



UNITED INDIA INSURANCE COMPANY LIMITED

ENDORSEMENT SCHEDULE

GROUP PERSONAL ACCIDENT POLICY

Policy Number	2501004223P112030215	Department	Personal Accident
Previous Policy Number			
Type of Policy	Group Personal Accident Policy	Business Channel code	BRC0000042,BRC0000019,BRC0000190
Policy Start Date	18/12/2023	Policy End Date	17/12/2024
Endorsement No	1	Endorsement Effective Date	02/01/2024
Insured's Name	UJVN LIMITED	Issuing Office	250100
Address	UJJWAL, MAHARANI BAGH, G M S ROAD DEHRADUN DEHRADUN 248006 UTTARAKHAND	Office Address	A SQUARE PLAZA, 10 TILAK ROAD, DEHRADUN - 248001 UTTARANCHAL DEHRADUN 248001 UTTARAKHAND

SAC Code:	997133
Customer GST/UIN No.:	
Office GST No.:	05AAACU5552C1ZP
Credit Note No. & Date:	23100259074C01 & 02/01/2024
Original Invoice No. & Date:	4223I112030215 & 21/12/2023
Amount Subject to Reverse Charges-NIL	

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.

Insured Request No. & Date	202401026839353 & 02/01/2024
Endorsement Type	Deletion of Insured person

Endorsement Premium :	₹ -13,011.00
Endorsement CGST(9%) :	₹ -1,171.00
Endorsement SGST(9%) :	₹ -1,171.00
Endorsement Stamp Duty :	₹ 0.00
Total Endorsement Premium :	₹ -15,353.00

REASON FOR ENDORSEMENT: REMOVAL OF PERSONS AS PER MAIL

ENDORSEMENT WORDING: Notwithstanding anything contained herein to the contrary it is hereby declared and agreed that at the request of the insured the following member/s has/have been deleted from the within mentioned policy with effect from 02/01/2024 .

Sl. No.	Employee ID	Name Of Insured	Age	Gender	Occupation	Assignee Name	Risk Category	Assignee Relationship	Sum Insured
32	90102	ANJU VIVEKI	60	Female	Service	UJVN LIMITED	RiskCategory I	Employer	3,000,000.00
288	91672	KUNDAN SINGH	60	Male	Service	UJVN LIMITED	RiskCategory I	Employer	3,000,000.00
348	91925	GHANSHYAM	59	Male	Service	UJVN LIMITED	RiskCategory I	Employer	3,000,000.00
432	92505	NAFEESH AHAMED	59	Male	Service	UJVN LIMITED	RiskCategory I	Employer	3,000,000.00
515	92636	GANESH DUTT JOSHI	60	Male	Service	UJVN LIMITED	RiskCategory I	Employer	3,000,000.00

SI(Tbl-I)	SI(Tbl-II)	SI(Tbl-III)	SI(Tbl-IV)	SI(Tbl-Va)	SI(Tbl-Vb)	SI(Tbl-Vc)
0.00	0.00	3,000,000.00	0.00	0.00	0.00	0.00
0.00	0.00	3,000,000.00	0.00	0.00	0.00	0.00
0.00	0.00	3,000,000.00	0.00	0.00	0.00	0.00
0.00	0.00	3,000,000.00	0.00	0.00	0.00	0.00
0.00	0.00	3,000,000.00	0.00	0.00	0.00	0.00

In consequence whereof an amount of ₹15353 is hereby allowed as Refund to the insured.
The Total Sum Insured under the policy now stands decreased to ₹ 547500000 and the Total No. of members covered now are 1825.

Subject otherwise to the terms, exceptions, conditions and limitations of this policy.

**For and on behalf of
United India Insurance Company Limited**

Authorised Signatory

***Note: Wherever SI for Table of benefit is reflecting "0.00", it indicates that particular cover has not been opted.**

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Underwritten By - AVI28999 (DO UW CUM CASHIER)**