Star Health And Allied Insurance Company Limited

Date : 08-May-2026

To,

IMPORTANT

AMITH SINGH MAKHIJA,
16-10-182/10,MUNICIPAL COLONY,
NEAR POCHAMMA TEMPLE,OLD MALAKPET.
-
Hyderabad,Telangana-**500036**
Mobile : 9949379015

Dear Customer,

Re: Health Insurance Policy - 5200112403020101

We are extremely thankful to you for your renewal instructions and payment of premium. We enclose the renewed policy based on our records. We would request you to kindly study the renewed policy carefully and revert to us if there is any discrepancy to enable us to attend to the same.

Kindly note that the above request is very important and if we do not hear anything from you within 15 days, we would presume that the policy issued by us is in order and the contract is concluded.

We would like to mention that we have incorporated the name of the intermediary as indicated by you.

We wish you good health and we look forward to serve you in the days to come.

With kind regards,

Authorised Signatory

In case of a need for hospitalization, kindly prefer our network hospital (list is available in our website) for a quick response to your claim request.

Please select the room as per your eligibility stipulated in your policy to avoid additional payment from your pocket towards the proportionate increase which would invariably be charged by the hospital for the higher room category occupied.

Sum Insured of this Policy is meant for utilization till its expiry.Bearing this aspect in mind,we have no doubt,you will choose appropriate hospital,room rent and treatment charges etc.

Should you need any assistance, our customer care will be delighted to assist you ,whose toll free no. is 1800-425-2255/1800-102-4477.

However,the ultimate decision will be that of yours only.

This is an electronically generated document(Policy Schedule). CONSOLIDATED STAMP DUTY FOR POLICY STAMPS PAID VIDE PROCS NO: GSO5/10589/P/2026 DT:02.01.2026

Young Star Insurance Policy UIN :SHAHLIP26043V062526

Registered Office: No.1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai-600034.Phone:044-28288800
Corporate Office: No. 148, Acropolis, Dr. Radha Krishnan Salai, Mylapore, Chennai-600004. Phone:044-47886666
Toll Free No:1800-425-2255 / 1800-102-4477,CIN : L66010TN2005PLC056649
Email:support@starhealth.in Website :www.starhealth.in IRDAI Regn.no: 129

Young Star Insurance Policy
(Floater)
Unique Identification No. SHAHLIP26043V062526
POLICY SCHEDULE

Policy No.	:	**5200112403020101**	**Previous Policy No**	:	**3846112402027052**
Customer Code	:	33347732	GSTIN	:	36AAJCS4517L1ZZ
Customer Name	:	AMITH SINGH MAKHIJA	SAC Code	:	997133 / Accident and Health Insurance Services
Cust CKYC No	:	30042222005958			
Proposer Code	:	33347732	Issuing Office Code	:	131127
Proposer Name	:	AMITH SINGH MAKHIJA	Issuing Office Name	:	Branch Office - Himayat Nagar
Proposer Address	:	16-10-182/10,MUNICIPAL COLONY, NEAR POCHAMMA TEMPLE,OLD MALAKPET. - Hyderabad Telangana 500036	Issuing Office Address	:	D.NO: 3-6-140, 2ND FLOOR NETHAJI BHAVAN, ABOVE KOTAK MAHINDRA BANK & BESIDE LIC, OPP. BAJAJ ELECTRONICS HIMAYATHNAGAR MAIN ROAD, HYDERABAD, 500029 Himayat Nagar - Hyderabad Telangana 500029
Phone No	:	9949379015	Phone No	:	040-42204151
E-mail Id	:	ameetsingh282@gmail.com	E-mail Id	:	himayatnagar@starhealth.in
Proposer GSTIN	:	NO	Place of Supply	:	Telangana
Proposal Date	:	08-May-2023	Fulfiller Code	:	SH71409
Date of Inception of first policy	:	08-May-2023			
Policy Category	:	Third Year	**Intermediary Code**	:	**BA0000365143**
Collection No	:	131127/RV/2027/0306090193			
Collection Date	:	08-May-2026	**Name**	:	**Mr.ASHOK KUMAR RAM CHANDER**
Base Product Premium	:	Rs. 21,325/-			
CGST @ 0%	:	Rs. 0/-	**Phone No**	:	**9246216004/9246216004**
SGST @ 0%	:	Rs. 0/-	**E-mail Id**	:	**rashokkumar131264@gmail.com**
Total Premium	:	Rs. 21,325/-			
Stamp Duty	:	Re. 1/-			

Entered by : CUSTPORTAL
Approved by : PORTAL

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For Star Health and Allied Insurance Company Ltd.

