



Breathe out worries as you're insured with Digit now

Your health is your biggest treasure.

Wise of you to protect it.



Policy Schedule

Digit Group Total Protect Policy

UIN: GODPAGP21491V022021

For any help, we're there for you at [1800-258-4242](tel:1800-258-4242)

Policy Details:

Name of Group Organizer/Manager/ Policy Holder	BRILLIANT INSTITUTE OF ENGINEERING AND TECHNOLOGY		Master Policy Number	D145439035	
Address of Group Organizer/Manager/ Policy Holder	,, Unknown		Mobile Number	+919959497392	
Number of Employees	500		Family Definition	Self	
GST State Code	XX	GSTIN	UNREGISTERED	Policy Type	Individual
Group Type	Employer - Employee	Policy Tenure	365 days	Policy Issuance Date	26-Apr-2024
Period of Insurance	From	26-Apr-2024	00:01 Midnight		
	To	25-Apr-2025	23:59 Midnight		

Partner Name/Code	DUGYALA KAVITHA 1141708	Partner Contact/Email	8309452887 duggyalas@gmail.com
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Coverage Details

Section with Benefits	Sum Insured (INR) / (Total for Named Policies & Per Person for Un-Named Policies) / Limits / Waiting Periods / Time Excess / Co-Payment (%) / Specific Conditions
Section 1: Accidental Death	Covered up to 100 % of SI
Section 2: Permanent Total Disability	Covered up to 100% of SI
Section 3: Permanent Partial Disability	Covered up to 100 % of SI as per benefit table

Other Coverage Details

Terrorism	Covered
Geographical Limit	Worldwide
Risk Class	Risk Class 1
Coverage	24*7 Cover
Individual SI restriction (times of CTC)	N/A
Claim Intimation and Document Submission	Claim must be filed within 30 days from the date of occurrence of accident. However, Digit may at its absolute discretion consider waiver, of this Condition in extreme cases of hardship where it is proved to the satisfaction of Digit that under the circumstances in which the insured was placed it was not possible for him or any other person to give such notice or file claim within the prescribed time-limit.
Addition Endorsements	Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new employee/spouse / children would be allowed within 45 days of date of joining. Backdation of 45 days from date of intimation shall not be allowed. Any endorsements will be from the date of addition and not from the inception of the policy. Prorated premium will be charged for each member added during the policy term.
Deletion Endorsements	In case of refund endorsements on account of deletion, pro-rata refund for the employee should be done subject to nil claims. Deletion to be intimated immediately on finalization of last working day of employee. In case employee avails the claim after his LWD for which intimation is received after DOA, insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as from DOL if intimation is within 7 days else intimation date will be consider for calculation subject to nil claim
Accumulation Limit	0

Specific Exclusion

if Occupation is related to Hazardous activities such as working with explosives, underground mines, or involving electrical installation with high tension supply, etc., the coverages under this policy shall not be available.

Premium and Payment Details (Wherever Applicable)

Description	Amount (INR)
Frequency of Payment	Yearly
Number of Employees	500
Total no. lives covered	500
Aggregate Sum Insured	₹ 100,000,000

Details of Member Insured as per annexure:

1. Cheque dishonour / Non-receipt of payment: The policy is void ab-initio i.e. it will not hold true, in case of non-receipt of premium or dishonour of Cheque issued towards premium payment.
2. This insurance cover is subject to standard policy wordings, exclusions and conditions as per “**Digit Group Total Protect Policy**” issued to the Master Policy holder. A copy of the terms and conditions shall be shared with you. In case of dispute, the terms and conditions detailed in the policy document and policy schedule shall prevail, such is life!
3. The coverage has been provided basis information provided by the group Organizer/ Manager/ Policy Holder to us and the policy is not valid, if any of the information provided is incorrect.
4. The Policy Wording attached herewith includes all the standard coverage offered by Go Digit General Insurance Ltd. to its customers. Your entitlement for coverage/benefits shall be restricted to the Coverage/Benefits as mentioned in this Policy Schedule. For any clarification please call our Call Center Number [1800-258-4242](tel:1800-258-4242).
5. Enclosure: Annexure 1 - Claims Procedure and Documentation, [Click here](#).

Claims Administrator Details	
Contact details	1800-258-4242
Email id	healthclaims@godigit.com
For Senior citizens	seniors@godigit.com

For & On Behalf of Go Digit General Insurance Ltd.

Consolidated Stamp Duty is Deposited with
Department of Stamps, Bengaluru

Authorized Signatory

Printed, Signed, and Executed at Bengaluru

Wish to go through your detailed policy wordings, [click here](#)

In case of any claim, please contact 24-Hour Call Centre at [1800-258-4242](tel:1800-258-4242) or email us at hello@godigit.com

Go Digit General Insurance Ltd. Address: Atlantis, 95, 4th B Cross Road, Koramangala Industrial Layout, 5 Block, Bengaluru, Karnataka 560095, IRDAI Reg No. 158 CIN U66010PN2016PLC167410, HSN: 997133/General Insurance Services, GST Reg. No: 36AACCO4128Q1Z1 GSTIN Address: Hyderabad Business Centre, 3rd Floor, Prestige Phoenix, Begumpet Flyover, Kundanbagh, Begumpet, Hyderabad, Telangana, PIN-500016. Website: www.godigit.com

Annexure 1:

Invoice Summary :

Invoice Number	Invoice Date	Net Premium	Taxes	Gross Premium
TS24042645439035	2024-04-26 00:00:00	23390.00	4210.00	27600.00