized modes of communication within 7 days. Reimbursement claim submission timeline will be 45 days from the date of discharge with condition of waiver in case of intimation

AYUSH treatment refers to healthcare treatment procedures and interventions (and not for rejuvenation purpose) carried out by a registered AYUSH medical practitioner in a licensed hospital

AYUSH Hospital:- Healthcare facility wherein medical/surgical/para-surgical treatment procedures and interventions are carried out by AYUSH Medical Practitioner(s) comprising of any of the following:

- a. Central or State Government AYUSH Hospital or
- b. Teaching hospital attached to AYUSH College recognized by the Central Government/ Central Council of Indian Medicine/ Central Council for Homeopathy; or
- c. AYUSH Hospital, standalone or co-located with in-patient healthcare facility of any recognized system of medicine, registered with the local authorities, wherever applicable, and is under the supervision of a qualified registered AYUSH Medical Practitioner and must comply with all the following criterion:
 - i. Having at least 5 in-patient beds;
 - ii. Having qualified AYUSH Medical Practitioner in charge round the clock;
 - iii. Having dedicated AYUSH therapy sections as required;
 - iv. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative

All other Terms, Conditions as per

Exclusion 1.2.5 (Modern Treatments), 1.2.6 (Adventurous Sport), 1.3.1.3 (HIV/AIDS)

जिसकी गवाही में दिन/ माह /वर्ष को उपरोक्त उल्लिखित कार्यालय पते पर अधोहस्ताक्षरी को लिखित अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाइट पर उपलब्ध है, को एक अनुबंध के रूप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लिखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक की अस्वीकृति के मामले में, यह दस्तावेज स्वतः आरंभ से ही निरस्त मानी जाएगी। //IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 13/July/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB INITIO'

Policy Number:

571600112310000170

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि/ Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST	प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800230706767301 Dt. 06/07/2023
IGST		
कम:जीएसटी टैडीएस / Less:GST_TDS		
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि/Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ती तिथि/ Previous Policy Number and Expiry Date	लागू नहीं/NA

Description of property

Location Details			
Sr. No.	Address Line1	Address Line2	Territory
1	HLL LIFECARE LIMITED (A GOVERNMENT OF INDIA UNDERTAKING)	HLL Bhavan - Corporate Head Office, Poojappura - PO Thiruvananthapuram - 695012, Kerala, India	INDIA

Sum Insured Details:

Sum Insured for PD	5,03,15,20,875.00
Sum Insured for BI	
Loss Limit for Cover	50,00,00,000.00
Remarks	INR 25,00,000 ANY ONE OCCURENCE FOR PROPERTY DAMAGAE (EACH AND EVERY LOSS)
Excess	Loss Limit - INR 50 Crs AOA and in aggregate with inbuilt terrorism liability cover for 26 crs AOA and in aggregate

Policy Number:

571600112310000170

No PV cover/ No war cover
No BI cover

Clauses

As per Annexure I

FINANCIER DETAILS

Sr. No.	Financier Name	Financier Address
1	CANARA BANK	TRIVANDRUM
2	STATE BANK OF INDIA	COMMERCIAL BRANCH, TRIVANDRUM
3	HDFC BANK	TRIVANDRUM

टिप्पणियाँ/ **Remarks:** POLICY TERMS,CONDITIONS,EXCESS & GENERAL EXCLUSIONS:

The policy will be as per the terms and conditions of tender.

1)Terrorism Third Party Liability- INR 26 crores

Loss Limit - INR 50 Crs AOA and in aggregate with inbuilt terrorism liability cover for 26 crs AOA and in aggregate

EXCESS/DEDUCTIBLES: INR 25,00,000 ANY ONE OCCURENCE FOR PROPERTY DAMAGE
UNITS COVERED & SUM INSURED

1.CMO Chennai ,Tamil Nadu PIN 600100 - SI Rs.146,892,114

2.Kakkanad Factory,Cochin,PIN 652021 Quality testing & Packing / both male & female condom - EXPORT only - SI Rs. 222,930,826

3.Irapuram,Cochin,PIN 683541 Naked condom manufacturing- SI Rs 355,750,298

4. Manesar Factory Harayana PIN 122051, Testing Kits pregnancy / Malaria-
SI Rs.28,455,318

5.IDD South Poojappura, Trivandrum PIN 695012- SI Rs. 28,275,855

6.FMD Poojappura Trivandrum PIN 695012 Facility Management - Repair & Maintenance - Housekeeping office equipments - SI Rs 1,401,548

7.Research & Development Dpt, Trivandrum Office Trivandrum PIN 695012 - SI - Rs 357,618,462

8.Procurement & Consultancy Services, Noida Office Uttar Pradesh PIN 110025 - SI Rs 8,884,280

9.Office of Infrastructure Development , Noida Uttar Pradesh PIN 110025- SI Rs 2,768,948

10.Offices of Retail Business Divisions all over India- SI Rs.449,318,307

11.HITES NORTH HLL Infratech Services Limited (HITES) Noida
Noida Office Uttar Pradesh PIN 110025- SI Rs.2,240,217

12.HITES SOUTH HLL Infratech Services Limited (HITES) Trivandrum
PIN 69501 -SI Rs. 7,454,609

Policy Number:

571600112310000170

13. C& FA godowns Chennai Tamil Nadu PIN 600100- SI Rs .246,000,000

14. HCS Divisions Throughout India-SI Rs.216,050,000

15. Kakkannad Factory, Cochin Pin 682021 - SI Rs 121,305,626

16.Akkulam Factory Trivandrum Pin 695011-SI Rs 278,101,818

17.Maneswar Factory, Gurgaon Harayana PIN 122051-SI Rs. 5,000,000

18. Kanagala Factory Belguam 591225- SI Rs.259,039,721

19. Irapuram factory,Cochin Cochin,PIN 683541-SI Rs 30,259,800

20.Health care services & Laboratory Services Spread across India)- SI Rs 960,645,129

21.Retail Business Division - Medical shops / diagnostic Lab- Spread across india- SI Rs. 1,303,128,000

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई

पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्ति जसिके लए यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है क्ि प्रीमियम चेक के

अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकतिा नरिस्त हो जाएगी। ***IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 26/Julv/2023.This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the websi*** 'hall be read together as one contract

and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that **IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

Policy Number:
571600112310000170

ANNEXURE I- List of clauses

Clause Reference No	Description
700013937	Terrorism Clause

TAX INVOICE

Invoice Serial No: 30961F3PE0000170

Invoice Date: 26/07/2023

Details Of Receiver : HLL LIFECARE LIMITED
(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.
Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997137	Other property insurance services		0%		9%		9%		0%	0	0
TOTAL											
कुल बिल मूल्य (अंकों में) Total Invoice Value (In figures), .											
कुल बिल मूल्य (शब्दों में) Invoice Value (In words) : रूपए/Rupees											
केवल/Only.											
रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No											

E.&.O.E

पॉलिसी अनुसूची/ Policy Schedule - Standard fire & special perils (stocks only)

Policy Number: 571600112310000262

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehl.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024		
प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST		
कम:जीएसटी टीडीएस / Less:GST_TDS	प्रस्ताव संख्या और तिथि/ Proposal Number and Date	8800230914090655 Dt. 14/09/2023
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि/ Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600112210000548 and Dt.30/06/2023
(Rupees)	(only.)	

Occupancy Code: 4002	Occupancy Details: Storage of Category I hazardous Goods subject to warranty that goods listed in Category II, III, Coir waste, Coir fibre and Caddies are not stored therein. (Materials stored in Godowns and Silos)
Classification of Risk:	Occupancy Code: 4002 Occupancy Details: Storage of Category I hazardous Goods subject to warranty that goods listed in Category II, III, Coir waste, Coir fibre and Caddies are not stored therein. (Materials stored in Godowns and Silos)

Total Location Sum Insured	₹ 2,99,60,28,782.00
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Location Address:
1)(A GOVERNMENT OF INDIA UNDERTAKING),HLL Bhavan - Corporate Head Office,Poojappura - PO Thiruvananthapuram -695012,Kerala, India,Thiruvananthapuram,Thiruvananthapuram,Kerala,695015.

SL. No	Coverage	Coverage Description	Sum Insured
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पॉलिसी अनुसूची/ Policy Schedule - Standard fire & special perils (stocks only)

Policy Number: 571600112310000262

व्यक्तमग्न सम्मोह

द

1	SFSP Basic Cover	BASIC COVER-STOCKS@ KFB PFT KFC IFC MFG HCS RBD AFT C&FA	2,99,60,28,782.00
	अधिक/Excess: AS PER SFSP-DECLARATION POLICY (Excess of 5% of each claim,subject to a minimum of INR 25000/-). Additional Information: KFB - Rs 259039721/- PFT - Rs 537143818/- KFC - Rs 121305626/- IFC - Rs 30259780/- MFG - Rs 5000000/- HCS - Rs 216050000/- RBD - Rs 1303128000/- AFT - Rs 278101818/- C&FA - Rs 246000000/-		
2	STFI	STFI-STOCKS @ KFB PFT KFC IFC MFG HCS RBD AFT C&FA	2,99,60,28,782.00
	अधिक/Excess: AS PER SFSP-DECLARATION POLICY (Excess of 5% of each claim,subject to a minimum of INR 25000/-). Additional Information: KFB - Rs 259039721/- PFT - Rs 537143818/- KFC - Rs 121305626/- IFC - Rs 30259780/- MFG - Rs 5000000/- HCS - Rs 216050000/- RBD - Rs 1303128000/- AFT - Rs 278101818/- C&FA - Rs 246000000/-		
3	Earthquake (Fire & Shock)	EQ-STOCKS@ KFB PFT KFC IFC MFG HCS RBD AFT C&FA	2,99,60,28,782.00
	अधिक/Excess: AS PER SFSP-DECLARATION POLICY (Excess of 5% of each claim,subject to a minimum of INR 25000/-). Additional Information: KFB - Rs 259039721/- PFT - Rs 537143818/- KFC - Rs 121305626/- IFC - Rs 30259780/- MFG - Rs 5000000/- HCS - Rs 216050000/- RBD - Rs 1303128000/- AFT - Rs 278101818/- C&FA - Rs 246000000/-		

Clauses	As per Annexure I
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Excess in Standard Fire and Special Perils Policy (except Dwellings with Individual owners):

- 1) Policies having Sum Insured up to INR 10 cr per location - 5% of claim amount subject to a minimum of Rs 10,000/-
- 2) Policies having Sum Insured above INR 10 cr per location up to INR 100 cr per location - 5% of claim amount subject to a minimum of INR 25,000/-
- 3) Policies having Sum Insured above INR 100 cr and up to INR 1500 cr per location - 5% of claim amount subject to a minimum of INR 5 lakhs
- 4) Policies having Sum Insured above INR 1500 cr and up to INR 2500 cr per location - 5% of claim amount subject to a minimum of INR 25 lakhs
- 5) Policies having Sum Insured above INR 2500 cr per location - 5% of claim amount subject to a minimum of INR 50 lakhs
- 6) For Floater and Floater Declaration Stock policies the Minimum deductible will be 5% of the Claim amount subject to a minimum of Rs 50,000

Excess for Policies of Power Plants (Excluding wind & solar) & Steel Plants having Sum Insured above Rs 500 cr per location:

- 1) 5% of Claim amount subject to a minimum of Rs 1.25 Cr

Excess for Terrorism:

- 1) Industrial Risk: 5% of claim amount subject to a minimum of Rs 1,00,000 and a maximum of Rs 25,00,000/-
- 2) Non Industrial Risk: 1% of claim amount subject to a minimum of Rs 25,000 and a maximum of Rs 10,00,000/-

FINANCIER DETAILS			
Sr.No	Type of Finance	Name of Financier	Address
1	Hypothecation	State Bank of India	Commercial Branch, Trivandrum-14
2	Hypothecation	HDFC Bank LTD	Trivandrum
3	Hypothecation	Canara Bank	Trivandrum

टिप्पणियां/ Remarks: AS PER BoQ

पॉलिसी अनुसूची/ Policy Schedule - Standard fire & special perils (stocks only)	
Policy Number: 571600112310000262	व्याप्य स्रोत / Business Source: 571600

Non Floater policy covering stocks in nine locations as per attached list.

KFB - Rs 259039721/-
PFT - Rs 537143818/-
KFC - Rs 121305626/-
IFC - Rs 30259780/-
MFG - Rs 5000000/-
HCS - Rs 216050000/-
RBD - Rs 1303128000/-
AFT - Rs 278101818/-
C&FA - Rs 246000000/-

Excess applicable as per terms and conditions of the policy.

DECLARATION clause applicable.

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्ति जिसके लिए यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आशवासन दयिा जाता है क्प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकतिा नरिस्त हो जाएगी। ***IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 18/September/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'***

इंश्योरेन्सइंडयिालमिडि

स्टांप ड्यूटीमिडि,
**Stamp
Duty:**
(₹ 1.00)

TAX INVOICE

Invoice Serial No: 30961F3PE0000262

Invoice Date: 18/09/2023

Details of Supplier:

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess	
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)	
997139	Other non- life insurance services (excluding reinsuranc e services)		0%		9%		9%		0%	0	0	
TOTAL											0	0

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :
₹

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

पॉलिसी अनुसूची/ Policy Schedule - Standard fire & special perils (stocks only)

Policy Number: 571600112310000263

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024		
प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST	प्रस्ताव संख्या और तिथि/ Proposal Number and Date	8800230914091349 Dt. 14/09/2023
कम:जीएसटी टीडीएस / Less:GST_TDS	₹ 0.00	
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि/Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ती तिथि / Previous Policy Number and Expiry Date	571600112010000542 and Dt.31/01/2022 571600111910000586 and Dt.31/01/2021 571600111810000647 and Dt.31/01/2020 571600111710000098 and Dt.31/01/2019 57160011163400000738 and Dt.31/01/2018 571600112110000504 and Dt.31/01/2023
(Rupee		

Occupancy Code: 4002	Occupancy Details: Storage of Category I hazardous Goods subject to warranty that goods listed in Category II, III, Coir waste, Coir fibre and Caddies are not stored therein. (Materials stored in Godowns and Silos)
Classification of Risk:	Occupancy Code: 4002 Occupancy Details: Storage of Category I hazardous Goods subject to warranty that goods listed in Category II, III, Coir waste, Coir fibre and Caddies are not stored therein. (Materials stored in Godowns and Silos)

Total Location Sum Insured	
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LocationAddress:

1)Retail Business Divisions LOCATED ALL OVER INDIA,Retail Business Divisions,Thiruvananthapuram,Thiruvananthapuram,Kerala,695012.
2)Health Care Services DIVISIONS ALL OVER INDIA,Health Care Services - Nursing staff /

Policy Number: 57160011231000263

office,Thiruvananthapuram,Thiruvananthapuram,Kerala,695012.

3)PEROOKADA FACTORY ,TRIVANDRUM,Peroorkada Factory, Trivandrum (PFT),Thiruvananthapuram,Thiruvananthapuram,Kerala,695005.

4)KAKKANAD FACTORY COCHIN,KAKKANAD FACTORY COCHIN ,Kalamaserry,Ernakulam,Kerala,683104.

5)AKKULAM FACTORY ,TRIVANDRUM,HLL AKKULAM FACTORY ,SREEKARIYAM

POST,TRIVANDRUM,Thiruvananthapuram,Thiruvananthapuram,Kerala,695017.

6)MANESAR FACTORY GURGAON,MANESAR FACTORY GURGAON,Gurgaon,Gurgaon,Haryana,122051.

7)KANAGALA, BELGAUM,HLL KANAGALA FACTORY, KANAGALA, BELGAUM,Belgaum - District Others,Belgaum,Karnataka,591225.

8)IRAPURAM FACTORY COCHIN (IFC),IRAPURAM FACTORY COCHIN ,Ernakulam - District Others,Ernakulam,Kerala,683556.

9)C & FA GODOWNS ALL OVER INDIA,C & FA GODOWNS,Thiruvananthapuram,Thiruvananthapuram,Kerala,695012.

SL. No	Coverage	Coverage Description	Sum Insured
1	STFI	STFI COVER FOR STOCKS AT RBD CENTERS LOCATED ALL OVER INDIA AS PER LIST ATTACHED	1,30,31,28,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Retail Business Divisions throughout India with per location sum insured falling within the limits of NBLUSP POLICY. As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY.		
2	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT RBD CENTERS LOCATED ALL OVER INDIA AS PER LIST ATTACHED	1,30,31,28,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Retail Business Divisions throughout India with per location sum insured falling within the limits of NBLUSP POLICY All terms and conditions as per NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
3	SFSP Basic Cover	BASIC COVER FOR STOCK AT RBD CENTERS ALL OVER INDIA AS PER LIST ATTACHED	1,30,31,28,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Retail Business Divisions throughout India with per location sum insured falling within the limits of NBLUSP Policy All terms and conditions as per NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
4	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT HCS DIVISIONS ALL OVER INDIA AS PER LIST ATTACHED	21,60,50,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand)..		
	Additional Information: Healthcare Services Divisions distributed throughout India with maximum Sum Insured falling within limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
5	SFSP Basic Cover	BASIC COVE FOR STOCKS AT HCS DIVISIONS ALL OVER INDIA AS PER LIST ATTACHED	21,60,50,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Health Care Services Divisions throughout India with per location sum insured falling within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
6	STFI	STFI COVER FOR STOCKS AT HCS DIVISIONS ALL OVER INDIA AS PER LIST ATTACHED	21,60,50,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Health care Services Divisions throughout India with per location sum insured falling within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
7	STFI	STFI COVER FOR STOCKS AT PEROOKADA FACTORY ,TRIVANDRUM AS PER LIST ATTACHED	53,71,43,818.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every calim.		
	Additional Information: As per terms and conditions of Standard Fire and Special perils Declaration- Stocks Policy (SFSP)		
8	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT PEROOKADA FACTORY ,TRIVANDRUM AS PER LIST ATTACHED	53,71,43,818.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special perils Declaration Policy- Stocks (SFSP)		
9	SFSP Basic Cover	BASIC COVER FOR STOCKS AT PEROOKADA FACTORY ,TRIVANDRUM AS PER LIST ATTACHED	53,71,43,818.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special perils Declaration Policy- Stocks (SFSP)		
10	STFI	STFI COVER FOR STOCKS AT KAKKANAD FACTORY COCHIN AS PER LIST ATTACHED	12,13,05,626.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand)..		

