ANNEXURE- III

THE NEW INDIA ASSURANCE COMPANY LIMITED

HAL RETIRED EMPLOYEES (Workmen Retired after 01/01/2007)
GROUP HEALTH INSURANCE – VOLUNTARY TOP UP SCHEME

Employee Name :

P B No. and Division/Office :

Contact Number & Email ID :

Address :

Relationship	Name	MAID number
Employee		
Spouse		

Top Up Premium Coverage for Base Policy (1.2.26 to 31.1.27) (Please tick the appropriate boxes accordingly)

Voluntary Top Up Limit	Premium for Family Size – 1	Tick your Option below	Premium for Family Size – 2	Tick your Option below
Option 1 – Rs. 2,00,000	Rs. 13650/-		Rs. 21840/-	
Option 2 – Rs. 4,00,000	Rs. 15820/-		Rs. 25200/-	
Option 3 – Rs. 6,00,000	Rs. 21700/-		Rs. 32900/-	
Option 4 – Rs. 8,00,000	Rs. 25200/-		Rs. 40600/-	
Option 5 – Rs. 10,00,000	Rs. 31500/-		Rs. 50400/-	
Option 6 – Rs. 12,00,000	Rs. 35700/-		Rs. 58800/-	
Option 7 – Rs. 14,00,000	Rs. 44100/-		Rs. 67200/-	
Option 8 – Rs. 16,00,000	Rs. 49700/-		Rs. 79240/-	
Option 9 – Rs. 18,00,000	Rs. 58800/-		Rs. 92400/-	
Option 10 – Rs. 20,00,000	Rs. 67200/-		Rs. 106400/-	

Payment Mode:

1. Online Payment using the NEFT/RTGS through Net Banking facility :

   Number : 923020018298941
   Account Type : Current Account
   Name of Bank : Axis Bank
   Branch : M G Road Branch
   IFSC Code : UTIB0000009

2. Cheque /DD / NEFT drawn in favour of **THE NEW INDIA ASSURANCE COMPANY LTD.**

The beneficiary will not be on risk until the proposal and Insured Persons details have been accepted by the Company and communication of the acceptance has been given to the proposer in writing on full payment of premium.

The Scheme will be for 12 months cover from 1.2.26 to 31.1.27. I agree to abide by the Terms & Conditions of the above Scheme and I agree to pay full annual premium for VOLUNTARY TOP UP SCHEME.

Date: Signature of the proposer

Cheque / DD / NEFT should be drawn in favour of *THE NEW INDIA ASSURANCE COMPANY LIMITED.*
Please mention MAID number and Mobile number behind the Cheque Leaf / DD / NEFT Description.

Premium Payment Process

Following options are available for payment of premium:-

1. **Cheque or DD-** Issued in favor of **'THE NEW INDIA ASSURANCE COMPANY LIMITED'**

(Name of Retired Employee and his/her Medi Assist ID Number (MAID Number) and mobile number should be written at the back side of cheque).

2. **Online Payment using the NEFT/RTGS through Net Banking facility.**

Payment can be made through Net Banking facility to the below mentioned account of The New India Assurance Company Limited:

Number	: 923020018298941
Account Type	: Current Account
Name of Bank	: Axis Bank
Branch	: M G Road Branch
IFSC Code	: UTIB0000009

IMPORTANT NOTE

After making the online transfer, the payee will have to send the following to the dedicated email id - hal@mediassist.in:

1. UTR Number / Screen Shot / Remittance Challan for the payment made at the Bank
2. MAID Number of the Retired Employee
3. Name of the Retired Employee

Duly filled & signed Enrolment Form and Cheque to be sent by courier/speed post to the following address:

Medi Assist Insurance TPA Private Limited,
Tower D, 4th Floor,
IBC Knowledge Park,
4/1, Bannerghatta Road,
Bengaluru - 560 029.