Authorised Signatory

Young Star Insurance Policy UIN :SHAHLIP26043V062526

IRDAI Regn.No.129
Email ID: info@starhealth.in
Corporate Identity Number L66010TN2005PLC056649

Star Health And Allied Insurance Company Limited

Attached to and forming part of Policy No: 5200112403020101

Total Premium In Words : Rupees Twenty One thousand three hundred twenty five only		
Period of Insurance	**: From :** 08-May-2026 10:05Hrs **To :** Midnight of 07-May-2027	**Policy Term :** 1 Year
Installment Facility Option: No	**Premium Payment Frequency : Annual**	**Installment Amount Rs. : 0/-**
Scheme Description (Family Size) : 2A+2C		

Basic Floater Sum Insured : Rs. 5,00,000/-	**Total Sum Insured In Words :** Rupees Five lakhs only	
Plan Type:	Bonus : Rs. 1,00,000/-	Zone : ZONE B

Details of Insured Persons : **No. of Persons Insured : 4**

S. No.	Name of the Insured	Gender	Date of Birth	Age in Yrs	Relationship with Proposer	ID Card No	Pre Existing Disease	Inception date
1	AMEET SINGH MAKHIJA	Male	17-Jan-1988	38	Self	33347732-1	No PED Declared	08-May-2023
2	SHUBHANGANI	Female	31-Oct-1991	34	Spouse	33347732-2	No PED Declared	08-May-2023
3	SHIVANSH SINGH MAKHIJA	Male	11-Oct-2016	9	Son	33347732-3	No PED Declared	08-May-2023
4	VEDANSH MAKHIJA	Male	07-Feb-2018	8	Son	33347732-4	All complications related to the surgeries or procedures performed previously	08-May-2023

Nominee Details:

Nominee Details for the Proposer					Appointee Details		
S.No	**Name**	**Relationship with proposer**	**Age**	**% of the claim**	**Appointee Name**	**Appointee Age**	**Relationship with nominee**
1	SHUBHANGANI	Spouse	34	100			

Sector Classification:

Urban		

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Approved by : PORTAL

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Young Star Insurance Policy UIN :SHAHLIP26043V062526

For Star Health and Allied Insurance Company Ltd.

Authorised Signatory

Registered Office: No.1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai-600034.Phone:044-28288800
Corporate Office: No. 148, Acropolis, Dr. Radha Krishnan Salai, Mylapore, Chennai-600004. Phone:044-47886666
Toll Free No:1800-425-2255 / 1800-102-4477,CIN : L66010TN2005PLC056649
Email:support@starhealth.in Website :www.starhealth.in IRDAI Regn.no: 129

Please check whether the details given by you about the insured persons in the proposal form are incorporated correctly in the policy schedule. If you find any discrepancy, please inform us within 15 days from the date of receipt of the policy, failing which the details relating to the insured person given in the policy schedule are deemed to have been accepted by you.

Warranted that in case of dishonor of premium cheque(s), the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

THE INSURANCE UNDER THIS POLICY IS SUBJECT TO CONDITIONS, CLAUSES, WARRANTIES, EXCLUSIONS ETC., ATTACHED.

IMPORTANT

IN THE EVENT OF HOSPITALIZATION OF INSURED PERSON, INTIMATION SHOULD BE GIVEN TO THE COMPANY IMMEDIATELY, HOWEVER, WITHIN 24 HRS FROM THE TIME OF ADMISSION.

Toll Free No: 1800 425 2255 /1800 102 4477 Email: support@starhealth.in

"CONSOLIDATED STAMP DUTY FOR POLICY STAMPS PAID VIDE PROCS NO: GSO5/10589/P/2026 DT:02.01.2026"

In witness whereof the undersigned being authorized here in to set his hand at Branch Office - Himayat Nagar on 08th Day of May 2026.