Policy Number: 571600112310000263

व्यवस्था

	Additional Information: Sum insured bifurcation falls within the limits of NBLUSP POLICY All terms and conditions as per NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
11	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT KAKKANAD FACTORY COCHIN AS PER LIST ATTACHED	12,13,05,626.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations in Kakkanad Factory, Cochin(KFC) falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
12	SFSP Basic Cover	BASIC COVER FOR STOCKS AT KAKKANAD FACTORY COCHIN AS PER LIST ATTACHED	12,13,05,626.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcation in Kakkanad Factory, Cochin(KFC)falls within the limits of NBLUSP Policy As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
13	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT AKKULAM FACTORY , TRIVANDRUM AS PER LIST ATTACHED	27,81,01,818.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
14	STFI	STFI COVER FOR STOCKS AT AKKULAM FACTORY , TRIVANDRUM AS PER LIST ATTACHED	27,81,01,818.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand)..		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
15	SFSP Basic Cover	BASIC COVER FOR STOCKS AT AKKULAM FACTORY , TRIVANDRUM AS PER LIST ATTACHED	27,81,01,818.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand)..		
	Additional Information: Sum Insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
16	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT MANESAR FACTORY GURGAON AS PER LIST ATTACHED	50,00,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT SOOKSHMA UDYAM SURAKSHA PLUS POLICY		
17	STFI	STFI COVER FOR STOCKS AT MANESAR FACTORY GURGAON AS PER LIST ATTACHED	50,00,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcation falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT SOOKSHMA UDYAM SURAKSHA PLUS POLICY		
18	SFSP Basic Cover	BASIC COVER FOR STOCKS AT MANESAR FACTORY GURGAON AS PER LIST ATTACHED	50,00,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT SOOKSHMA UDYAM SURAKSHA PLUS POLICY		
19	SFSP Basic Cover	BASIC COVER FOR STOCKS AT KANAGALA,BELGAUM AS PER LIST ATTACHED	25,90,39,721.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
20	STFI	STFI COVER FOR STOCKS AT KANAGALA,BELGAUM AS PER LIST ATTACHED	25,90,39,721.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
21	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT KANAGALA,BELGAUM AS PER LIST ATTACHED	25,90,39,721.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		

Policy Number: 571600112310000263 व्यवसाय सत्रोत / Business Source: 571600

	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
22	STFI	STFI COVER FOR STOCKS AT IRAPURAM FACTORY COCHIN(IFC) AS PER LIST ATTACHED	3,02,59,800.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT SOOKSHMA UDYAM SURAKSHA PLUS POLICY		
23	Earthquake (Fire & Shock)	EQ COVER FOR STOCKS AT IRAPURAM FACTORY COCHIN(IFC) AS PER LIST ATTACHED	3,02,59,800.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT SOOKSHMA UDYAM SURAKSHA PLUS POLICY		
24	SFSP Basic Cover	BASIC COVER FOR STOCKS AT IRAPURAM FACTORY COCHIN(IFC) AS PER LIST ATTACHED	3,02,59,800.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT SOOKSHMA UDYAM SURAKSHA PLUS POLICY		
25	SFSP Basic Cover	BASIC COVER FOR STOCK AT C & FA GODOWNS ALL OVER INDIA AS PER LIST ATTACHED	24,60,00,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
26	Earthquake (Fire & Shock)	EQ COVER FOR STOCK AT C & FA GODOWNS ALL OVER INDIA AS PER LIST ATTACHED	24,60,00,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		
27	STFI	STFI COVER FOR STOCK AT C & FA GODOWNS ALL OVER INDIA AS PER LIST ATTACHED	24,60,00,000.00
	अधिक/Excess: Excess of 5 % of each claim, subject to a minimum of INR 10,000 (Rupees Ten Thousand).		
	Additional Information: Sum insured bifurcations falls within the limits of NBLUSP POLICY As per terms and conditions of NATIONAL BHARAT LAGHU UDYAM SURAKSHA PLUS POLICY		

Clauses	As per Annexure I
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Excess in Standard Fire and Special Perils Policy (except Dwellings with Individual owners):

- 1) Policies having Sum Insured up to INR 10 cr per location – 5% of claim amount subject to a minimum of Rs 10,000/-
- 2) Policies having Sum Insured above INR 10 cr per location up to INR 100 cr per location - 5% of claim amount subject to a minimum of INR 25,000/-
- 3) Policies having Sum Insured above INR 100 cr and up to INR 1500 cr per location - 5% of claim amount subject to a minimum of INR 5 lakhs
- 4) Policies having Sum Insured above INR 1500 cr and up to INR 2500 cr per location - 5% of claim amount subject to a minimum of INR 25 lakhs
- 5) Policies having Sum Insured above INR 2500 cr per location - 5% of claim amount subject to a minimum of INR 50 lakhs
- 6) For Floater and Floater Declaration Stock policies the Minimum deductible will be 5% of the Claim amount subject to a minimum of Rs 50,000

Excess for Policies of Power Plants (Excluding wind & solar) & Steel Plants having Sum Insured above Rs 500 cr per location:

- 1) 5 % of Claim amount subject to a minimum of Rs 1.25 Cr

Excess for Terrorism:

- 1) Industrial Risk: 5% of claim amount subject to a minimum of Rs 1,00,000 and a maximum of Rs 25,00,000/-
- 2) Non Industrial Risk: 1% of claim amount subject to a minimum of Rs 25,000 and a maximum of Rs 10,00,000/-

FINANCIER DETAILS			
Sr.No	Type of Finance	Name of Financier	Address
1	Hypothecation	State Bank Of India	COMMERCIAL BRANCH, Trivandrum-14
2	Hypothecation	HDFC Bank Ltd	TRIVANDRUM
3	Hypothecation	Canara Bank	TRIVANDRUM

पॉलिसी अनुसूची/ Policy Schedule - Standard fire & special perils (stocks only)

Policy Number: 571600112310000263

व्यवसाय स्रोत / Business

वर्ग

टिप्पणियाँ/ **Remarks:** NON-FLOATER POLICY COVERING STOCKS AT NINE LOCATIONS AS MENTIONED IN LIST ATTACHED

Terrorism clause EXCLUDED

Excess will be applicable as per terms and conditions of the respective policy and coverage.

DECLARATION CLAUSE APPLICABLE

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखति कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्ति जसिके लएि यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकतिा नरिस्त हो जाएगी। **/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 18th September/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy, the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेन्सइंडियालिमिटेड

स्टॉप ड्यूटी मिटिड/
**Stamp
Duty:
(₹ 1.00)**

पॉलिसी अनुसूची/ Policy Schedule - Standard fire & special perils (stocks only)

Policy Number: 571600112310000263

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जारीकरण

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अनुलग्नक I / ANNEXURE I- लागू खंडों की सूची/ List of Applicable Clauses

- .: AGREED BANK CLAUSE
- .: EARTHQUAKE (FIRE % SHOCK) CLAUSE

TAX INVOICE

Invoice Serial No: 30961F3PE0000263

Invoice Date: 18/09/2023

Details of Receiver:

Details Of Receiver : HLL LIFECARE LIMITED
(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.
Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non-life insurance services (excluding reinsurance services)		0%		9%				0%	0	0
TOTAL										0	0

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपा/Rupees

कवल/Only.
रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E कते नेशनल इनशुरेन्स कंपनी लिमिटेड/ For

अर्ध

पॉलिसी अनुसूची/ Policy Schedule-

पॉलिसी नंबर/ Policy Number:
57160011231000264

व्यवसाय

विवरण

7/

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, शहर/City: THIRUVANANTHAPURAM, जिला/District: THIRUVANANTHAPURAM, राज्य/State: KERALA, पिन/PIN: 695012. सेल/Cell: 9895934437	आधार /AADHAR: फोन /Phone: 9895934437	ई-मेल /E-Mail: thomaspa@lifecarehll.com
पॉलिसी प्रभावी होने का समय घंटे को Policy Effective from 00:00 hours, on 01/07/2023 की मध्य रात्रि तक प्रभावी/to midnight of 30/06/2024		
प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं /NA
Less:Digital Discount		
Total Premium		
सीजीएसटी/CGST		
एसजीएसटी/यूटीजीएसटी / SGST/UTGST	प्रस्ताव संख्या और तिथि/ Proposal Number and Date	8800230915092429 दिनांक/Dt. 15/09/2023
आईजीएसटी/IGST	₹ 0.00	
कम:जीएसटी टीडीएस / Less:GST_TDS	₹ 0.00	
वसूली योग्य योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तिथि/ Receipt Number and Date 571600812310005146 दिनांक/Dt. 30/06/2023
कुल राशि /Total Amount	पिछली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	लागू नहीं /NA
(रूपए/Rupee)		
*सरकारी सब्सिडी Government Subsidy:	₹ 0.00	

Policy Type : Standard

Number of Locations : 9

Location Name and Address:1-HLL Lifecare Limited (A Government of India Enterprise),MANESAR FACTORY, GURGAON,Haryana,Gurgaon,Gurgaon,122051

Occupancy Code	2167	Occupancy Description	Rubber Goods Manufacturing without spreading
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संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMENTS AS PER THE LIST ATTACHED--MFG	2,84,55,318.00
Total Sum Insured		2,84,55,318.00
Total Sum Insured (in Words)	Rupees Two Crore Eighty Four Lakh Fifty Five Thousand Three Hundred Eighteen Only.	

Cover Name	Sum Insured
Fire Basic Cover	2,84,55,318.00

Location Name and Address:2-HLL Lifecare Limited (A Government of India Enterprise),HLL Infratech Services Ltd. (HITES) - NORTH,Uttar Pradesh,Gautam Buddha Nagar,Noida,201301

Occupancy Code	1007	Occupancy Description	Office premises / Meeting Rooms
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संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMETS AS PER THE LIST ATTACHED-HITES North	22,40,217.00
Total Sum Insured		22,40,217.00
Total Sum Insured (in Words)	Rupees Twenty Two Lakh Forty Thousand Two Hundred Seventeen Only.	

Cover Name	Sum Insured
Fire Basic Cover	22,40,217.00

Location Name and Address:3-HLL Lifecare Limited (A Government of India Enterprise),FMD Poojappura, Kerala,Thiruvananthapuram, Thiruvananthapuram,695012

Occupancy Code	Occupancy Description
1007	Office premises / Meeting Rooms

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMETS AS PER THE LIST ATTACHED-FMD Poojappura	14,01,548.00
Total Sum Insured		14,01,548.00
Total Sum Insured (in Words)	Rupees Fourteen Lakh One Thousand Five Hundred Forty Eight Only.	

Cover Name	Sum Insured
Fire Basic Cover	14,01,548.00

Location Name and Address:4-HLL Lifecare Limited (A Government of India Enterprise),Office of Infrastructure Development , Noida,Uttar Pradesh,Gautam Buddha Nagar,Noida,201301

Occupancy Code	Occupancy Description
1007	Office premises / Meeting Rooms

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMETS AS PER THE LIST ATTACHED-Office of Infrastructure Development , Noida	27,68,948.00
Total Sum Insured		27,68,948.00
Total Sum Insured (in Words)	Rupees Twenty Seven Lakh Sixty Eight Thousand Nine Hundred Forty Eight Only.	

Cover Name	Sum Insured
Fire Basic Cover	27,68,948.00

Location Name and Address:5-HLL Lifecare Limited (A Government of India Enterprise),Offices of Retail Business Divisions all over India, Haryana,Gurgaon,Gurgaon,122001

Occupancy Code	Occupancy Description
1007	Office premises / Meeting Rooms

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMETS AS PER THE LIST ATTACHED-Offices of Retail Business Divisions all over India	44,93,18,307.00
Total Sum Insured		44,93,18,307.00
Total Sum Insured (in Words)	Rupees Forty Four Crore Ninety Three Lakh Eighteen Thousand Three Hundred Seven Only.	

Cover Name	Sum Insured
Fire Basic Cover	44,93,18,307.00

Location Name and Address:6-HLL Lifecare Limited (A Government of India Enterprise),IDD South Poojappura, Trivandrum, Kerala,Thiruvananthapuram, Thiruvananthapuram,695012

Occupancy Code	Occupancy Description
1007	Office premises / Meeting Rooms

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMENTS AS PER THE LIST ATTACHED--IDD South Poojappura, Trivandrum	2,82,75,855.00
Total Sum Insured		2,82,75,855.00
Total Sum Insured (in Words)	Rupees Two Crore Eighty Two Lakh Seventy Five Thousand Eight Hundred Fifty Five Only.	

Cover Name	Sum Insured
Fire Basic Cover	2,82,75,855.00

Location Name and Address:7-HLL Lifecare Limited (A Government of India Enterprise),HLL Infra Tech Services Ltd S-HITES SOUTH, Telangana,Hyderabad,Hyderabad,500001

Occupancy Code	Occupancy Description
1007	Office premises / Meeting Rooms

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	HLL Infra Tech Services Ltd S-HITES SOUTH	74,54,609.00
Total Sum Insured		74,54,609.00
Total Sum Insured (in Words)	Rupees Seventy Four Lakh Fifty Four Thousand Six Hundred Nine Only.	

Cover Name	Sum Insured
Fire Basic Cover	74,54,609.00

Location Name and Address:8-HLL Lifecare Limited (A Government of India Enterprise),Health care services & Laboratory Services Spread across India, Haryana,Gurgaon,Gurgaon,122001

Occupancy Code	Occupancy Description
1006	Hospitals including X ray and other Diagnostic clinics

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	Offices of Health Care Services Divisions all over india	96,06,45,129.00
Total Sum Insured		96,06,45,129.00
Total Sum Insured (in Words)	Rupees Ninety Six Crore Six Lakh Forty Five Thousand One Hundred Twenty Nine Only.	

Cover Name	Sum Insured
Fire Basic Cover	96,06,45,129.00

Location Name and Address:9-HLL Lifecare Limited (A Government of India Enterprise),Procurement & Consultancy Services, Noida Office,Uttar Pradesh,Gautam Buddha Nagar,Noida,201301

Occupancy Code	Occupancy Description
1007	Office premises / Meeting Rooms

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMENTS AS PER THE LIST ATTACHED- Procurement & Consultancy Services, Noida Office	88,84,280.00
Total Sum Insured		88,84,280.00
Total Sum Insured (in Words)	Rupees Eighty Eight Lakh Eighty Four Thousand Two Hundred Eighty Only.	

Cover Name	Sum Insured
Fire Basic Cover	88,84,280.00

Financier Name and Address:	Hypothecation,CANARA BANK,TRIVANDRUM
Financier Name and Address:	Hypothecation,STATE BANK OF INDIA,COMMERCIAL BRANCH,TRIVANDRUM
Financier Name and Address:	Hypothecation,HDFC BANK LTD,TRIVANDRUM

Excess Clause as applicable for each and every Loss:

Standard Excess

- 1) INR 5000 for each and every loss.

Excess Imposed(Higher):

Voluntary Deductible Opted(If a Voluntary Deductible (VD) is imposed and mentioned in the policy, then it should supersede the above mentioned deductible):

AOG Peril	0
Other Perils	0

In case of claim, standard excess or Imposed excess which ever is higher will be applicable

Excess for Terrorism

- 1) Industrial Risk: 5% of claim amount subject to a minimum of INR 1,00,000/- and a maximum of INR 25,00,000/-
- 2) Non Industrial Risk: 5% of claim amount subject to a minimum of INR 25,000/- and a maximum of INR 10,00,000/-

Debris Removal: Upto 2% of the claim amount for reasonable costs of removing debris from the site

खंडों, पृष्ठांकनों एवं वारंटी/ List of Clauses, Endorsements, Warranties

विवरण/Description

EARTHQUAKE DAMAGE, IMPACT DAMAGE; OMISSION TO INSURE; DESIGNATION OF PROPERTY, REINSTATEMENT VALUE AND AGREED BANK CLAUSE ATTACHED HERETO

Remarks: All terms and conditions as per National Bharath Sookshma Udhyaam Suraksha Plus policy

PLANT & MACHINERY, LAB EQUIPMENTS, FIXTURES/FURNITURES, ELECTRICAL FITTINGS, OFFICE EQUIPMETS AS PER THE LIST ATTACHED

Locations:-

Manesar Factory
IDD South Poojappura, Trivandrum
FMD Poojappura
Procurement & Consultancy Services, Noida Office
Office of Infrastructure Development , Noida
Offices of Retail Business Divisions all over India
HITES NORTH
HITES SOUTH
Offices of Health Care Services Divisions all over India

जिसकी गवाही में दिन/ माह /वर्ष को उपरोक्त उल्लिखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवत अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रूप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची का प्रयोग किया गया है, वे जहाँ भी उल्लिखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक की अस्वीकृति के मामले में, यह दस्तावेज स्वतः आरंभ से ही निरस्त मानी जाएगी। **For the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the web site shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

पॉलिसी अनुसूची/ Policy Schedule-

पॉलिसी नंबर/ **Policy Number:**
57160011231000264

व्यवसाय स्रोत/Business Source: 571600

संकेत संख्या

कस्टमर केयर टॉल फ्री नंबर/

are Toll Free

इंश्योरेन्सइंडियालिमिटेड ओम्बड्समैन का विवरण/Ombudsman Details: Office of the Insurance
Ombudsman,2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard , M. G. Road,
Ernakulam - 682 015.
Tel.: 0484 - 2358759 / 2359338
Email: bimalokpal.ernakulam@cioins.co.in

स्टॉप ड्यूटी
**Stamp
Duty:**
(₹ 1.00)

लिमिटेड

टैक्स इनवॉयस/TAX INVOICE

इनवॉयस क्र.सं./Invoice Serial No: 30961F3PE0000264

इनवॉयस तिथि/Invoice Date: 18/09/2023

प्राप्तकर्ता का विवरण/Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
पता/Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
शहर/City : THIRUVANANTHAPURAM,
जिला/District: THIRUVANANTHAPURAM,
राज्य/State: KERALA,
पिन/PIN: 695012.

