



## UNITED INDIA INSURANCE COMPANY LIMITED

150205  
D NO 50-94-19/1/2, 3RD FLOOR N R BHAVAN, SANTHIPURAM NEAR GURUDWARA JUNCTION  
VISAKHAPATNAM - 530016 ANDHRA PRADESH  
PH: (891) 2550985 FAX: EMAIL:

**UNI STUDY CARE GROUP POLICY**  
**UIN NO.IRDAI/HLT/UII/P-P/V.I/22/2015-16**  
**POLICY NO:1502054223P100896659**

PERIOD OF INSURANCE From 00:00 Hrs of 22/04/2023 To Midnight of 21/04/2024
--

*Insured*  
**M/s RAGHU ENGINEERING COLLEGE**  
SNO. 296/1, 296/1A, 296/2, DHAKAMARRI BHIMUNIPATNAM MANDSL  
531162  
VISAKHAPATNAM  
ANDHRA PRADESH

Agent Name : PAPAYYA RAJU N  
Agent Code : AGI0000926  
Mobile/Landline Number/Email : 9985866669  
: [prnadimpalli@gmail.com](mailto:prnadimpalli@gmail.com)

The genuineness of the policy can be verified through "Verify Your Policy" link at [www.uiic.co.in](http://www.uiic.co.in).

For any Information, Service Requests, Claim intimation and Grievances please write to [150205@uiic.co.in](mailto:150205@uiic.co.in)

---

Download Customer App([www.uiic.co.in](http://www.uiic.co.in)). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.

Website: <http://www.uiic.co.in>

Printed By : CUSTOMER @ 25/04/2023 3:16:14 PM

This document is digitally signed

Signer: AMAR KUMAR SINHA  
Date: Tue, Apr 25, 2023 15:16:57 IST  
Location: United India Insurance Company Ltd  
Reason: Signing Policy for UIIC



**UNI STUDY CARE GROUP POLICY**  
**UNI NO.IRDAI/HLT/UII/P-P/V.I/22/2015-16**  
**SCHEDULE**

Policy No.	<b>1502054223P100896659</b>		Previous Policy No.	
Insured Details	Customer id	<b>1659131134</b>		
	Name	<b>M/s RAGHU ENGINEERING COLLEGE</b>		
	Tel (O):	Tel (R)	Fax:	
	Email	Mobile:		
	Business / Occupation	None		
Period of Insurance	From	<b>00:00 Hrs of 22/04/2023</b>	To	<b>Midnight of 21/04/2024</b>

<b>Coinsurance</b>	UIIC 150205 : 100%
--------------------	--------------------

<b>PREMIUM</b>	Four lakhs eighty-four thousand four hundred forty rupees only
----------------	--

<b>Total SI for Sec. IA</b>	₹ 100000	<b>Total SI for Sec. IB</b>	₹ 50000	<b>Total SI for Sec. II</b>	₹ 100000	<b>Total SI for Sec. III</b>	₹	<b>Total SI for Sec. IV</b>	₹
-----------------------------	----------	-----------------------------	---------	-----------------------------	----------	------------------------------	---	-----------------------------	---

Policy Period:	1 Yrs.	Total No of Person:	4404	<b>Total Sum Insured: ₹ 1101000000</b>
Special Condition:	COVERAGE IS FOR ALL 4404 STUDENTS STUDYING IN BTECH & MTECH COURSES AS PER COLLEGE RECORD & DECLARED BY THE COLLEGE AS FOLLOWS :- BTECH 1ST YEAR : 1180, BTECH 2ND YEAR : 1124, BTECH 3RD YEAR : 1080 , BTECH 4TH YEAR : 986, MTECH 1ST YEAR : 13 AND MTECH 2ND YEAR : 21 (TOTAL : 4404)			

Net Premium:	484,440.00
CGST(9%):	43,600.00
SGST(9%):	43,600.00
Stamp Duty:	13.00
<b>Total:</b>	<b>571,640.00</b>
Receipt No:	10115020523101066898
Receipt Date:	25/04/2023
Agency/Broker Code :	AGI0000926
Business Associate Code :	BAS21189
Direct Business :	

<b>Customer GST/UIN No.:</b>		<b>Office GST No.:</b>	37AAACU5552C1ZI
<b>SAC Code:</b>	997133	<b>Invoice No. &amp; Date:</b>	4223I100896659 & 25/04/2023
<b>Amount Subject to Reverse Charges-NIL</b>			

**We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.**

**Anti Money Laundering Clause:-**In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

**LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.**

Date of Proposal and Declaration: 22/04/2023

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO 4 VISAKHAPATNAM 150205 on this 24th day of April 2023 .

**For and On behalf of**  
**United India Insurance Co. Ltd.**

**Duly Constituted Attorney(s)**  
**Underwritten By - DIP29559 ( BO UW CUM CASHIER ) , Approved By -**  
**SHY29108(RO UNDERWRITER)**

Affix Policy  
Stamp here.

This is a system generated document and any manual alteration / correction / overwriting in the document will make it invalid.