Entered by : CUSTPORTAL
Approved by : PORTAL

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For Star Health and Allied Insurance Company Ltd.

Young Star Insurance Policy UIN :SHAHLIP26043V062526

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Star Health And Allied Insurance Company Limited

Hospitalisation Benefit Policy

Premium Certificate for the purpose of deduction under Section 80 D of Income Tax (Amendment) Act,1986

Policy No : 5200112403020101

Type of Policy : Young Star Insurance Policy Revised - 2025

Issue Office : 131127-Branch Office - Himayat Nagar

Address : D.NO: 3-6-140, 2ND FLOOR
NETHAJI BHAVAN, ABOVE KOTAK MAHINDRA BANK & BESIDE LIC, OPP. BAJAJ ELECTRONICS
HIMAYATHNAGAR MAIN ROAD, HYDERABAD, 500029
Himayat Nagar - Hyderabad Telangana 500029

Tel / Fax : 040-42204151

Email : himayatnagar@starhealth.in

This is to certify that AMITH SINGH MAKHIJA has paid Rs 21,325/- (Total Premium : Indian Rupees Twenty One thousand three hundred twenty five only) towards Premium for Hospitalization Insurance vide Policy No: 5200112403020101 for the Period 08-May-2026 To 07-May-2027 issued on 08-May-2026.

Payment received by Payment Gateway vide Receipt No: 131127/RV/2027/0306090193/1 Receipt Date: 08-May-2026

Note :- This Certificate must be surrendered to the Insurance Company for issuance of fresh Certificate in case of Cancellation of the Policy or any alteration in the Insurance affecting the Premium.

Date : 08-May-2026

Place : Branch Office - Himayat Nagar

For and on behalf of

Star Health and Allied Insurance Company Ltd.

IRDAI Regn.No.129

Corporate Identity Number L66010TN2005PLC056649

Email ID: info@starhealth.in

Authorised Signatory

Entered by : CUSTPORTAL
Approved by : PORTAL

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For Star Health and Allied Insurance Company Ltd.

Young Star Insurance Policy UIN :SHAHLIP26043V062526

Authorised Signatory

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Email:support@starhealth.in Website :www.starhealth.in IRDAI Regn.no: 129

Star Health And Allied Insurance Company Limited

Star Health and Allied Insurance Company Limited

Customer Identity Card

Policy No : 5200112403020101

Name	DOB	Gender	Customer id
AMEET SINGH MAKHIJA	17-Jan-1988	Male	33347732-1
SHUBHANGANI	31-Oct-1991	Female	33347732-2
SHIVANSH SINGH MAKHIJA	11-Oct-2016	Male	33347732-3
VEDANSH MAKHIJA	07-Feb-2018	Male	33347732-4

Valid From : 08-May-2026

Valid Till : 07-May-2027

Office Code : 131127

Agent/Broker/TE Code : BA0000365143

TA/SSM/SM Code : SH71409

IRDAI Regn.No:129

Emergency Help Line No.1800 425 2255/1800 102 4477

e-mail : support@starhealth.in Website : www.starhealth.in

Please quote the Customer Id No. for assistance

- This ID Card is invalid,if the insurance cover is not in force.
- Immediate Intimation to 'Star' through above Tel Nos. is a must in case of Hospitalisation.

At the time of hospitalisation,kindly submit any **Government approved photo ID Card.**

Corporate Identity Number : L66010TN2005PLC056649

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Approved by : PORTAL

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Email:support@starhealth.in Website :www.starhealth.in IRDAI Regn.no: 129

Star Health And Allied Insurance Company Limited

Tax Invoice

Invoice No.	: 362605I014200478		**Customer ID**	: 33347732	
Invoice Date	: 08-May-2026		**Policy No.**	: 5200112403020101	
Recipient			**Supplier**		
GSTIN	:		**GSTIN**	: 36AAJCS4517L1ZZ	
Name	: AMITH SINGH MAKHIJA		**Name**	: Star Health and Allied Insurance Co Ltd - Branch Office - Himayat Nagar	
Address	: 16-10-182/10,MUNICIPAL COLONY, NEAR POCHAMMA TEMPLE,OLD MALAKPET. -		**Address**	: D.NO: 3-6-140, 2ND FLOOR NETHAJI BHAVAN, ABOVE KOTAK MAHINDRA BANK & BESIDE LIC, OPP. BAJAJ ELECTRONICS HIMAYATHNAGAR MAIN ROAD, HYDERABAD, 500029	
City	: Hyderabad	**Pin Code** : 500036	**City**	: Himayat Nagar - Hyderabad	**Pin Code** : 500029
State	: Telangana	**Client Category** : IND	**State**	: Telangana	**Place of supply** : Telangana