आपूर्ति का स्थान/Place Of Supply State : Kerala
राज्य कोड/State Code : 32
जीएसटीआईएन नंबर/GSTIN No : 32AAACH5598K7Z4

सैक कोड/SAC Code	सेवा का विवरण/Description of Service	कुल/Total(₹)	ड्यूटी/Disco unt	टैक्स योग्य/मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/CGST		एसजीएसटी/यूटीजीएसटी/SGST/UTGST		आईजीएसटी/IGST		Kerala Flood Cess राशि/Amount(₹)
					दर/Rate	राशि/Amount(₹)	दर/Rate	राशि/Amount(₹)	दर/Rate	राशि/Amount(₹)	
997137	Other property insurance services								0%	0	0
TOTAL										0	0
कुल इनवॉयस मूल्य (अंकों में)Total Invoice Value (In figures) : ₹										ly.	
कुल इनवॉयस मूल्य (शब्दों में)Total Invoice Value (In words) : रूपए/Rupees											
रिवर्स चार्ज के अधीन टैक्स की राशि/ Amount of Tax Subject to Reverse Charge : No											

E.&O.E

कृते नेशनल इन्सुरेंस लिमिटेड

limited

पॉलिसी अनुसूची/ Policy Schedule-

पॉलिसी नंबर/ **Policy Number:**
571600112310000265

व्यवसाय स्रोत/Business Source: 571600

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, शहर/City: THIRUVANANTHAPURAM, जिला/District: THIRUVANANTHAPURAM, राज्य/State: KERALA, पिन/PIN: 695012. सेल/Cell: 9895934437	आधार /AADHAR: फोन /Phone: 9895934437	ई-मेल /E-Mail: thomaspa@lifecarehll.com
पॉलिसी प्रभावी होने का समय घंटे को Policy Effective from 00:00 hours, on 01/07/2023 की मध्य रात्रि तक प्रभावी/to midnight of 30/06/2024		
प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं /NA
Less:Digital Discount		
Total Premium		
सीजीएसटी/CGST		
एसजीएसटी/यूटीजीएसटी / SGST/UTGST	प्रस्ताव संख्या और तिथि/ Proposal Number and Date	8800230915094524 दिनांक/Dt. 15/09/2023
आईजीएसटी/IGST		
कम:जीएसटी टीडीएस / Less:GST_TDS	₹ 0	
वसूली योग्य योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तिथि/ Receipt Number and Date 571600812310005146 दिनांक/Dt. 30/06/2023
कुल राशि /Total Amount	पिछली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	लागू नहीं /NA
(रूपए/Rupee: *सरकारी सब्सिडी Government Subsidy: ₹ 0.00		

Policy Type : Standard
Number of Locations : 4

Location Name and Address:1-HLL Lifecare Limited (A Government of India Enterprise),Irapuram Factory, Cochin (IFC),Kerala,Ernakulam,Ernakulam - District Others,683541

Occupancy Code	2167	Occupancy Description	Rubber Goods Manufacturing without spreading
संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured	
Other Contents	Naked condom manufacturing	35,57,50,298.00	
Total Sum Insured		35,57,50,298.00	
Total Sum Insured (in Words)	Rupees Thirty Five Crore Fifty Seven Lakh Fifty Thousand Two Hundred Ninety Eight Only.		
Cover Name	Sum Insured		
Fire Basic Cover	35,57,50,298.00		

Location Name and Address:2-HLL Lifecare Limited (A Government of India Enterprise),Research & Development Dpt, Trivandrum Office, Kerala,Thiruvananthapuram,Thiruvananthapuram,695015

Occupancy Code	1007	Occupancy Description	Office premises / Meeting Rooms
संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured	
Other Contents	R&D , Administrative Office	35,76,18,462.00	

पॉलिसी नंबर/ **Policy Number:**
571600112310000265

व्यवसाय स्रोत/Business Source

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Total Sum Insured		35,76,18,462.00
Total Sum Insured (in Words)	Rupees Thirty Five Crore Seventy Six Lakh Eighteen Thousand Four Hundred Sixty Two Only.	

Cover Name	Sum Insured
Fire Basic Cover	35,76,18,462.00

Location Name and Address:3-HLL Lifecare Limited (A Government of India Enterprise),Kakkanad Factory, Cochin(KFC),Kerala,Ernakulam,Kochi,682030

Occupancy Code	Occupancy Description
2167	Rubber Goods Manufacturing without spreading

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	Quality testing & Packing / both male & female condom - EXPORT only	22,29,30,826.00
Total Sum Insured		22,29,30,826.00
Total Sum Insured (in Words)	Rupees Twenty Two Crore Twenty Nine Lakh Thirty Thousand Eight Hundred Twenty Six Only.	

Cover Name	Sum Insured
Fire Basic Cover	22,29,30,826.00

Location Name and Address:4-HLL Lifecare Limited (A Government of India Enterprise),Chennai Marketing Office,Tamil Nadu,Chennai,Chennai,600001

Occupancy Code	Occupancy Description
1007	Office premises / Meeting Rooms

संपत्ति का प्रकार Type of property	ब्लॉक में संपत्ति का विवरण Description of the property in the block	बीमा राशि Sum Insured
Other Contents	Building, Plant & Machinery, Lab Equipments, Fixtures/Furniture, Electrical Fittings, Office Equipments- as per detailed list	14,68,92,114.00
Total Sum Insured		14,68,92,114.00
Total Sum Insured (in Words)	Rupees Fourteen Crore Sixty Eight Lakh Ninety Two Thousand One Hundred Fourteen Only.	

Cover Name	Sum Insured
Fire Basic Cover	14,68,92,114.00

Financier Name and Address:	Hypothecation,CANARA BANK,TRIVANDRUM
Financier Name and Address:	Hypothecation,STATE BANK OF INDIA,COMMERCIAL BRANCH,TRIVANDRUM
Financier Name and Address:	Hypothecation,HDFC BANK,TRIVANDRUM

Excess Clause as applicable for each and every Loss:

Standard Excess

- 5% of claim amount subject to a minimum of INR 10,000/-

Excess Imposed(Higher): NA

Voluntary Deductible Opted(If a Voluntary Deductible (VD) is imposed and mentioned in the policy, then it should supersede the above mentioned deductible):

AOG Peril	0
Other Perils	0

In case of claim, standard excess or Imposed excess which ever is higher will be applicable

Excess for Terrorism

- Industrial Risk: 5% of claim amount subject to a minimum of INR 1,00,000/- and a maximum of INR 25,00,000/-
- Non Industrial Risk: 5% of claim amount subject to a minimum of INR 25,000/- and a maximum of INR 10,00,000/-

Debris Removal: Upto 2% of the claim amount for reasonable costs of removing debris from the site

टैक्स इनवॉयस/TAX INVOICE

इनवॉयस क्र.सं./Invoice Serial No: 30961F3PE0000265

इनवॉयस तिथि/Invoice Date: 18/09/2023

आपूर्तिकर्ता का विवरण/Details of Supplier

Limited

GSTIN NO.

प्राप्तकर्ता का विवरण/Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
पता/Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
शहर/City : THIRUVANANTHAPURAM,
जिला/District: THIRUVANANTHAPURAM,
राज्य/State: KERALA,
पिन/PIN: 695012.

आपूर्ति का स्थान/Place Of Supply State : Kerala
राज्य कोड/State Code : 32
जीएसटीआईएन नंबर/GSTIN No : 32AAACH5598K7Z4

सैक कोड/SAC Code	सेवा का विवरण/Description of Service	कुल/Total(₹)	छूट/Discount	टैक्स योग्य/मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/CGST		एसजीएसटी/यूटीजीएसटी/SGST/UTGST		आईजीएसटी/IGST		Kerala Flood Cess
					दर/Rate	राशि/Amount(₹)	दर/Rate	राशि/Amount(₹)	दर/Rate	राशि/Amount(₹)	राशि/Amount(₹)
997137	Other property insurance services						6		0%	0	0
TOTAL										0	0
कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (in figures) : ₹											
कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए,											
रिवर्स चार्ज के अधीन टैक्स की राशि/ Amount of Tax Subject to Reverse Charge : ₹											

E.&O.E

कृते नेशनल इन्श्योरेंस कंपनी लिमिटेड/
For and on behalf of

पॉलिसी अनुसूची/ Policy Schedule - Standard Fire & Special Perils	
Policy Number: 571600112310000266	व्यवसाय स्रोत / Business Source: 571600

पॉलिसी नंबर / Policy Number: 571600112310000266	व्यवसाय स्रोत / Business Source: 571600

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024		
प्रीमियम/ Premium	कवर नोट संख्या और तथि/ Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST	प्रस्ताव संख्या और तथि/Proposal Number and Date	8800230915094904 Dt. 15/09/2023
IGST		
कम:जीएसटी टीडीएस / Less:GST_TDS	रसीद संख्या और तथि/Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	पछिली पॉलिसी संख्या और समाप्ती तथि/ Previous Policy Number and Expiry Date	571600112010000538 and Dt.31/01/2022 571600111910000581 and Dt.31/01/2021 571600111810000649 and Dt.31/01/2020 571600112110000487 and Dt.31/01/2023
कुल /Total Amount		
(Rupee)		

Occupancy Code: 2167	Occupancy Details: Rubber Goods Manufacturing without spreading
Classification of Risk:	Occupancy Code: 2167 Occupancy Details: Rubber Goods Manufacturing without spreading

Total Location Sum Insured	₹ 6,02,43,80,234.00
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LocationAddress:

- 1)LO NOIDA,LO NOIDA,Noida,Gautam Buddha Nagar,Uttar Pradesh,201301.
- 2)HLL AKKULAM FACTORY, SREEKARIYAM POST, TRIVANDRUM,HLL AKKULAM FACTORY, SREEKARIYAM POST, TRIVANDRUM,Thiruvananthapuram,Thiruvananthapuram,Kerala,695017.
- 3)HLL KANAGALA FACTORY, KANAGALA, BELGAUM,HLL KANAGALA FACTORY, KANAGALA, BELGAUM,Belgaum - District Others,Belgaum,Karnataka,591225.
- 4)CORPORATE HEAD OFFICE,Thiruvananthapuram,CORPORATE HEAD OFFICE,Thiruvananthapuram,Thiruvananthapuram,Thiruvananthapuram,Kerala,695015.
- 5)HLL PEROORKADA FACTORY, PEROOKADA,HLL PEROORKADA FACTORY,

पॉलिसी अनुसूची/ Policy Schedule - Standard Fire & Special Perils	
Policy Number: 571600112310000266	व्यवसाय स्रोत / Business Source: 571600
	विक्रय चैनल विवरण/

7

PEROOKKUDA, Hiruvananthapuram, Hiruvananthapuram, Kerala, 695005.

SL. No	Coverage	Coverage Description	Sum Insured
1	STFI	STFI COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT LO NOIDA AS PER LIST ATTACHED	64,63,64,249.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
2	SFSP Basic Cover	BASIC COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT LO NOIDA AS PER LIST ATTACHED	64,63,64,249.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
3	Earthquake (Fire & Shock)	EQ COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT LO NOIDA AS PER LIST ATTACHED	64,63,64,249.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
4	Earthquake (Fire & Shock)	EQ COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT AFT AKKULAM AS PER LIST ATTACHED	1,22,67,34,142.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
5	SFSP Basic Cover	BASIC COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT AFT AKKULAM AS PER LIST ATTACHED	1,22,67,34,142.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
6	STFI	STFI COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT AFT AKKULAM AS PER LIST ATTACHED	1,22,67,34,142.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils Policy		
7	SFSP Basic Cover	BASIC COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT KFB KANAGALA,BELGAUM AS PER LIST ATTACHED	1,82,26,49,573.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and condition of Standard Fire and Special Perils Policy Terrorism excluded		
8	STFI	STFI COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT KFB KANAGALA,BELGAUM AS PER LIST ATTACHED	1,82,26,49,573.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and condition of Standard Fire and Special Perils Policy		
9	Earthquake (Fire & Shock)	EQ COVER FOR BUILDING , PLANT & MACHINERY, FURNITURE/FIXUTRES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT KFB KANAGALA,BELGAUM AS PER LIST ATTACHED	1,82,26,49,573.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and condition of Standard Fire and Special Perils Policy		

Policy Number: 571600112310000266	व्यवसाय स्रोत / Business Source: 571600
	व्यवसाय स्रोत / Business Source: 571600

10	Earthquake (Fire & Shock)	EQ COVER FOR BUILDING, PLANT & MACHINERY, LAB EQUIPMENTS, FURNITURE/FIXTURES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS ETC LOCATED AT CHO, TRIVANDRUM AS PER LIST ATTACHED	50,92,45,008.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
11	SFSP Basic Cover	BASIC COVER FOR BUILDING, PLANT & MACHINERY, LAB EQUIPMENTS, FURNITURE/FIXTURES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS ETC LOCATED AT CHO, TRIVANDRUM AS PER LIST ATTACHED	50,92,45,008.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
12	STFI	STFI COVER FOR BUILDING, PLANT & MACHINERY, LAB EQUIPMENTS, FURNITURE/FIXTURES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS ETC LOCATED AT CHO, TRIVANDRUM AS PER LIST ATTACHED	50,92,45,008.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 25,000 for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
13	Earthquake (Fire & Shock)	EQ COVER FOR BUILDING, PLANT & MACHINERY, FURNITURE/FIXTURES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT PFT PEROOKADA, TRIVANDRUM AS PER LIST ATTACHED	1,81,93,87,262.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
14	STFI	STFI COVER FOR BUILDING, PLANT & MACHINERY, FURNITURE/FIXTURES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT PFT PEROOKADA, TRIVANDRUM AS PER LIST ATTACHED	1,81,93,87,262.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils policy		
15	SFSP Basic Cover	BASIC COVER FOR BUILDING, PLANT & MACHINERY, FURNITURE/FIXTURES, OFFICE EQUIPMENTS, ELECTRICAL FITTINGS & EQUIPMENTS AT PFT PEROOKADA, TRIVANDRUM AS PER LIST ATTACHED	1,81,93,87,262.00
	अधिक/Excess: 5% of claim amount subject to a minimum of INR 5 lakhs for each and every claim.		
	Additional Information: As per terms and conditions of Standard Fire and Special Perils Policy		

Clauses	As per Annexure I
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Excess in Standard Fire and Special Perils Policy (except Dwellings with Individual owners):

- 1) Policies having Sum Insured up to INR 10 cr per location – 5% of claim amount subject to a minimum of Rs 10,000/-
- 2) Policies having Sum Insured above INR 10 cr per location up to INR 100 cr per location - 5% of claim amount subject to a minimum of INR 25,000/-
- 3) Policies having Sum Insured above INR 100 cr and up to INR 1500 cr per location - 5% of claim amount subject to a minimum of INR 5 lakhs
- 4) Policies having Sum Insured above INR 1500 cr and up to INR 2500 cr per location - 5% of claim amount subject to a minimum of INR 25 lakhs
- 5) Policies having Sum Insured above INR 2500 cr per location - 5% of claim amount subject to a minimum of INR 50 lakhs
- 6) For Floater and Floater Declaration Stock policies the Minimum deductible will be 5% of the Claim amount subject to a minimum of Rs 50,000

Excess for Policies of Power Plants (Excluding wind & solar) & Steel Plants having Sum Insured above Rs 500 cr per location:

- 1) 5% of Claim amount subject to a minimum of Rs 1.25 Cr

Excess for Terrorism:

- 1) Industrial Risk: 5% of claim amount subject to a minimum of Rs 1,00,000 and a maximum of Rs 25,00,000/-
- 2) Non Industrial Risk: 1% of claim amount subject to a minimum of Rs 25,000 and a maximum of Rs 10,00,000/-

पॉलिसी अनुसूची/ Policy Schedule - Standard Fire & Special Perils

Policy Number: 571600112310000266

व्यवसाय स्रोत / Business Source: 57160

विक्रय
S#

Mandaram, Kanara

FINANCIER DETAILS

Sr.No	Type of Finance	Name of Financier	Address
1	Hypothecation	CANARA BANK	TRIVANDRUM
2	Hypothecation	STATE BANK OF INDIA	COMMERCIAL BRANCH, TRIVANDRUM
3	Hypothecation	HDFC BANK LTD	TRIVANDRUM

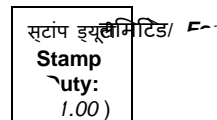
टिप्पणियां/ **Remarks:** Non-floater policy covering Building, Plant & Machinery, Furniture/fixtures, Office equipment ,Electrical Fittings & equipment at five locations .

Terrorism excluded

Excess will be applicable as per terms and conditions of the respective policy and coverage.

जिसकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत किया जा रहा है उसके हाथ नरिधारति करि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियकृति जिसके लिए यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसि भी हसिसे में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आशवासन दयि जाता है क्प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकति नरिस्त हो जाएगी । **/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 18/September/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the webs shall be read together as one contract and any word or expression to which the specific meanin or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेन्सइंडियालिमिटेड



पॉलिसी अनुसूची/ Policy Schedule - Standard Fire & Special Perils	
Policy Number: 571600112310000266	व्यवसाय स्रोत / Business Source: 571600
	Code: 1920
	e.

अनुलग्नक I / ANNEXURE I- लागू खंडों की सूची/ List of Applicable Clauses

- Agreed Bank Clause
- Earthquake(Fire & Shock) Clause
- Terrorism Clause(applicable for Unit CMO only)

TAX INVOICE

Invoice Serial No: 30961F3PE0000266

Invoice Date: 18/09/2023

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non-life insurance services (excluding reinsurance services)	0.00		0.00					0%	0	0
TOTAL										0	0

कुल इनवायर्स मूल्य (अंकों में) Total Invoice Value (In figures) :

कुल इनवायर्स मूल्य (शब्दों में) Total Invoice Value (In words) : रुपए/Rupees

Eighty C
केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

कंपनी लिमिटेड/ For
imited

पॉलिसी अनुसूची/ Policy Schedule - Marine Cargo Open Policy	
Policy Number: 57160021231000054	व्यवसाय स्रोत /Business Source: 571600
	विक्रय 571600
Customer	

Whereas the Assured named in the Schedule hereto have represented to the Insurer (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885522 Dt. 31/07/2023
SGST/UTGST		
IGST		
कम: जीएसटी_टीडीएस / Less: GST_TDS	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी / Recoverable Stamp Duty	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600211810000360 and Dt.31/01/2020 571600212110000223 and Dt.31/01/2023
कुल /Total Amount		

(Rupees Thirty Nine Thousand Six Hundred Ninety Seven Only.)

Open Policy						
Limit Per transit	20,00,00,000.00		Limit per location	20,00,00,000.00		
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured
India	India	ANYWHERE IN INDIA	HLL Peroorkada factory,HLL Akkulam factory and HLL Kanagala factory	NA	NA	Consignee
Declaration Frequency	2023 by ID: 76216, AID : 76226 Immediately after		Multi transit cover	Yes	Page no: 1	

Policy Number:

57160021231000054

व्यवसाय स्रोत /Business Source: 571600

वकिग

Warranted Vehicle/Wagon is closed or covered with tarpaulin .

Subject to Open Policy Clause as attached

Private Carriers Warranty

Institute Radio-Active Contamination Exclusion Clause

Computer Millennium Clause(Cargo)

Cargo ISM endorsement

Strike, riot, & civil commotion clause

All Transit/LR values should be declared on monthlybasis. Invoice value should be clearly shown in each LR.

Claims, if any, should be reported to "NIC" immediately.

Damage Certificate is compulsory for all claims.

Theft claim should be supported by Police FIR & Final Report.

FINANCIER NAME/BRANCH DETAILS: STATE BANK OF INDIA, COMMERCIAL BRANCH, TRIVANDRUM-14

EXCESS:Rs.1000/- FOR EACH AND EVERY CLAIM

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखति कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएिे जां। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट

पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्तजिसिके लिए यह वशिषिट अर्थ पालासा या अनुसूचा के कसी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है क प्रीमियम चेक के

असवीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिसत हो जाएगी। ***/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the webs'*** shall be read together as one contract

and any word or expression to which the specific meaning has been ascribed in any part of the policy, or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'

इंश्योरेन्सइंडियलमिडिड

स्टॉप इयूकमिडिड
Stamp

TAX INVOICE

Invoice Serial No: 30961C3PE0000054

Invoice Date: 01/08/2023

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services								0%	0	0
TOTAL										0	0

कल इनवायस मल्य (अंकों में) Total Invoice Value (In figures) :

कल इनवायस मल्य (शब्दों में) Total Invoice Value (In words) : रुपये

विवरण:

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

Policy Number:

57160021231000055

व्यवसाय स्रोत /Business Source: 571600

Whereas the Assured named in the Schedule hereto have represented to _____ (referred to as "company") that they are interested in or duly authorized to make the insurance as mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885545 Dt. 31/07/2023
कम: जीएसटी_टीडीएस / Less: GST_TDS		
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पहिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600212110000225 and Dt.31/01/2023 571600211810000361 and Dt.31/01/2020
(R)		

Open Policy

Limit Per transit	10,00,00,000.00	Limit per location	10,00,00,000.00			
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured
India	India	ANYWHERE IN INDIA AS PER DESCRIPTION	ANYWHERE IN INDIA AS PER DESCRIPTION	NA	NA	Owner
Declaration Frequency	2023 by ID: 76216, AID : 76226 Immediately after	Multi transit cover	Yes	Page no: 1		

Policy Number:

57160021231000055

व्यवसाय सूत्र

	commencement of Transit	
Mode of Transit	By Air By Rail By Road	

Details of Packaging and Commodity

Commodity	Packaging	Sum Insured
STOCK OF IMPLANTS,SURGICAL CONSUMABLES,DRUGS,LENS & FRAMES FROM CHANDIGARH W/H & DELHI W/H(RBD) TO ANYWHERE IN INDIA	NA	INR 62,97,00,000.00
FINISHED GOODS(CONDOMS, PILLS, BLOOD BAGS, COPPE-T, SHUNT, GLOVES ETC.) FROM KANAGALA FACTORY (KFB) TO ANYWHERE IN INDIA	NA	INR 99,14,50,500.00
ALL FINISHED GOODS (CONDOMS, PILLS, BLOOD BAGS, COPPE-T, SHUNT, GLOVES ETC.) FROM PEROORKADA FACTORY(PFT) TO ANYWHERE IN INDIA	NA	INR 53,68,52,285.00
ALL FINISHED GOODS (CONDOMS, PILLS, BLOOD BAGS, COPPE-T, SHUNT, GLOVES ETC.) FROM AKKULAM FACTORY(AFT) TO ANYWHERE IN INDIA	NA	INR 84,37,61,422.00
FINISHED GOODS (CONDOMS, PILLS, BLOOD BAGS, COPPE-T, SHUNT, GLOVES ETC.) FROM C&FA LOCATIONS TO ANYWHERE IN INDIA	NA	INR 69,50,00,000.00
SEMIFINISHED GOODS (CONDOMS, PILLS, BLOOD BAGS, COPPE-T, SHUNT, GLOVES ETC.) FROM IRAPURAM FACTORY(IFC) TO KAKKANAD HLL,PEROORKADA HLL, KANAGALA HLL	NA	INR 21,42,00,000.00

Storage description

Description of storage	Period /time (In weeks)
N/A	N/A
Term Of Cover	As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto
Clauses / Special Condition/Warranties	As per Annexure I
Important notice (claim)	As per attached document

EXCESS DETAILS

Sr.No.	Excess Description	Excess Amount
1	RS.1000/- FOR EACH AND EVERY CLAIM REPORTED	1000

Policy Number:

57160021231000055

व्यवसाय स्रोत /Business Source: 5

Survey and claim settlement

Survey Agent Details

Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No	Fax No
India	Contact person: [Redacted]		
Canada,USA,North America,South America and Polynesia up to the east of International Date line.			TEL 201 962 4015
For far East and Australia & Asia			
All other Region except above	and		

टिप्पणियाँ/ **Remarks:** Risk Covered: All Risk Including SRCC

Term Of Insurance :As per the following Clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated and attached hereto

Inland Transit (Rail or Road) A- All Risk

Warranted Vehicle/Wagon is closed or covered with tarpaulin .

Subject to Open Policy Clause as attached

Private Carriers Warranty

Institute Radio-Active Contamination Exclusion Clause

Computer Millennium Clause(Cargo)

Cargo ISM endorsement

Strike, riot, & civil commotion clause

All Transit/LR values should be declared on monthlybasis. Invoice value should be clearly shown in each LR. Claims, if any, should be reported to "NIC" immediately. Damage Certificate is compulsory for all claims. Theft claim should be supported by Police FIR & Final Report.

FINANCIER NAME/BRANCH DETAILS: STATE BANK OF INDIA, COMMERCIAL BRANCH, TRIVANDRUM-14

Excess: RS.1000/- FOR EACH AND EVERY CLAIM REPORTED

Policy Number:

571600212310000055

व्यवसाय स्रोत /Business Source: 571600

व्यक्ति /Person

जारीकर्ता /Issued by

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधिकृत किया जा रहा है उसके हाथ नर्धारित किए जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट पर उपलब्ध है, को एक अनुबंध के रूप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह वांशाष्ट अर्थ पालासा या अनुसूची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमिकता नरिसत हो जाएगी। ***IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 04/08/2023. This schedule, the policy, the clauses, the endorsements and policy wordings as available in the website shall be read together as one contract and any word or expression to which the specific meaning has been assigned in the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'***

इंश्योरेन्सइंडियामिडिड

TAX INVOICE

Invoice Serial No: 30961C3PE0000055

Invoice Date: 01/08/2023

Details of Supplier:

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess		
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)		
997135	Marine, aviation, and other transport insurance services											0	
TOTAL											0	0	
कुल दस्तावेज़ मूल्य (शुद्ध में) Total Invoice Value (Net), -													
कुल इनवायस मूल्य (शुद्ध में) Total Invoice Value (Net), -													
												Rupees	
रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No													

E.&.O.E

Policy Number:

571600212310000056

व्यवसाय स्रोत /Business Source: 571600

वर्ग

Whereas the Assured named in the Schedule hereto have represented to the Insurer (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885557 Dt. 31/07/2023
कम: जीएसटी_टीडीएस / Less: GST_TDS		
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पहिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600212110000224 and Dt.31/01/2023 571600211810000359 and Dt.31/01/2020

Open Policy

Limit Per transit		5,00,00,000.00		Limit per location		5,00,00,000.00	
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured	
India	India	ANYWHERE IN INDIA	PLANTS AT PEROORKADA, KANAGALA PLANT, AKKULAM FACTORY (FURNACE OIL /HSD/LNG)	NA	NA	Owner	
Printed on 02/08/2023 by ID: 76216, AID : 76226							Page no: 1

Policy Number:

57160021231000056

व्यवसाय

60

Declaration Frequency	Immediately after commencement of Transit	Multi transit cover	No
Mode of Transit	By Road		

Details of Packaging and Commodity

Commodity	Packaging	Sum Insured
FURNACE OIL/LNG FROM ANYWHERE IN INDIA TO PEROORKADA FACTORY	Others	INR 13,60,27,628.00
FURNACE OIL FROM ANYWHERE IN INDIA TO KANAGALA FACTORY	Others	INR 3,00,00,000.00
FURNACE OIL/HSD FROM ANYWHERE IN INDIA TO AKKULAM FACTORY	Others	INR 2,67,38,661.00

Storage description

Description of storage	Period /time (In weeks)
N/A	N/A
Term Of Cover	As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto
Clauses / Special Condition/Warranties	As per Annexure I
Important notice (claim)	As per attached document

EXCESS DETAILS

Sr.No.	Excess Description	Excess Amount
1	Excess: RS.1000/- FOR EACH AND EVERY CLAIM REPORTED	1000

Survey and claim settlement

Survey Agent Details

Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No
India	Contact nearest Division/Bran	
Canada,USA,North America,South America and Polynesia up to the east of International Date line.		
For far East and Australia & Asia		
All other Region except above	anuraj	

टिप्पणियाँ/ **Remarks:** Risk Covered: All Risk Including SRCC

Term Of Insurance :As per the following Clauses written hereunder, current on date of sailing or despatch and/or otherwise stated and attached hereto

Inland Transit (Rail or Road) A- All Risk

Warranted Vehicle/Wagon is closed or covered with tarpaulin .

Policy Number:

571600212310000056

व्यवसाय स्रोत /Business Source

Insurance

Subject to Open Policy Clause as attached

Private Carriers Warranty

Institute Radio-Active Contamination Exclusion Clause

Computer Millennium Clause(Cargo)

Cargo ISM endorsement

Strike, Riot, civil commotion clause

All Transit/LR values should be declared on monthly basis. Invoice value should be clearly shown in each LR.

Claims, if any, should be reported to NIC immediately. Damage Certificate is compulsory for all claims.

Theft claim should be supported by Police FIR & Final Report.

Financier name/Branch Details: STATE BANK OF INDIA , COMMERCIAL BRANCH, TRIVANDRUM-14

Excess: RS.1000/- FOR EACH AND EVERY CLAIM REPORTED

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखति कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधिकृत कयिा जा रदा है मग्ने तश नरिधारति कएि जाए। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट

पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची के किसी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है क प्रीमियम चेक के

अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकता नरिस्त हो जाएगी। **/IN WITNESS WHEREOF**, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this **01/August/2023**. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the shall be read together as one contract

and any word or expression to which the specific meaning of the schedule shall bear the same meaning wherever it may appear. It is warranted that **IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेन्सइंडियालिमिटेड

Duty.
(₹ 0.50)

TAX INVOICE

Invoice Serial No: 30961C3PE0000056

Invoice Date: 01/08/2023

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services										0
TOTAL							2,169		0		0

₹ में Total invoice value (in figures) :

कुल टैक्स योग्य मूल्य (अथवा जीएसटी योग्य मूल्य (in words)) : रूपए/Rupees

कवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

Policy Number:

57160021231000057

व्यवसाय स्रोत /Business Source: 571600

Whereas the **Assured** named in the Schedule hereto have represented to _____ (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885569 Dt. 31/07/2023
कम: जीएसटी_टीडीएस / Less: GST_TDS		
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600211910000274 and Dt.31/01/2021 571600211810000358 and Dt.31/01/2020

Open Policy

Limit Per transit		3,00,000.00		Limit per location		3,00,000.00	
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured	
All - Country	India	ANYWHERE IN WORLD	KAKKANAD FACTORY	NA	NA	Owner	
All - Country	India	ANYWHERE IN WORLD	IRAPURAM FACTORY	NA	NA	Owner	
Printed on 02/08/2023 by ID: 76216, AID : 76226							Page no: 1

Policy Number:

57160021231000057

व्यवसाय स्रोत /Business Source: 571600

Declaration Frequency	immediately after commencement of Transit	Multi transit cover	Yes
Mode of Transit	By Air By Rail By Regular Vessel By Road		

Details of Packaging and Commodity

Commodity	Packaging	Sum Insured
RAW MATERIALS, PACKING MATERIALS, GENERAL STORE SPARES, COMPONENTS, PLANT & MACHINERY & OTHER EQUIPMENTS FROM ANYWHERE IN WORLD TO KAKKANAD FACTORY	NA	INR 37,20,600.00
RAW MATERIALS, PACKING MATERIALS, GENERAL STORE SPARES, COMPONENTS, PLANT & MACHINERY & OTHER EQUIPMENTS FROM ANYWHERE IN WORLD TO IRAPURAM FACTORY	NA	INR 43,00,000.00

Storage description

Description of storage	Period /time (In weeks)
N/A	N/A
Term Of Cover	As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto
Clauses / Special Condition/Warranties	As per Annexure I
Important notice (claim)	As per attached document

Survey and claim settlement

Survey Agent Details			
Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No	Fax No
India	Contact person: [Redacted]	[Redacted]	[Redacted]
Canada, USA, North America, South America and Polynesia up to the east of International Date line.			45
For far East and Austral Asia			
All other Region except above	and/c		

टिप्पणियाँ/ **Remarks:** Risk Covered: ICC (A) Including War & SRCC

Term Of Insurance :As per the following Clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated and attached hereto

Institute cargo clause (A)

Policy Number:

57160021231000057

व्यवसाय स्रोत /Business Source: 571600

विक्रय चैनल वविरण/Sales Channel Co

571600

Institute war clause (Cargo)
Institute strike clause (Cargo)
Institute Radio-Active Contamination Exclusion Clause
Computer Millennium Clause(Cargo)
Cargo ISM endorsement
Subject to Open Policy Clause as attached

All Transit/LR values should be declared on monthlybasis. Invoice value should be clearly shown in each LR.
Claims, if any, should be reported to NIC immediately.

The declaration should be furnished within 15 days from the date of shipment in case of imports or arrival of ship whichever is earlier.