HSN / SAC Code	Description of Service(s)	Total	Discount	Taxable Value	IGST @ 0%	CGST @ 0%	UT/SGST @ 0%	CESS @ 1%	Total Invoice Value
		A	B	C = A - B	D = C * IGST	E = C * CGST	F = C * UTGST or SGST	G= C * Cess	H = C + D + E+ F + G
997133	Insurance Services	21,325.00	0	21,325.00	0	0	0	0	21,325.00

Total Invoice Value (in Figures) : Rs. 21,325/-

Total Invoice Value (in Words) : Rupees Twenty One thousand three hundred twenty five only

Amount of Tax Subject to reverse Charge : No

Important Note:

The invoice is issued as per Section 31 of the CGST Act

In case no GSTIN or incorrect GSTIN is provided by the Proposer at Proposal stage, Star Health and Allied Insurance Co Ltd shall not be responsible for any Input Tax Credit losses and no subsequent revision of invoice will be undertaken

"I/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."

E. & O.E

This is a digitally signed document and hence no physical signature is required

IRDAI Regn.No.129 **Corporate Identity Number L66010TN2005PLC056649** **Email ID: stargst@starhealth.in**

Entered by : CUSTPORTAL
Approved by : PORTAL

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Young Star Insurance Policy UIN :SHAHLIP26043V062526

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भारत सरकार

आधार

భారత ప్రభుత్వం
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 0648/13163/01669

To
వేదాన్ష్ మఖిజ
Vedansh Makhija
C/O: Ameet Singh Makhija,
16-10-182/10,
Municipal Colony,
Near Pochamma Temple,
VTC: Malakpet,
PO: Malakpet Colony,
Sub District: Amberpet,
District: Hyderabad,
State: Telangana,
PIN Code: 500036,
Mobile: 9949379015

Signature valid

మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

3361 6040 2629

VID : 9118 1103 1343 0347

నా ఆధార్, నా గుర్తింపు

భారత ప్రభుత్వం
Government of India

ఆధార్

Aadhaar no. issued: 16/05/2023

వేదాన్ష్ మఖిజ
Vedansh Makhija
పుట్టిన తేదీ/DOB: 2018
పురుషుడు/ MALE

ఆధార్ అనేది గుర్తింపు రుజువు మాత్రమే, పౌరసత్వం లేదా పుట్టిన తేదీ కి కాదు. ఇది ధృవీకరణతో మాత్రమే ఉపయోగించాలి (ఆన్‌లైన్ ప్రమాణీకరణ లేదా QR కోడ్ / ఆఫ్‌లైన్ XML యొక్క స్కానింగ్).

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

3361 6040 2629

నా ఆధార్, నా గుర్తింపు

आयकर विभाग
INCOME TAX DEPARTMENT

सत्यमेव जयते

भारत सरकार
GOVT. OF INDIA

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

ANIPA0733D

नाम / Name
AMEET SINGH MAKHIJA

पिता का नाम / Father's Name
SINGH MAKHIJA BALBIR

जन्म की तारीख /
Date of Birth
17/01/1988

Amt Singh

हस्ताक्षर / Signature

09052025

सत्यमेव जयते
भारत सरकार

आधार

భారత ప్రభుత్వం
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 0648/13163/01670

To
అమీత్ సింగ్ మఖిజ
Ameet Singh Makhija
S/O Balbir Singh Makhija,
16-10-182/10,
Municipal Colony,
Near Pochamma Temple,
Old Malakpet,
VTC: Hyderabad,
District: Hyderabad,
State: Andhra Pradesh,
PIN Code: 500036,
Mobile: 9573678411

Signature Not Verified
Digitally signed by GS
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA 05
Date: 2024.02.07
15:27:34
GMT+05:30