Financier name/Branch Details: STATE BANK OF INDIA , COMMERCIAL BRANCH, TRIVANDRUM-14

EXCESS RS.1000/- FOR EACH AND EVERY CLAIM

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्तजिसिके लएि यह वशिषिट अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिसुत हो जाएगी। ***/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the websi read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'***

...रायरेनस कंपनी

इंश्योरेन्सइंडयिलमिटिड

TAX INVOICE

Invoice Serial No: 30961C3PE0000057

Invoice Date: 01/08/2023

Details of Supplier:

National Insurance Com
PALARIVATT
State

Details

... NAPIIRAM -

City :
District :

Code :
GSTIN No :

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services		0%								0
TOTAL										0	0

Total Invoice Value (In figures) :

कल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

Policy Number:

57160021231000058

व्यवसाय स्रोत /Business Source: 571600

व्यवसाय स्रोत /Business Source: 571600

Whereas the Assured named in the Schedule hereto have represent

"company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885577 Dt. 31/07/2023
कम: जीएसटी_टीडीएस / Less: GST_TDS		
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600211910000274 and Dt.31/01/2021 571600211810000358 and Dt.31/01/2020 571600202110000229 and Dt.31/01/2023
(Rupee)		

Open Policy

Limit Per transit	3,43,95,000.00	Limit per location	3,43,95,000.00			
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured
All - Country	India	ANYWHERE IN WORLD	AKKULAM FACTORY- AKKULAM FACTORY	NA	NA	Owner
Declaration Frequency	2023 by ID: 76216, AID : 76226 Immediately after	Multi transit cover	Yes	Page no: 1		

Policy Number:
57160021231000058

व्यवसाय स्रोत /Business Source: 571600

Code:

	commencement of Transit		
Mode of Transit	By Air By Rail By Regular Vessel By Road		

Details of Packaging and Commodity

Commodity	Packaging	Sum Insured
RAW MATERIALS, PACKING MATERIALS, GENERAL STORE SPARES, COMPONENTS, PLANT & MACHINERY & OTHER EQUIPMENTS FROM ANYWHERE IN INDIA TO AKKULAM FACTORY	NA	INR 13,03,06,453.00

Storage description

Description of storage	Period /time (In weeks)
N/A	N/A
Term Of Cover	As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto
Clauses / Special Condition/Warranties	As per Annexure I
Important notice (claim)	As per attached document

Survey and claim settlement

Survey Agent Details

Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No	Fax No
India	Contact nearest f		
Canada,USA,North America,South America and Polynesia up to the east of International Date line.			
For far East and Austral Asia			
All other Region exc			

टिप्पणियां/ **Remarks:** Risk Covered: ICC (A) Including War & SRCC

Term Of Insurance :As per the following Clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated and attached hereto

Institute cargo clause (A)
 Institute war clause (Cargo)
 Institute strike clause (Cargo)
 Institute Radio-Active Contamination Exclusion Clause
 Computer Millennium Clause(Cargo)
 Cargo ISM endorsement
 Subject to Open Policy Clause as attached

Policy Number:

57160021231000058

व्यवसाय स्रोत /Business Source: 571600

All Transit/LR values should be declared on monthly basis. Invoice value should be clearly stated. Claims, if any, should be reported to NIC immediately.

The declaration should be furnished within 15 days from the date of shipment in case of imports or arrival of ship whichever is earlier.

Financier name/Branch Details: STATE BANK OF INDIA , COMMERCIAL BRANCH, TRIVANDRUM-14

EXCESS RS.1000/- FOR EACH AND EVERY CLAIM

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्तजिसिके लिए यह वशिष्ट अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आशवासन दयिा जाता है कपिरीमयिम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिसुत हो जाएगी। ***/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the websi ad together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'***

हंपनी

इंशयोरनसइंडयिालमिडि

| **Duly.**

TAX INVOICE

Invoice Serial No: 30961C3PE0000058

Invoice Date: 01/08/2023

GSTIN No: 32AAACH5598K7Z4

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services								%	0	0
TOTAL											

कल इनवायस मलय (अंकों में) Total Invoice Value (In figures) :

कल इनवायस मलय (शब्दों में) Total Invoice Value (In words) : रुपया/Rupees

केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

Policy Number:

57160021231000059

व्यवसाय स्रोत /Business Source: 57160

Whereas the Assured named in the Schedule hereto have represented (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885694 Dt. 31/07/2023
कम: जीएसटी_टीडीएस / Less: GST_TDS	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600212110000226 and Dt.31/01/2023 571600211810000357 and Dt.31/01/2020
कुल /Total Amount		
(Rupees ₹)		

Open Policy

Limit Per transit		3,00,00,000.00		Limit per location		3,00,00,000.00	
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured	
India	India	HLL lifecare Ltd Plant at Indore IIA- I-12-C-1 Industrial Area -E Sanweer Road Indore.GOA(under KFB)	Various Places in India	NA	NA	Owner	
Printed on 02/08/2023 by ID: 76216, AID : 76226							Page no: 1

पॉलिसी अनुसूची/ Policy Schedule - Marine Cargo Open Policy

Policy Number:

57160021231000059

व्यवसाय स्रोत /Business Source: 571600

व्यापार/Sales Channel Code:

डॉक नंबर/

Number:

ईमेल/

Declaration Frequency	immediately after commencement of Transit	Multi transit cover	No
Mode of Transit	By Road		

Details of Packaging and Commodity

Commodity	Packaging	Sum Insured
FINISHED GOODS(PHARMA PRODUCRS/KITS ETC.)	NA	INR 3,00,00,000.00

Storage description

Description of storage	Period /time (In weeks)
N/A	N/A

Term Of Cover As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto

Clauses / Special Condition/Warranties As per Annexure I

Important notice (claim) As per attached document

EXCESS DETAILS

Sr.No.	Excess Description	Excess Amount
1	EXCESS RS.1000/- FOR EACH AND EVERY CLAIM	1000

Survey and claim settlement

Survey Agent Details

Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No	Fax No
India			
Canada,USA,North America,South America and Polynesia up to the east of International Date line.		00 65 85224379 /020 83007744	00 65 62250428 / 020 83091266
For far East and Australia Asia		00 44 77 15003651 / 020 83007744	020 83091266
All other Region except above			

टिप्पणियाँ/ **Remarks:** Risk Covered: All Risk Including SRCC

Term Of Insurance :As per the following Clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated and attached hereto

Inland Transit (Rail or Road) A- All Risk

Warrented Vehicle/Wagon is closed or covered with tarpaulin .

Subject to Open Policy Clause as attached

Private Carriers Warranty

पॉलिसी अनुसूची/ Policy Schedule - Marine Cargo Open Policy

Policy Number:

57160021231000059

व्यवसाय स्रोत /Business Source: 571600

वकिरय
5

Continued

Institute Radio-Active Contamination Exclusion Clause

Computer Minimum Clause(Cargo)

Cargo ISM endorsement

Strike, Riot, civil commotion clause

All Transit/LR values should be declared on monthly basis. Invoice value should be clearly shown in each LR.
Claims, if any, should be reported to NIC immediately. Damage Certificate is compulsory for all claims.
Theft claim should be supported by Police FIR & Final Report.

Financier name/Branch Details: STATE BANK OF INDIA , COMMERCIAL BRANCH, TRIVANDRUM-14

EXCESS RS.1000/- FOR EACH AND EVERY CLAIM

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधिकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह वाशाष्ट अर्थ पालासा या अनुसूचा के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है क प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिस्त हो जाएगी। **/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the websit** as one contract and any word or expression to which the specific meaning ha. .ll bear the same meaning wherever it may appear. It is warranted that **IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेन्सइंडियालिमिटेड

स्टांप डू
Stamp
Dt

TAX INVOICE

Invoice Serial No: 30961C3PE0000059

Invoice Date: 01/08/2023

Details of Supplier:

State:

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services										0
TOTAL									0		0

कुल मूल्य में Total Invoice Value (In figures) :

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

कृते नेशनल
and on behalf

1900

पॉलिसी नंबर / Policy Number:
571600212310000060

संख्या / Number: 571600
कॉड / Code:

Whereas the Assured named in the Schedule hereto have represented to National Insurance Company Ltd. (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.
THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause, Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED
पता /Address: (A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA, City: THIRUVANANTHAPURAM, District:
THIRUVANANTHAPURAM, State: KERALA, PIN: 695012.
Cell: 9895934437

ग्राहक आईडी /Customer ID:
9702288542
फोन /Phone:
ई-मेल /E-Mail: thomaspa@lifecarehll.com
पैन /PAN: AAACH5598K

पॉलिसी 01/07/2023 के 00.00 से 30/06/2024 की मध्य रात्रतक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम / Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885603 Dt. 31/07/2023
IGST		
कम.जीएसटी_टीडीएस / Less: GST_TDS	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी / Recoverable Stamp Duty	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600212110000204 and Dt.31/01/2023 571600212010000168 and Dt.31/01/2022 571600211910000273 and Dt.31/01/2021 571600211810000345 and Dt.31/01/2020
कुल /Total Amount		

Open Policy						
Limit Per transit	25,00,00,000.00			Limit per location	25,00,00,000.00	
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured
India	All - Country	Any Port / Place in India	WAREHOUSE (ANYWHERE IN THE WORLD)	NA	NA	Owner
Declaration Frequency						Page no: 1
/2023 by ID: 76216, AID: 76226 Immediately after				Multi transit cover		Yes

Mode of Transit	commencement of Transit By Air By Rail By Regular Vessel By Road By Courier By Post
Details of Packaging and Commodity	
Commodity as per declaration	Packaging: NA
Description of storage	Storage description
	Period /time (In weeks)
Term Of Cover	N/A
Clauses / Special Condition/Warranties	As per the clauses written hereunder, current on date of sailing or dispatch and or otherwise stated and attached hereto
Important notice (claim)	As per Annexure I As per attached document

Sum Insured
INR 30,00,00,00.00

FRANCHISE DETAILS	
Sr.No.	Franchise Description
1	

Franchise Agreement

Survey and claim settlement			
Survey Agent Details	Mail ID	Telephone No	Fax No
Jurisdiction of Claim settling agencies/Region of the world	Contact nearest Division/Branch of		
India	eimc@eimc.com		+1 201 963 4015
Canada, USA, North America, South America and Polynesia up to the east of International Date line. For far East and Australia & Asia	james.lync	1204	+1 201 963 4015
All other Region except above	info@wkwedim ir a	020 15003651 / 020	00 65 62260426 83081266 020 83081266

टिप्पणियां/ Remarks: Risk Covered: ICC (A) Ii.

Term Of Insurance : As per the following Clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated and attached hereto

- Institute Cargo Clause (A)
- Institute War Clause (Cargo)
- Institute Strike Clause (Cargo)
- Institute Radio-Active Contamination Exclusion Clause
- Computer Millennium Clause(Cargo)

TAX INVOICE

Invoice No: 30961C3PE0000060

Bill of Receiver : HLL LIFECARE LIMITED
 (A GOVERNMENT OF INDIA UNDERTAKING),
 HLL BHAVAN - CORPORATE
 HEAD OFFICE,
 POOJAPPURA - PO |
 THIRUVANANTHAPURAM -
 695012,
 KERALA, INDIA
 THIRUVANANTHAPURAM,
 THIRUVANANTHAPURAM,
 KERALA,
 695012.

State of Supply State : Kerala
 32
 32AAACH5598K7Z4

सेवा का विवरण/ Description of Service	कुल/Total (₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
				दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
Marine, aviation, and other transport insurance services								0%	0	0
									0	0

TOTAL
 कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value : 1,18,000
 कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रुपए/Rupees
 One Lakh Eighteen Thousand

वसु/Only.
 विस चार्ज के अधीन टैक्स की राशि/ Amount of Tax Subject to Reverse Charge : No

E&O.E

Signature

पॉलिसी अनुसूची / Policy Schedule - Marine Cargo Open Policy

Policy Number:

57160021231000061

व्यवसाय स्रोत /Business Source: 571600

बु

Whereas the **Assured** named in the Schedule hereto have represented (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST	प्रस्ताव संख्या और तिथि / Proposal Number and Date	8800230731885807 Dt. 31/07/2023
IGST		
कम:जीएसटी_टीडीएस / Less:GST_TDS		
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि / Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	571600212110000228 and Dt.31/01/2023
(Rupees For)	2	

Open Policy

Limit Per transit		3,00,00,000.00		Limit per location		3,00,00,000.00	
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured	
India	India	Anywhere in India	Anywhere in India	NA	NA	Owner	
Declaration Frequency		2023 by ID: 76216, AID : 76226 Immediately after		Multi transit cover		No Page no: 1	

Policy Number:
57160021231000061

व्यवसाय स्रोत /Business Source: 571f

Mode of Transit	By Road
------------------------	---------

Details of Packaging and Commodity		
Commodity	Packaging	Sum Insured
Outgoing IT Assets& Lab Equipments CHO	NA	INR 3,00,00,000.00
Storage description		
Description of storage	Period /time (In weeks)	
N/A	N/A	
Term Of Cover	As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto	
Clauses / Special Condition/Warranties	As per Annexure I	
Important notice (claim)	As per attached document	

EXCESS DETAILS		
Sr.No.	Excess Description	Excess Amount
1	EXCESS RS.1000/- FOR EACH AND EVERY CLAIM	1000

Survey and claim settlement			
Survey Agent Details			
Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No	Fax No
India	Contact nearest Division		
Canada,USA,North America,South America and Polynesia up to the east of International Date line.		+1 201 942 1204	+1 201 963 4015
For far East and Australia & Asia		00 65 85224379 /020 83007744	00 65 62250428 / 020 83091266
All other Region except above		00 44 77 15003651 / 020 3007744	020 83091266

टिप्पणियाँ/ **Remarks:** Risk Covered: All Risk Including SRCC

Total number of consignment per year is restricted to 12 Nos

"Machine & Plants " can be shifted from one office to another office"

Term Of Insurance :As per the following Clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated and attached hereto

Inland Transit (Rail or Road) A- All Risk

Warranted Vehicle/Wagon is closed or covered with tarpaulin .

Policy Number:

571600212310000061

व्यवसाय स्रोत /Business Source: 571600

विक्रय चैनल

Subject to Open Policy Clause as attached

Private Carriers Warranty

Institute Radio-Active Contamination Exclusion Clause

Computer Millennium Clause(Cargo)

Cargo ISM endorsement

Strike, Riot, civil commotion clause

All Transit/LR values should be declared on monthly basis. Invoice value should be clearly shown in each LR.
Claims, if any, should be reported to NIC immediately. Damage Certificate is compulsory for all claims.
Theft claim should be supported by Police FIR & Final Report.

Financier name/Branch Details: STATE BANK OF INDIA , COMMERCIAL BRANCH, TRIVANDRUM-14

EXCESS RS.1000/- FOR EACH AND EVERY CLAIM

"Machine & Plants " can be shifted from one office to another office"

Maximum consignment per year is restricted to 12 Nos

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएिे जां। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह वाराण्ट अर्न कयिा जा अउर के कसी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिसत हो जाएगी। ***/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the web contract and any word or expression to which the specific meaning has been attached in any part of this policy, or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'***

इंश्योरेन्सइंडयिलमिटिड

Duty:
(₹ 0.50)

TAX INVOICE

Invoice No: 30961C3PE0000061

Invoice Date: 01/08/2023

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services									0	0
TOTAL							000		0		0

₹ (अंकों में) Total Invoice Value (in Rupees) :

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

आवक कंपनी लिमिटेड/ For

Policy Number:

57160021231000062

व्यवसाय स्रोत /Business Source: 571600

वकिरग नैयत /Validity

Whereas the Assured named in the Schedule hereto have represented to (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्र तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST		
कम:जीएसटी_टीडीएस / Less:GST_TDS	प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800230731885728 Dt. 31/07/2023
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि/Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ती तिथि/ Previous Policy Number and Expiry Date	571600212110000228 and Dt.31/01/2023

Open Policy

Limit Per transit	50,00,000.00	Limit per location	50,00,000.00			
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured
India	India	Anywhere in India	Anywhere in India	NA	NA	Owner
Declaration Frequency	2023 by ID: 76216, AID : 76226 Immediately after	Multi transit cover	No	Page no: 1		

पॉलिसी अनुसूची/ Policy Schedule - Marine Cargo Open Policy

Policy Number:

57160021231000062

व्यवसाय स्रोत /Business Source: 571600

Code:

जारीकर्ता

	commencement of Transit		
Mode of Transit	By Road		

Details of Packaging and Commodity		
Commodity	Packaging	Sum Insured
IT ASSETS,LAB EQUIPMENTS & PLANT AND MACHINERY(Incoming IT Assets & Lab Equipments)	NA	INR 50,00,000.00
Storage description		
Description of storage	Period /time (In weeks)	
N/A	N/A	
Term Of Cover	As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto	
Clauses / Special Condition/Warranties	As per Annexure I	
Important notice (claim)	As per attached document	
EXCESS DETAILS		
Sr.No.	Excess Description	Excess Amount
1	EXCESS RS.1000/- FOR EACH AND EVERY CLAIM	1000

Survey and claim settlement			
Survey Agent Details			
Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No	Fax No
India			
Canada,USA,North America,South America and Polynesia up to the east of International Date line.			63 4015
For far East and Australia & Asia			+1 201 963 4015
All other Region except			020 83091266

टिप्पणियां/ **Remarks:** Risk Covered: All Risk Including SRCC

Total number of consignment per year is restricted to 12 Nos

"Machine & Plants " can be shifted from one office to another office"

Term Of Insurance :As per the following Clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated and attached hereto

Inland Transit (Rail or Road) A- All Risk

Warranted Vehicle/Wagon is closed or covered with tarpaulin .

Policy Number:

57160021231000062

Subject to Open Policy Clause as attached

Private Carriers Warranty

Institute Radio-Active Contamination Exclusion Clause

Computer Millennium Clause(Cargo)

Cargo ISM endorsement

Strike, Riot, civil commotion clause

All Transit/LR values should be declared on monthly basis. Invoice value should be clearly shown in each LR.

Claims, if any, should be reported to NIC immediately.

Damage Certificate is compulsory for all claims.

Theft claim should be supported by Police FIR & Final Report.

Financier name/Branch Details: STATE BANK OF INDIA , COMMERCIAL BRANCH, TRIVANDRUM-14

EXCESS RS.1000/- FOR EACH AND EVERY CLAIM

"Machine & Plants " can be shifted from one office to another office"

Maximum consignment per year is restricted to 12nos

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधिकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई

पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लएि यह वशिष्ट अर्थ पॉलिसी या अनुसूची के कसी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है क प्रीमियम चेक के

अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकिता नरिसुत हो जाएगी। **/IN WITNESS WHEREOF, the undersigned being duly authorized**

hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website shall be read together as one contract

and any word or expression to which the specific meaning has been assigned in any policy or of the schedule shall bear the same

meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'

इंश्योरेन्सइंडयिालमिडिड

Stamp

TAX INVOICE

Invoice Serial No: 30961C3PE0000062

Invoice Date: 01/08/2023

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.
Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services										0
TOTAL		0									0

कुल दस्तावेज़ मूल्य (अंकों में) Total Invoice Value (In figures) :

कुल इनवायस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रावर्स चार्ज क अधान टक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

Policy Number:
571600412310000019 व्यवसाय स्रोत /Business Source: 571600

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि / Cover Note Number and Date	लागू नहीं/NA
CGST	प्रस्ताव संख्या और तिथि/ Proposal Number and Date	8800230712796600 Dt. 12/07/2023
SGST/UTGST		
IGST		
कम:जीएसटी टैडीएस / Less:GST_TDS	रसीद संख्या और तिथि/ Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	पछिली पॉलिसी संख्या और समाप्ति तिथि / Previous Policy Number and Expiry Date	लागू नहीं/NA
कुल /Total Amount		

(Rupees in Words: Thousand Seven Hundred Twenty Two Only.)

Joint Policyholder Name: NA
Joint Policyholder Address: NA

Laws: The Policy covers Liability of the **Insured** under the following Law(s) shown as covered, subject to claim being otherwise admissible as per terms, conditions and exclusions of the Policy and subject to **Limit of Indemnity** as stipulated against each Law.

SL.No	Law	Limit of Indemnity	Coverage
1	Employee Compensation Act, 1923 and Subsequent amendments thereof prior to the date of issue of this Policy	Subject otherwise, to the terms, conditions & Exclusions of the Policy, the amount of liability incurred by the Insured.	Yes

SL.No	Industry Type	Description of Work Done by Employees	Number of Employees	Declared Wages/ Contract Value	Place of Employment	Contractors Name, Contractors Address
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Policy Number:
571600412310

1	Industry Type:Indian Rubber Sub Industry Type:waterproof garment makers	Healthcare delivery-Hospital Products and Pharmaceuticals	1694	Declared Wages: 1228596300 Contract Value:0	IN ALL MANUFACTURING PLANTS,BUSINESS DIVISIONS AND SERVICE DIVISIONS OF HLL LIFECARE LIMITED	Contractors Name:NA Contractors Address:NA
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Clauses, Endorsements and Warranties Applicable:

Average Clause

If the monthly wages are lesser than 15000/-, the "Compensation calculation will be based on the actual lesser monthly wages entered and not Rs 15000/-"

टिप्पणियाँ/ **Remarks:** Details of employees as per Annexure 2 of HLL tender HLL/CHO/HR/Insurance/23-24

This Policy shall not cover liability of the Insured:

- a) For Injury caused to Employee by accident directly or indirectly caused by or arising from or in consequence of or attributable to war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, mutiny, insurrection, rebellion, revolution or military or usurped power, nuclear weapons material, ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
- b) Accident occurring at any other place than the Place or Places of Employment specified in the Schedule, unless the Employee was at such other place whilst on duty for the purpose of the Business and on the directions of the Insured or any of its official authorized to exercise control and supervision over the Employee.
- c) For Occupational Diseases contracted by an Employee
- d) For interest and/or penalty imposed on the Insured under any law or otherwise.
- e) Under any Law for medical expenses in connection with treatment of any Injury sustained by an Employee
- f) For persons employed in the Business under a Contractor or Sub-Contractor of the Insured unless specifically covered in the Schedule
- g) For Injury sustained by person whilst in the employ of the Insured otherwise than in the Business and/or who has is not declared for insurance under this Policy.
- h) Assumed by agreement which would not have attached in the absence of such agreement
- i) For any sum which the Insured would have been entitled to recover from any party but for an agreement between the Insured and such party.
- j) For any accident occurring whilst the Employee is under

Policy Number:
571600412310000019

व्यवसाय स्रोत /Business Source: 571600

जारी

the influence of intoxicating liquor or drugs
k) For any incapacity or death of an Employee resulting from his/her deliberate self-Injury or the deliberate aggravation of an accidental Injury.

Special Exclusions

- 1, Interest or penalty imposed under any law or otherwise
2. The indemnity offered in the policy does not include interest and /or penalty that may be imposed by the commissioner.

Subject To Clause :-

As per employees compensation insurance cover as per WC act and subsequent amendments.

Special Conditions

Warranted that all employees are covered and correct wages declared any subsequent changes to be advised, muster roll & wage records maintained and the same to be produced for verification on request

Jurisdiction-only in INDIA

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखति कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाए। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्ति जिसके लएि यह वाशाष्ट अर्थ पालासा या अनुसूचा के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिसुत हो जाएगी। ***/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 04/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website shall be read together as one contract and any word or expression to which the specific meaning has been assigned in the policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'***

इंश्योरेन्सइंडियलमिडिड

स्टांप इयूजमिडिड
Stamp

कृते नेशनल इनश्योरेन्स कंपनी

TAX INVOICE

Invoice Serial No: 30961W3PE000019

Invoice Date: 04/08/2023

CARE LIMITED (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, Address : POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA City : THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Place Of Supply State : Kerala State Code : 32 GSTIN No : 32AAACH5598K7Z4	
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सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total (₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non-life insurance services (excluding reinsurance services)										
TOTAL											

Total Invoice value (in figures) :

कुल बिलबैलम मूल्य (शब्दों में) Total Invoice Value (In words) : रुपये

कवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

Policy Number: 57160C

Business Source: 57160C

ग्राहक का नाम /Customer Name: HLL Lifecare Limited	Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तिथि/ Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST		
IGST		
कम:जीएसटी_टीडीएस / Less:GST_TDS	प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800230711790199 Dt. 11/07/2023
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	रसीद संख्या और तिथि/Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	पछिली पॉलिसी संख्या और समाप्ती तिथि/ Previous Policy Number and Expiry Date	लागू नहीं/NA
(Rupee		

LocationAddress:

1)HLL Bhavan - Corporate Head Office,Poojappura - PO,OFFICE/LAB EQUIPMENTS IN KFB,KFC,IFC,RND AND AFT,Thiruvananthapuram,Thiruvananthapuram,Kerala,695019.

SL. No	Coverage	Coverage Description	Sum Insured
1	Section I Basic Cover	OFFICE/LAB EQUIPMENTS IN KFB,KFC,IFC,RND AND AFT	14,04,00,263.00
	अधिक/Excess: 5 % of the claim amount subject to a minimum of Rs 2500/-.		
	Additional Information: LIST OF EQUIPMENTS AS PER HLL TENDER HLL/CHO/HR/Insurance/23-24 RND UNITS OF HLL LIFECARE LIMITED Rs 92,828,856/- Kanagala Factory, Belgaum(KFB) Rs 7,911,366/- Kakkanad Factory, Cochin(KFC)) Rs 19,370,861/- Irapuram Factory, Cochin (IFC) Rs 4,565,391/- Akkulam Factory, Trivandrum (AFT) Rs 15,723,819/-		

Clauses	As per Annexure I
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Standard Excess

Equipment's	a) For equipment's with values upto Rs.1 lakh i) Equipment's (other than Winchester Drive/ Hard Disk drive - 5 % of the claim amount subject to a
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पॉलिसी अनुसूची/ Policy Schedule - Electronic Equipment Insurance

Policy Number: 57160044231000019

व्यवसाय स्रोत / Business Source: &

तद्विषय

Customer

M/

२०१९/

@nic.co.in

इंश्योरेन्सइंडियालिमिटेड

Signature

TAX INVOICE

Invoice Serial No: 30961E3PE0000019

Invoice Date: 31/07/2023

S
G

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess	
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)	
997139	Other non- life insurance services (excluding reinsuranc e services)											0
TOTAL												0

कल इन्वॉयस मूल्य (अंकों में) Total Invoice Value (in figures) :

(शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

3/ For

पॉलिसी अनुसूची/ Policy Schedule - Electronic Equipment Insurance	
Policy Number: 57160044231000020	व्यवसाय स्रोत / Business Source: 571600
	व्यवसाय स्रोत / Business Source: 571600

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024		
प्रीमियम/ Premium	कवर नोट संख्या और तथि/ Cover Note Number and Date	लागू नहीं/NA
CGST		
SGST/UTGST	प्रस्ताव संख्या और तथि/Proposal Number and Date	8800230711791734 Dt. 11/07/2023
IGST		
कम:जीएसटी_टीडीएस / Less:GST_TDS	रसीद संख्या और तथि/Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	पछिली पॉलिसी संख्या और समाप्ती तथि/ Previous Policy Number and Expiry Date	लागू नहीं/NA
कुल /Total Amount		
(Rupees Nineteen Thousand Seven Hundred Eighty Eight Only.)		

LocationAddress:

1)HLL Bhavan - Corporate Head Office,Poojappura - PO,OFFICE/LAB EQUIPMENTS IN KFB,KFC,IFC,RND AND AFT,Thiruvananthapuram,Thiruvananthapuram,Kerala,695019.

SL. No	Coverage	Coverage Description	Sum Insured
1	Section I Basic Cover	OFFICE EQUIPMENTS DESKTOP COMPUTERS WITH ACCESSORIES,LASER JET PRINTERS, UPS ETC. OF VARIOUS UNITS OF HLL LIFECARE	24,84,49,292.00
	अधिक/Excess: 5 % of the claim amount subject to a minimum of Rs 2500/-.		
	Additional Information: LIST OF EQUIPMENTS AS PER HLL TENDER HLL/CHO/HR/Insurance/23-24		

Clauses	As per Annexure I
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Standard Excess

Equipment's	a) For equipment's with values upto Rs.1 lakh i) Equipment's (other than Winchester Drive/ Hard Disk drive - 5 % of the claim amount subject to a
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Policy Number: 571600442310000020 व्यवसाय स्रोत / Business Source: 571600

	<p>minimum of Rs.1, 000/-</p> <p>ii) <u>Winchester Drive/ Hard Disk drive</u> - 10 % of the claim amount subject to minimum of Rs. 2, 500/-</p> <p>iii) <u>Personal Computer</u> - 5 % of the claim amount subject to a minimum of Rs.2,500/-</p>
	<p>b) For equipment's with values more than Rs.1 lakh</p> <p>i) <u>Equipment's (other than Winchester Drive/ Hard Disk drive)</u> - 5 % of the claim amount subject to a minimum of Rs. 2,500/-</p> <p>ii) <u>Winchester Drive/ Hard Disk drive</u> - 25 % of the claim amount subject to minimum of Rs. 10,000/-</p>
External Data Media	<p>a) For equipment's with values upto Rs.1 lakh –</p> <p>5% of the claim amount subject to a minimum of Rs.1, 000/-</p> <p>b) For equipment's with values more than Rs.1 lakh-</p> <p>5 % of the claim amount subject to a minimum of Rs.2, 500/-</p>
VSAT	<p>Excess for AOG perils: 10% of claim amount subject to a minimum of Rs.10,000/-</p> <p>Excess for other losses: As applicable for other equipment's.</p>

For increased cost of working time excess, plz refer erstwhile EEI tariff.

NOTE: If any other deductible is imposed/mentioned elsewhere in this policy, then that deductible shall supersede the deductible mentioned above.

Terrorism excess (if opted) shall be as per GIC Terrorism Pool.

टिप्पणियाँ/ Remarks: GENERAL EXCLUSIONS

The Company will not indemnify the Insured in respect of loss, damage or liability directly caused by or arising out of or aggravated by -

- War, Invasion, Act of foreign Enemy, Hostilities or War Like operations (whether war be declared or not), Civil War, Rebellion Revolution, Insurrection Mutiny, Civil Commotion, Confiscation, Commandeering a Group of Malicious persons or persons acting on behalf of or in connection with any political organisation, requisition or destruction or damage by order of any government de-jure or defacto or any public, municipal or local authority.
- Nuclear Reaction, Nuclear radiation or radioactive contamination.
- Willful act or willful negligence of the Insured or his representative.;
- Cessation of work whether total or partial.
- Cost Incurred/time involved in the movement of machinery and/or any other property and/or personnel outside the territorial limits of India other than the cost of delivery of replacements for machinery lost or damaged.
- Derangement of the Insured property not accompanied by damage otherwise covered by this policy.
- Loss of or damage to the property covered under this policy falling under the terms of the Maintenance Agreement.
- Loss destruction or damage directly occasioned by pressure wave caused by aircraft and other aerial devices traveling at Sonic or Supersonic speeds.

In any action, suit or other proceedings where the company allege that by reason of the provisions of the above exclusions any loss, destruction, damage or liability is not covered by this insurance, the burden of proving that such loss, destruction,damage or liability is covered shall be upon the Insured.

Sum insured bifurcation as below

AFT Rs 8,398,296/-
 CHO Rs 73,370,061/-
 CMO Rs 6,757,297/-
 HCS Rs 50,405,528/-
 HMA Rs 1,217,214/-
 HITES North Rs 4,812,084/-
 HITES South Rs 6,260,024/-
 LO (NOIDA) Rs 1,129,754/-
 ID Noida Rs 3,141,343/-
 IDD South Rs 497,766/-
 PCD Noida Rs 3,936,022/-
 IFC Rs 2,013,337/-
 KFB Rs 15,677,714/-
 KFC Rs 3,960,211/-
 MFG Rs 1,284,812/-

पॉलिसी अनुसूची/ Policy Schedule - Electronic Equipment Insurance

Policy Number: 57160044231000020

व्यवसाय स्रोत / Business Source: 571600

PFT Rs 16,321,207/-
RBD Rs 43,777,113/-
FMD Rs 866,205/-
RND Rs 4,623,295/-

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियकृत जिसके लोए यह वशिषिट अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आशवासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृत के मामले में, यह दस्तावेज स्वतः प्राथमकतिा नरिसुत हो जाएगी। ***IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 31/July/2023*** and policy, the clauses, the endorsements and policy wordings as available in the websit shall be read together as one contract and any word or expression to which the specific meaning has been ascribed in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that **IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेन्सइंडियालिमिटेड

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पॉलिसी अनुसूची/ Policy Schedule - Machinery Insurance

Policy Number: 57160044231000021

व्यवसाय स्रोत / Business Source: 571600

Contact

email:customer.support@nic.co.in

ग्राहक का नाम/Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी/ Customer ID: 9702288542	पैन/ PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन/ Phone:	ई-मेल/ E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्र तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024			
प्रीमियम /Premium	कवर नोट संख्या तथा तिथि/Cover Note Number and Date	NA	
CGST			
SGST/UTGST			
IGST			
कम:जीएसटी टैडीएस / Less:GST_TDS	प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800230713799948 Dt. 13/07/2023	
पुनर्प्राप्त स्टाम्प शुल्क / Recoverable Stamp Duty	रसीद संख्या और तिथि/ Receipt Number and Date	571600812310005146 Dt. 30/06/2023	
कुल / Total	पछिली पॉलिसी संख्या तथा समाप्ति तिथि/Previous Policy Number and Expiry Date	571600441810000083 and Dt.31/01/2020 571600441710000023 and Dt.31/01/2019 5716004416520000179 and Dt.31/01/2018 571600441910000057 and Dt.31/01/2021 571600442010000050 and Dt.31/01/2022 571600442110000048 and Dt.31/01/2023	

(R)

Inventory of the Property insured

Location : HLL Lifecare Limited (A Government of India Enterprise)HLL Bhavan - Corporate Head Office,Poojappura - PO | Thiruvananthapuram,Thiruvananthapuram,Thiruvananthapuram,Kerala,695012

Sr. No.	Description	Make	Part No.	Specification	Value of foundation	Value of oil	Sum Insured
1	Electric Motors, Motor Generators and Welding Sets of capacity - Upto 50HP (37.5 KW)	MACHINERY KEPT AT Irapuram Factory, Cochin (IFC) UNIT AS PER LIST ATTACHED	AS PER ATTACHMENT	11	0	0	13,35,99,577.00
2	Electric Motors, Motor Generators and Welding Sets of capacity - Above 50 HP - DG Sets with capacity above 5 MW	MACHINERY KEPT AT Akkulam Factory, Trivandrum (AFT) UNIT AS PER LIST ATTACHED	AS PER ATTACHMENT	11	0	0	41,70,51,570.00

Policy Number: 57160044231000021

व्यवसाय स्रोत / Business Source: 5716

विकिरण चैनल नम्बर

Sr.No.	Description	Location	Unit	Value	Sum Insured	Excess	Total
3	Electric Motors, Motor Generators and Welding Sets of capacity - Above 50 HP - DG Sets with capacity above 5 MW	MACHINERY KEPT AT Peroorkada Factory, Trivandrum (PFT) UNIT AS PER LIST ATTACHED	AS PER ATTACHMENT	11	0	0	8,18,40,580.00
4	Electric Motors, Motor Generators and Welding Sets of capacity - Above 50 HP - DG Sets with capacity above 5 MW	MACHINERY KEPT AT Kanagala Factory, Belgaum(KFB) UNIT AS PER LIST ATTACHED	AS PER ATTACHMENT	11	0	0	6,60,43,750.00
5	Electric Motors, Motor Generators and Welding Sets of capacity - Above 50 HP - DG Sets with capacity above 5 MW	MACHINERY AT Kakkanad Factory, Cochin(KFC) UNIT AS PER LIST ATTACHED	AS PER ATTACHMENT	11	0	0	6,48,19,531.00

Warranted that the machinery described in above schedule of Machinery does not embrace any foundations masonry and brickwork or Oil in transformers and other electrical equipment damage thereto being covered by the Policy only when specifically described in the said schedule.

Clauses	As per Annexure I
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**Excess Details
Standard Excess**

Excess applicable for Glass Lined Vessels, Glass & Graphite equipment's - Excess shall be 10 % of Sum Insured subject to minimum of INR 2500

Excess applicable for Furnace Transformers - Excess shall be 2% of Sum Insured subject to minimum of INR 2500

Excess applicable for Photo Copiers - Excess shall be 5% of Sum Insured subject to minimum of INR 2500

Excess applicable for machines other than above - 1% of sum insured for each machine subject to a minimum of Rs 2,500

Note 1: Sum Insured of the machine should be declared as a whole and should not be apportioned towards parts of machine.