మీ ఆధార్ సంఖ్య / Your Aadhaar No. :
9509 4106 1978
VID : 9138 9189 3976 8510

నా ఆధార్, నా గుర్తింపు

सत्यमेव जयते
Government of India

AADHAAR

సమాచారము / INFORMATION

- ఆధార్ అనేది గుర్తింపు రుజువు, పౌరసత్వం లేదా పుట్టిన తేదీ కి కాదు. పుట్టిన తేదీ అనేది ఆధార్ నంబర్ హోల్డర్ సమర్పించిన నిబంధనలలో పేర్కొన్న పుట్టిన తేదీ పత్రం యొక్క రుజువు ఆధారం ద్వారా ఇచ్చే సమాచారంపై ఆధారపడి ఉంటుంది.
- ఈ ఆధార్ లేఖను UIDAI నియమించిన ప్రమాణీకరణ ఏజెన్సీ ద్వారా ఆన్‌లైన్ ప్రమాణీకరణ ద్వారా లేదా యాప్ స్టోర్‌లలో అందుబాటులో ఉన్న mAadhaar లేదా ఆధార్ QR స్కానర్ యాప్‌ని ఉపయోగించి లేదా www.uidai.gov.inలో అందుబాటులో ఉన్న సురక్షిత QR కోడ్ రీడర్ యాప్‌ని ఉపయోగించి QR కోడ్ స్కానింగ్ ద్వారా ధృవీకరించాలి.
- ఆధార్ ప్రత్యేకమైనది మరియు సురక్షితమైనది.
- ఆధార్ నమోదు చేసిన తేదీ నుండి ప్రతి 10 సంవత్సరాల తర్వాత గుర్తింపు మరియు చిరునామాకు సంబంధించిన పత్రాలతో ఆధార్ ను నవీకరించాలి.
- వివిధ ప్రభుత్వ మరియు ప్రభుత్వేతర ప్రయోజనాలు/సేవలను పొందడంలో ఆధార్ మీకు సహాయపడుతుంది.
- మీ మొబైల్ నంబర్ మరియు ఈ-మెయిల్ ఐడీని ఆధార్ లో అప్‌డేట్ చేసుకోండి.
- ఆధార్ సేవలను పొందేందుకు mAadhaar యాప్‌ను డౌన్‌లోడ్ చేసుకోండి.
- ఆధార్/బయోమెట్రిక్‌లను ఉపయోగించనప్పుడు భద్రతను నిర్ధారించడానికి లాక్/అన్‌లాక్ ఆధార్/బయోమెట్రిక్స్ ఫీచర్‌ని ఉపయోగించండి.
- ఆధార్‌ను కోరే సంస్థలు తప్పనిసరిగా సమ్మతి పొందవలసి ఉంటుంది
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.

भारत प्रभुत्वं
Government of India

ఆధార్

Aadhaar no. issued: 10/12/2011

అమీత్ సింగ్ మఖిజ
Ameet Singh Makhija
పుట్టిన తేదీ/DOB: 17/01/1988
పురుషుడు/ MALE

ఆధార్ అనేది గుర్తింపు రుజువు మాత్రమే, పౌరసత్వం లేదా పుట్టిన తేదీ కి కాదు. ఇది ధృవీకరణతో మాత్రమే ఉపయోగించాలి (ఆన్‌లైన్ ప్రమాణీకరణ లేదా QR కోడ్ / ఆఫ్‌లైన్ XML యొక్క స్కానింగ్).

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

9509 4106 1978

నా ఆధార్, నా గుర్తింపు

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

ఆధార్

Details as on: 07/02/2024

చిరునామా:
S/O బల్బీర్ సింగ్ మఖిజ, ౧౬-౧౦-౧౮౨/౧౦,
మునిసిపల్ కాలనీ, నేఅర్ పోచమ్మ టెంపుల్, ఓల్డ్ మలక్‌పేట్,
హైదరాబాద్, హైదరాబాద్,
ఆంధ్ర ప్రదేశ్ - 500036

Address:
S/O Balbir Singh Makhija, 16-10-182/10,
Municipal Colony, Near Pochamma Temple,
Old Malakpet, Hyderabad, DIST: Hyderabad,
Andhra Pradesh - 500036

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