Note 2: If any other deductible is imposed/mentioned elsewhere in this policy, then that deductible shall supersede the deductible mentioned above.

FINANCIER DETAILS		
Sr.No.	Name of Financier	Financier Address
1	State Bank Of India	COMMERCIAL BRANCH, Trivandrum-14
2	HDFC Bank Ltd	TRIVANDRUM
3	Canara Bank	TRIVANDRUM

TAX INVOICE

Invoice Serial No: 30961E3PE0000021

Invoice Date: 01/08/2023

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997137	Other property insurance services	0							0%	0	0
TOTAL										0	0

Total Invoice Value (In words) : रूप/Rupees

केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

For

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पॉलिसी अनुसूची/ Policy Schedule - Boiler & Pressure Plant Insurance

Policy Number: 57160044231000022

व्यवसाय स्रोत / Business Source: 571600

विक्रय चैनल -

नाम से

भारत
के

MOBILE NUMBER: 0

ग्राहक का नाम/Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी/ Customer ID: 9702288542	पैन/ PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन/ Phone:	ई-मेल/ E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024		
प्रीमियम /Premium	कवर नोट संख्या तथा तिथि/Cover Note Number and Date	NA
CGST		
SGST/UTGST	प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800230713801156 Dt. 13/07/2023
IGST		
कम:जीएसटी टैडीएस / Less:GST_TDS	रसीद संख्या और तिथि/ Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्त स्टाम्प शुल्क / Recoverable Stamp Duty		
कुल / Total	पछिली पॉलिसी संख्या तथा समाप्ति तिथि/Previous Policy Number and Expiry Date	571600441810000082 and Dt.31/01/2020 571600441710000022 and Dt.31/01/2019 5716004416510000181 and Dt.31/01/2018 571600441910000052 and Dt.31/01/2021 571600442010000053 and Dt.31/01/2022 571600442110000044 and Dt.31/01/2023

Inventory of the Property Insured

Location : HLL Lifecare Limited (A Government of India Enterprise)Boiler & Pressure Plants in Kanagala Factory, Belgaum,Perorkada Factory, Trivandrum and Akkulam Factory, Trivandrum,Thiruvananthapuram,Thiruvananthapuram,Kerala,695012

Sr. No.	Maker's Name	Maker's No.	Capacity	Registrati on No	Qty/Working Pressure	Year of Make	Sum Insured	Standby Boiler
1	COMPRESSO R AIR RECIPROCAT ING 550-60	NA	.	3009906	.	2014	61,67,336.00	No
2	AIR COMPRESSO R WITH SS TABLE	NA	.	3003862	.	2003	3,16,199.00	No
3	THERMAX RF-30 BOILER	NA	.	3000565	.	1987	32,00,000.00	No
4	NESTLER BOILER 4 TON	NA	.	3000564	.	1991	36,00,000.00	No
5	BOILER HOUSE	NA	.	2100212	.	1981	11,06,360.00	No
6	BOILER HOUSE	NA	.	2100213	.	1981	69,599.00	No

Policy Number: 57160044231000022

व्यवसाय स्रोत / Business Source: 57160044231000022

चैनल वरिष्ठा

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7	BOILER STACK PLATFORM	NA	.	3005878	.	1981	59,557.00	No
8	KESSEL BOILER	NA	.	3005888	.	1981	18,66,212.00	No
9	2 TON BOILER	NA	.	3004169	.	2008	22,70,744.00	No
10	10TPH BOILER WITH ALL	NA	.	3004504	.	2009	86,38,453.00	No
11	SCREW TYPE CHILLER	NA	145 TR	3004165	.	2008	31,76,338.00	No
12	3 TON PORTABLE CHILLER	NA	3 TR	3004164	.	2008	2,15,030.00	No
13	2 TON/HR PACKAGED BOILER	NA	2TON/HR	3011413	8KG/CM2	2016	29,37,025.00	No
14	AIR COMPRESSOR	NA	6 HP/322CFM	3004202	8KG/CM2	2009	8,00,225.00	No
15	145 T SCREW CHILLER	NA	145TR	3004430	.	2011	32,95,252.00	No
16	CHILLER PACKAGE TYPE	NA	3 TR	3010134	.	2014	1,79,790.00	No
17	VFD PANEL FOR CHILLER	NA	.	3011534	.	2017	2,40,450.00	No
18	VFD PANEL FOR CHILLER	NA	.	3011535	.	2017	2,40,450.00	No
19	BOILER 6TPH	NA	.	NOT MENTIONED	.	2022	1,37,61,752.00	No

The term 'Boiler' where used in the above schedule includes fittings,integral super heaters and integral economizers butdoes not include steam or feed water piping,separate super heaters, separate economizers, such items being covered bythe policy only if specifically listed in the Schedule.

Standard Excess

5% of claim amount subject to a minimum of Rs 10,000/-.

All the extensions of BPP policy will have similar excess as per the basic policy.

NOTE: If any other deductible is imposed/mentioned elsewhere in this policy, then that deductible shall supersede the deductible mentioned above.

Clauses	As per Annexure I
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टिप्पणियां/ **Remarks:** It is hereby warranted that during the currency of the Policy;

i) The Boiler and Pressure Plants described in the Schedule are annually inspected by Inspectors appointed by the appropriate Government except where there is no statutory requirement for Government Inspection; the inspections are to be carried out by an independent competent person;

ii) The Boilers and Pressure Plant described in the Schedule shall only be operated by Attendants holding a valid certificate of competency issued under the appropriate Boiler Act;

iii) The Insured shall be in possession of the unqualified permission in writing of the competent Inspecting Authority to operate the said Boilers and Pressure Plants.

If the maximum pressure or load upon safety valve immediately prior to any explosion or collapse was in excess of that stipulated by the

Policy Number: 57160044231000022

व्यवसाय स्रोत / Business Source: 5716

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said Authority the Insured shall not be entitled to any compensation or indemnity under t ... respect of such explosion or collapse.

THE COMPANY SHALL NOT BE LIABLE UNDER THIS POLICY IN RESPECT OF

1. Loss damage and/or liability caused by or arising from or in consequences, directly or indirectly of Fire (arising from explosion or collapse or any other cause whatsoever) including extinguishment of a fire or clearance of debris and dismantling necessitated thereby, smoke, soot, aggressive substance lightning, theft, collapse of buildings, subsidence, landslide, rockslide, water which escapes from water containing apparatus, flood, inundation, storm, tempest, earthquake, volcanic eruption or other Acts of God, impact of land borne, waterborne, or airborne craft or other aerial devices and/or articles dropped there from.
2. a) War Invasion, Act of Foreign Enemy, Hostilities or War like operations (whether war be declared or not), Civil War, Rebellion, Revolution, Insurrection, Mutiny, Riot, Strike, Lock out and Malicious Damage, Civil Commotion, Military or Usurped power, Martial law, Conspiracy, Confiscation, Commandeering a group of Malicious Person or persons acting on behalf of or in connection with any Political Organisation. Requisition or Destruction or damage by order of any Government de jure or de facto or by any Public, Municipal or Local Authority.
b) Nuclear reaction, nuclear radiation or radioactive contamination.
3. Accident loss damage and/or liability resulting from overload experiments or tests requiring the imposition of abnormal conditions.
4. Gradually developing flows, defects, cracks or partial fractures in any part not necessitating immediate stoppage although at some future time repair or renewal of the parts affected may be necessary.
5. Defects due to the wearing away or the wasting of the materials of a Boiler or a Pressure Plant whether by leakage, corrosion or by the action of the fuel or otherwise the grooving or the fracturing of any of the parts of a Boiler or Pressure Plant or for deterioration generally or for the development of cracks blisters, lamination and other flaws or fractures, failures of joint within the range of steam or feed pipes, or for bulging and deformation due to overheating of tubes (unless such defects, fracture, failure or bulging result in explosion or collapse) or for the cracking of section of cast-iron heating boilers or other vessels constructed of cast iron.
6. The failure of individual tubes in Boilers of the water tube locomotive or other multitubular types, in Super heaters or in Economizers (unless such defects result in explosion or collapse).
7. Loss or damage to the insured plant or property and/or liability arising during and occasioned by the application of steam hydraulic or any other test of this plant as specified by Inspecting Authority or otherwise.
8. Loss or damage and/or liability caused by or arising out of the wilful act or wilful neglect or gross negligence of the Insured or his responsible representatives.

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबर पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्तजिसिके लएि यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिस्त हो जाएगी। ***IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this*** ***attached policy, the clauses, the endorsements and policy wordings as available in the website*** ***be read together as one contract and any word or expression to which the specific meaning has been attached in the schedule shall bear the same meaning wherever it may appear. It is warranted that*** ***IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'***

पॉलिसी अनुसूची/ Policy Schedule - Boiler & Pressure Plant Insurance

Policy Number: 57160044231000022

व्यवसाय स्रोत / Business Source: 571600

इंश्योरेंसइंडियालिमिटेड

Signatory

TAX INVOICE

Invoice Serial No: 30961E3PE0000022

Invoice Date: 01/08/2023

PAI APNATTA

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total (₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997137	Other property insurance services						9%	9	0%	0	0

TOTAL

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

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पॉलिसी अनुसूची/ Policy Schedule - Special Contingency Excluding Liability

Policy Number: 571600592310000197

व्यवसाय स्रोत / Business Source: 571600

विक्रय चैनल

ग्राहक का नाम/Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी/ Customer ID: 9702288542	पैन/ PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन/ Phone:	ई-मेल/ E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024			
प्रीमियम /Premium		कवर नोट संख्या तथा तिथि/Cover Note Number and Date	NA
CGST		प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800230713802183 Dt. 13/07/2023
SGST/UTGST			
IGST			
कम:जीएसटी टैडीएस / Less:GST_TDS	₹		
पुनर्प्राप्त स्टाम्प शुल्क / Recoverable Stamp Duty	00	रसीद संख्या और तिथि/ Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल / Total		पछिली पॉलिसी संख्या तथा समाप्ती तिथि/ Previous Policy Number and Expiry Date	571600592010000917 and Dt.31/01/2022 571600591910001010 and Dt.31/01/2021 571600591810001106 and Dt.31/01/2020 571600591710000152 and Dt.31/01/2019 5716004616950000561 and Dt.31/01/2018 571600592110000733 and Dt.31/01/2023

Type of SCP:	Mobile electronic equipments
Subtype of SCP:	Electronic Items

Location Covered:

Location Address : HLL Lifecare Limited (A Government of India Enterprise),HLL Bhavan - Corporate Head Office,Poojappura - PO,,India,695001,CMO,KFB,PFT,KFC,IFC,MFG,CHO,RND,HCS,RBD and AFT of HLL Lifecare Limited

SL No	Perils Covered	Property/Event Covered	Sum Insured / Limit of Indemnity	Excess
9	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF Peroorkada Factory, Trivandrum (PFT)UNIT OF THE INSURED AS PER LIST ATTACHED	9,99,981.00	0.00
10	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL	LAPTOPS,IPADS AND TABS OF RND UNIT OF THE INSURED AS PER LIST ATTACHED	4,32,974.00	0.00

पॉलिसी अनुसूची/ Policy Schedule - Special Contingency Excluding Liability

Policy Number: 571600592310000197 व्यवसाय स्रोत / Business Source: 571600

विक्रय चैनल वविरण/

जारीकरण

Annexure IV

	DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN			
1	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF Akkulam Factory, Trivandrum (AFT) UNIT OF THE INSURED AS PER LIST ATTACHED	15,00,943.00	0.00
2	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF CHO UNIT OF THE INSURED AS PER LIST ATTACHED	69,79,504.00	0.00
3	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF CMO UNIT OF THE INSURED AS PER LIST ATTACHED	64,12,525.00	0.00
4	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF Retail business division and healthcare services division (HCS) UNIT OF THE INSURED AS PER LIST ATTACHED	23,69,427.00	0.00
5	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF Irapuram Factory, Cochin (IFC) UNIT OF THE INSURED AS PER LIST ATTACHED	41,000.00	0.00
6	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF Kanagala Factory, Belgaum(KFB) UNIT OF THE INSURED AS PER LIST ATTACHED	3,77,467.00	0.00
7	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF Kakkanad Factory, Cochin(KFC) UNIT OF THE INSURED AS PER LIST ATTACHED	4,09,737.00	0.00
8	FIRE & ALLIED PERILS(incl. EQ & STFI),BURGLARY,THEFT, HOUSE BREAKING,ROBBERY, ACCIDENTAL DAMAGE,TRANSIT,ELECTRICAL AND MECHANICAL BREAKDOWN	LAPTOPS,IPADS AND TABS OF Manesar Factory, Gurgaon(MFG) UNIT OF THE INSURED AS PER LIST ATTACHED	1,09,036.00	0.00

Item	Sum Insured / Limit	Applicable Excess	Premium
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Clauses	As per Annexure I
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पॉलिसी अनुसूची/ Policy Schedule - Special Contingency Excluding Liability

कार्यालय

Special Exclusions	as per Special Contingency Policy(Portable Electronic Equipment) Policy
Special Conditions	as per Special Contingency Policy(Portable Electronic Equipment) Policy
Applicable Warranties	as per Special Contingency Policy(Portable Electronic Equipment) Policy

टिप्पणियां/ **Remarks:** EXCESS:

5% claim amount subject to minimum of Rs.2500/- for each and every claim.

BASIS OF INDEMINITY:

Partial loss - cost of repair or replacement of parts

Total loss - market value or insured value whichever is less

EXCLUSION:

1. Inherent defects, gradual deterioration, wear and tear
2. Derangement caused by equipment itself
3. Scratching, abrasion, change in colour, texture or finish
4. Loss whilst the equipment is left unattended in a vehicle unless the equipment is in a locked boot of a saloon car
5. Larceny
6. Loss of information or data from the insured equipment
7. Sonic boom
8. Terrorism risk

CONDITIONS:

1. The insured shall cause the owner / user to take all ordinary and reasonable precaution for the safety of the laptop / computer /note book / mobile phone.
2. For loss of the laptop /computer/note book / mobile phone .FIR should be lodged and Police Report is to be submitted in support of the claim.

Special Exclusion

- 1) Loss or damage due to gradual wear & tear, deterioration.
- 2) Loss or damage during cleaning, renovation.
- 3) Loss/damage due to mechanical derangement.
- 4) Loss/ damage arising from delay, detention or confiscation by customs or other officials
- 5) Consequential loss
- 6) Damage due to cleaning, bleaching, renovation etc arising from wear and tear, moth, vermin, insects or any other gradually operating cause.
- 7) Over winding, denting, internal damages to watches, clocks
- 8) Fire & Allied perils, War & Allied Perils & Nuclear risks, terrorism
- 9) Damage/loss due to breakage or scratching of crockery, china glass, marble, earthenware, sculpture, curios, pictures, musical instruments, sports, gear and articles of a brittle or fragile nature
- 10) Loss during unattended condition
- 11) Loss due to improper handling
- 12) Claims arising out of or related to "Covid-19/Communicable disease" or violation of any provision of NDMA/Epidemic Act
- 13) Any other peril not which is not specifically covered under the policy

पॉलिसी अनुसूची/ Policy Schedule - Special Contingency Excluding Liability

Policy Number: 571600592310000197

वावरण/

जिसकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकित ऋग्गि --- " नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठान्कन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्ति जिसके लिए यह वशिष्ट अर्थ पालासी या अनुसूची के कसी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है कि प्रीमयिम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकितता नरिस्त हो जाएगी। **IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website shall be read together as one contract and any word or expression to which the specific meaning has. Any part of the policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

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इंश्योरेन्सइंडियालिमिटेड

TAX INVOICE

Invoice Serial No: 30961O3PE0000197

Invoice Date: 01/08/2023

GSTIN NO : 32

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.

Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non- life insurance services (excluding reinsuranc e services)										0
TOTAL											0

कल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :

कल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

कंपनी/Company:

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

लिमिटेड/ For
Limited

पॉलिसी अनुसूची/ Policy Schedule - Burglary Insurance

Policy Number: 571600592310000198

व्यवसाय स्रोत / Business Source: 571600

ग्राहक का नाम/Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी/ Customer ID: 9702288542	पैन/ PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन/ Phone: ई-मेल/ E-Mail: thomaspa@lifecarehll.com	

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम /Premium	कवर नोट संख्या तथा तिथि/Cover Note Number and Date	NA
CGST		
SGST/UTGST		
IGST		
कम:जीएसटी_टीडीएस / Less:GST_TDS	स्ताव संख्या और तिथि/Proposal Number and Date	8800230713802609 Dt. 13/07/2023
पुनर्प्राप्त स्टाम्प शुल्क / Recoverable Stamp Duty	रसीद संख्या और तिथि/ Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल / Total	पछिली पॉलिसी संख्या तथा समाप्ती तिथि/ Previous Policy Number and Expiry Date	57160046157500000534 and Dt. 57160046167500000564 and Dt.31/01/2018 571600591710000149 and Dt.31/01/2019 571600591810001073 and Dt.31/01/2020 571600591910000963 and Dt.31/01/2021 571600592010000896 and Dt.31/01/2022 571600592110000730 and Dt.31/01/2023

Nature of trade/Business :	Healthcare delivery Business	
Location address :	HLL Lifecare Limited (A Government of India Enterprise) , HLL Bhavan - Corporate Head Office,Poojappura - PO , Thiruvananthapuram , Thiruvananthapuram , Kerala , 695012.	
Premises :	Others	
Risk is Unoccupied/Locked :	No	
Theft Covered :	No	
Additional cover :	N/A	Excess for theft cover : N/A
Policy Excess :	5% claim amount, minimum 10000/-	
Security features :	N/A	

**(The premises shall not include any yard, garden, open space or other building not communicated to the main building)

Details for First Loss basis

Percentage of first loss limit :	20% of the total value at risk
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Details of contents

SI No	Material covered	Description of Items	Sum insured ₹
1	Stocks In Trade	STOCK OF RAW MATERIALS,PACKING MATERIALS	50,00,000.00

Policy Number: 571600592310000198

व्यवसाय स्रोत / Business Source: 571600

विक्रय चैनल तस्मिन्

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		GENERAL STORESS, CONSUMABLES ETC. AT MFG UNIT AS PER LIST ATTACHED	
2	Stocks In Trade	STOCK RAW MATERIALS,PACKING MATERIALS AT AFT UNIT AS PER LIST ATTACHED	27,81,01,818.00
3	Stocks In Trade	FINISHED GOOS LATEX OTHER RAW MATERIALS, CHEMICALS , PKG MATERIAL, SEMI FINISHED GOODS, GENERAL STORES ETC AT PFT AS PER LIST ATTACHED	53,71,43,818.00
4	Stocks In Trade	STOCK OF RAW MATERIALS, PACKING MATERIALS ETC AT IFC UNIT AS PER LIST ATTACHED	3,02,59,800.00
5	Stocks In Trade	STOCK OF RAW MATERIALS,PACKING MATERIALS,FINISHED GOODS ETC AT KFB UNIT AS PER LIST ATTACHED	25,90,39,721.00
6	Stocks In Trade	STOCK OF SPARE PARTS, RAWMATERIALS PACKING MATERIALS ETC AT KFC UNIT AS PER LIST ATTACHED	12,13,05,626.00

Insured Details:

Nature of trade/Business :	Healthcare delivery Business		
Location address :	HLL Lifecare Limited (A Government of India Enterprise) , HLL Bhavan - Corporate Head Office,Poojappura - PO , Thiruvananthapuram , Thiruvananthapuram , Kerala , 695012.		
Premises :	Others		
Risk is Unoccupied/Locked :	No		
Theft Covered :	No		
Additional cover :	N/A	Excess for theft cover :	N/A
Policy Excess :	5% claim amount, minimum 10000/-		
Security features :	N/A		

** (The premises shall not include any yard, garden, open space or other building not communicated to the main building)

Details for First Loss basis

Percentage of first loss limit :	40% of the total value at risk
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Details of contents

SI No	Material covered	Description of Items	Sum insured ₹
1	Stocks In Trade	STOCK OF FINISHED GOODS & TRADED PRODUCTS AT C & FA UNIT AS PER LIST ATTACHED	24,60,00,000.00
2	Stocks In Trade	STOCK OF FILMS, CONTRAST AND OTHER MEDICAL CONSUMABLES AT HCS UNIT AS PER LIST ATTACHED	21,60,50,000.00
3	Stocks In Trade	STOCK OF STOCK OF IMPLANTS, SURGICAL CONSUMABLES, DRUG, LENS, FRAMES AT RBD UNIT AS PER LIST ATTACHED	1,30,31,28,000.00

FINANCIER DETAILS

Sr. No.	Name of Financier	Financier Address
1	HDFC Bank Ltd	TRIVANDRUM
2	Canara Bank	TRIVANDRUM
3	State Bank Of India	COMMERCIAL BRANCH, Trivandrum-14

टिप्पणियां/ **Remarks:** This Policy shall cease to attach:

1. If the premises shall have been left uninhabited by day and night for seven or more consecutive days and nights while the premises shall

पॉलिसी अनुसूची/ Policy Schedule - Burglary Insurance

Policy Number: 571600592310000198

व्यवसाय स्रोत / Business Source: 571600

विक्रय चैनल विक्रय/

कार्यालय पता,

have been left uninhabited.

2. If the Insured shall cause or suffer any material alteration to be made in the premises or anything to be done whereby the risk is increased; change or relax any of the safeguards for securing the premises.

3. To any property insured which shall be removed from the premises in which it is herein stated to be safe so far as is expressly provided for in the Policy or these conditions.

4. To any property the interest of the Insured which shall pass from the Insured otherwise than by will or operation of law; unless in every case the consent of the Company to the continuance of the insurance thereon is obtained and signified by a memorandum made on the Policy by or on behalf of the Company.

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखति कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाइट पर उपलब्ध है, को एक अनुबंध के रूप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह वाशाष्ट अर्थ पालासा या अनुसूचा के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकता नरिस्त हो जाएगी। **IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the web be read together as one contract and any word or expression to which the specific meaning has been assigned in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेन्सइंडियालिमिटेड

TAX INVOICE

Invoice Serial No: 30961O3PE0000198

Invoice Date: 01/08/2023

Details Of Receiver : HLL LIFECARE LIMITED (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, Address : POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA City : THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012.	
Place Of Supply State :	Kerala
State Code :	32
GSTIN No :	32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non-life insurance services (excluding reinsurance services)										
TOTAL											

कुल इनवॉयस मूल्य (अंकों में) Total Invoice value (In figures) :

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

Policy Number: 571600592310000199

व्यवसाय स्रोत / Business Source: 571600

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024

प्रीमियम/ Premium	कवर नोट संख्या और तथि/ Cover Note Number and Date	लागू नहीं/NA
CGST	प्रस्ताव संख्या और तथि/Proposal Number and Date	8800230714809186 Dt. 14/07/2023
SGST/UTGST		
IGST		
कम:जीएसटी_टीडीएस / Less:GST_TDS	रसीद संख्या और तथि/Receipt Number and Date	571600812310005146 Dt. 30/06/2023
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	गिळी पॉलिसी संख्या और समाप्ती तथि/ Previous Policy Number and Expiry Date	571600591910001080 and Dt.31/01/2021 571600592010000895 and Dt.31/01/2022 571600592110000728 and Dt.31/01/2023
कुल /Total Amount		

Details of the employer

Name of the Employer	Address	Business type
HLL Lifecare Limited (A Government of India Enterprise)	HLL Bhavan - Corporate Head Office, Poojappura PO, Thiruvananthapuram, Thiruvananthapuram, Kerala, 695012	HEALTHCARE PRODUCT MANUFACTURING COMPANY OWNED BY GOVT. OF INDIA

Type of Policy – Fidelity - Collective

Details of the Employees

SL. No	Employee No	Employee Name	Designation Place of Employment	Guaranteed Amount
1	As per List	EMPLOYEES OF Kanagala Factory, Belgaum(KFB),Akkulam Factory, Trivandrum (AFT), Peroorkada Factory, Trivandrum (PFT),Retail business division and healthcare services division (HCS)	Others EMPLOYEES OF Kanagala Factory, Belgaum(KFB),Akkulam Factory, Trivandrum (AFT), Peroorkada Factory, Trivandrum (PFT),Retail business division and healthcare services division (HCS)	₹ 51,17,85,000.00

Policy Number: 571600592310000199

व्यवसाय स्रोत / Business Source: 571600

चैतन्य वकिरण/

No of Persons Covered: 1

टिप्पणियां/ **Remarks:** FIDELITY GUARANTEE COLLECTIVE POLICY COVERING EMPLOYEES (OF HCS, KFB, PFT ,AFT & RBD UNITS) FOR INDIVIDUAL SUM INSURED AS PER LIST

Indemnifies the insured against any direct pecuniary loss sustained by reason of any act of fraud/dishonesty committed by the employee

*on or after the date of commencement of this policy and

* during the employee's uninterrupted service with the insured and

* discovered during the continuance of this policy or within twelve calendar months of the expiration thereof

and

* in the case of death, dismissal or retirement of the employee within twelve calendar months of such death, dismissal or retirement

* whichever of these events shall first happen.

The company shall not be liable in respect of losses arising elsewhere than in India.

The Company is not liable for and no indemnity will be provided in respect of any loss arising out of, caused by, occasioned by, attributable to or howsoever connected to: any consequential losses of any kind, be they by way of loss of profit, any loss not reflected in the Insured's books of account, loss of opportunity, business interruption, market loss, loss of gain or potential income or gain which should have accrued to the Insured (including but not limited to interest and dividends), or otherwise; any legal liability of any kind; any fraudulent or dishonest act of an Employee not discovered within 12 months (subject to condition 4.3.2) of the date upon which such Employee ceased to be an employee of the Insured for any reason; any expenses incurred by the Insured in establishing the existence of or quantification of any fact or matter giving rise to a Claim under this Policy; any fact or matter or circumstance of which the Insured was, or ought reasonably to have been, aware at the commencement of the Policy Period.

The Company is not liable for and no indemnity will be provided in respect of any loss arising in circumstances where: the Insured carries on any business other than the Business, and/or there is any material change in the facts and matters stated in the Insured's proposal, and/or the duties or terms of service of Employees differ from those described in the proposal, and/or the precautions and checks for ensuring the accuracy of the Insured's accounts and stocks are not as described in the Insured's proposal

पॉलिसी अनुसूची/ Policy Schedule - Fidelity Guarantee Insurance

Policy Number: 571600592310000199

व्यवसाय स्रोत / Business Source: 571600

जसिकी गवाही में दिनि/ माह /वर्ष को उपरोक्त उल्लेखित पत्रपालय पत्र पर जपारस्ताक्षरा का वधिवित अधकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाई पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्तजिसिके लांए यह वाशॉट अरथ पालासो या अनुसूचा के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अरथ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आशवासन दयिा जाता है क प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकिता नरिसुत हो जाएगी । **//IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the web** **It be read together as one contract and any word or expression to which the specific meaning is been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

कते चेक - ेनुस कंपनी

इंशयारेनुसइंडयिलमिडिड

संलग्न

(₹ 0.50)

TAX INVOICE

Invoice Serial No: 30961O3PE0000199

Invoice Date: 01/08/2023

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
 HLL BHAVAN - CORPORATE
 HEAD OFFICE,
 Address : POOJAPPURA - PO |
 THIRUVANANTHAPURAM -
 695012,
 KERALA, INDIA
 City : THIRUVANANTHAPURAM,
 District: THIRUVANANTHAPURAM,
 State: KERALA,
 PIN: 695012.

Place Of Supply State : Kerala
 State Code : 32
 GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non- life insurance services (excluding reinsuranc e services)										0
TOTAL											0

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

पॉलिसी अनुसूची/ Policy Schedule - Money Insurance	
Policy Number: 57160059231000200	व्यवसाय स्रोत /Business Source: 571600
	विक्रय नैम्बर - 57

ग्राहक का नाम /Customer Name: HLL LIFECARE LIMITED	ग्राहक आईडी /Customer ID: 9702288542	पैन /PAN: AAACH5598K
पता/ Address: (A GOVERNMENT OF INDIA UNDERTAKING), HLL BHAVAN - CORPORATE HEAD OFFICE, POOJAPPURA - PO THIRUVANANTHAPURAM - 695012, KERALA, INDIA, City: THIRUVANANTHAPURAM, District: THIRUVANANTHAPURAM, State: KERALA, PIN: 695012. Cell: 9895934437	फोन /Phone:	ई-मेल /E-Mail: thomaspa@lifecarehll.com

पॉलिसी: 01/07/2023 के 00:00 से 30/06/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 00:00 hours, on 01/07/2023 to midnight of 30/06/2024			
प्रीमियम/ Premium	₹	कवर नोट संख्या और तिथि/ Cover Note Number and Date	लागू नहीं/NA
CGST			
SGST/UTGST			
IGST		प्रस्ताव संख्या और तिथि/ Proposal Number and Date	8800230717819985 Dt. 17/07/2023
कम: जीएसटी_टीडीएस / Less: GST_TDS			
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty		रसीद संख्या और तिथि/ Receipt Number and Date	571600812310005146 Dt. 30/06/2023
कुल /Total Amount	₹ 00	पछिली पॉलिसी संख्या और समाप्ती तिथि/ Previous Policy Number and Expiry Date	57160048167600008670 and Dt.31/01/2018 571600591710000153 and Dt.31/01/2019 571600591810001083 and Dt.31/01/2020 571600591910000965 and Dt.31/01/2021 571600592010000898 and Dt.31/01/2022 57160048157600008284 and Dt. 571600592110000732 and Dt.31/01/2023

Money in Transit			
Section I	Description	Limit of liability for Any one Loss(₹)	Estimated Annual Carrying Amount(₹)
Sec I - B (Money in Transit)	Money in the personal custody of the Insured or an Authorised Employee	50,000.00	2,46,94,000.00
Sec I - A (Wages in Transit)	Money for the payment of wages,salaries and other earnings or for petty cash by the Insured or an Authorised Employee	3,00,000.00	7,64,97,000.00

Money in Safe / Counter			
Section II	Description	Identification Number	Sum Insured(₹)
Safe Details	AT VARIOUS UNITS OF THE INSURED AS PER LIST ATTACHED	N/A	76,65,000.00

प्रमाण-पत्र /Certificate- Money Insurance

पॉलिसी संख्या/**Policy Number:**
571600592310000200

व्यवसाय स्रोत /**Business Source:** 571600

विक्रय चैनल /**Sales Channel**

VARIOUS

Additional Covers

Assault Risks (No. of person)	NA	Riot and Strike Extension	No
Assault Risk Sum insured per person(₹)	NA	Terrorism	No
		Infidelity risk	No

Note:

Section IA: Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insured's premises from the time the cash is received at the bank by the Insured or the authorized employee/s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such Cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the Insured to provide for such cash are covered in transit from the Premises to the Bank

Section IB: Money (other than described in IA above) in the personal custody of the Insured or the authorized employee/s of the Insured whilst in direct transit between the premises and the bank or post office and vice versa

Section II: Cash (other than described in section IA above) whilst on the premises during business hours or whilst secured in locked safe or locked strong room on the Insured's premises out of business hours against the risk of burglary, housebreaking and hold-up

टिप्पणियां/ **Remarks:** Sum insured bifurcation

CMO-Rs 40000/- ,KFB-Rs 100000/-,PFT-Rs 70000/-,HCS-Rs 14095000/-, RBD-Rs 94496000/- and MFT-Rs 25000/-

Per transit limit : - Rs.3 lakhs/-

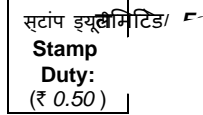
Save as expressly stated to the contrary, no indemnity is available under this Policy for any Claim arising out of, based upon or howsoever connected to the following:

- Any consequential losses of any kind, be they by way of loss of profit, business interruption, market loss or otherwise and any other legal liability of any kind.
- Loss of Money carried by anyone other than the Insured or an Authorised Employee.
- Loss of Money where the Insured or his Authorised Employee is or is alleged to be involved as a principal or accessory or is alleged to be in anyway concerned or implicated.
- Loss of Money in the Insured Premises where such Money is stored other than in a Safe or Strong Room, after business hours.
- Money carried under contract of affreightment.
- Loss of money from an unattended vehicle.
- Loss of money from a Safe or Strong Room following the use of a key belonging to the Insured and/or combination and/or code to gain access, unless this has been obtained by threat or violence against Employees.
- Loss or damage whether direct or indirect arising from war (whether war be declared or not), war-like operations, act of foreign enemy, hostilities, civil war, rebellion, insurrections, civil commotion, military or usurped power, seizure, capture, confiscation, arrests, restraint and/or detainment by the order of any government or any other authority, riot, strike or any terrorist activity.
- Loss caused by any earthquake, flood, storm, cyclone or other convulsions of nature or atmospheric disturbances.
- Loss or damage due to ionising radiation or contamination by the radioactivity substance from any nuclear fuel shall or from any nuclear assembly or nuclear waste or from the combustion of nuclear fuel.
- Loss or damage due to the radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
- Loss due to or in any way contributed to by the Insured having knowingly permitted or caused or suffered anything to be done or not done whereby the risks hereby insured against were increased.
- Any loss of or damage to any property, whether belonging to the Insured, an Employee or any third party.
- Any personal or bodily or mental injury or suffering of any description.

In any action suit or other proceeding where the Company alleges that by reason of any Exclusion any Claim is not covered by this Policy, the burden of proving that such Claim is covered shall be upon the Insured.

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखति कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकित कयिा जा रहा है उसके हाथ नर्धिरति कएिे जाएँ। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह वशिषिट अर्थ पालासा जा चुका है, के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकिता नरिस्त हो जाएगी। **/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 01/August/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

इंश्योरेंसइंडियालिमिटेड



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Signatorv

TAX INVOICE

Invoice Serial No: 30961O3PE0000200

Invoice Date: 01/08/2023

Details of Supplier:

National Insurance Company Limited.,
PALARIVATTOM DIVISION Mydhily Mandiram, Janata Junction, Palarivattom, Kochi,,Dist: Ernakulam, Kerala, - 682025
State : 32 , Kerala
GSTIN No : 32AAACN9967E1ZC

Details Of Receiver : HLL LIFECARE LIMITED

(A GOVERNMENT OF INDIA UNDERTAKING),
HLL BHAVAN - CORPORATE
HEAD OFFICE,
Address : POOJAPPURA - PO |
THIRUVANANTHAPURAM -
695012,
KERALA, INDIA
City : THIRUVANANTHAPURAM,
District: THIRUVANANTHAPURAM,
State: KERALA,
PIN: 695012.
Place Of Supply State : Kerala
State Code : 32
GSTIN No : 32AAACH5598K7Z4

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non-life insurance services (excluding reinsurance services)		0%								0
TOTAL											

कल दनवॉयम मलय (संकों में) Total Invoice Value (In figures) :

रविरस चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

कृते नेशनल इन्शुरेन्स कंपनी लिमिटेड/ For