



## ALL INDIA UCO BANK PENSIONERS' FEDERATION

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 Affiliated to All India Bank Pensioners' & Retirees' Confederation and All India UCO Bank Officers' Federation  
**4, N S Road, Chartered Bank Building (1<sup>st</sup> Floor), Room No. 172, Kolkata-700001**  
 Mobile no.9830841788 , Phone no. 033-40005572 e-mail Id -s.sarkar7039@yahoo.com  
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Circular No : AIUCBPF/MEDICLAIM/22-23 DATED 25-04-2022.

General Secretary  
 All India UCO Bank Pensioners' Federation  
Kolkata

Dear Sir,

I hereby like to renew / apply for Tailor Made Group Mediciclaim Policy (Excess of Loss) as arranged for between our Federation and United India Insurance Company Limited for the year **2022-23** . I am enclosing cheque/ Pay Order No. \_\_\_\_\_ Dated \_\_\_\_\_ - \_\_\_\_\_ drawn on UCO BANK, \_\_\_\_\_ Branch in favour of **All India UCO Bank Pensioners' Federation** for Sum Assured ( as detailed below):

My personal details are furnished below :-

DETAILS	SELF	SPOUSE
NAME ( in Block Letters)		
EMP NO,(Please put correctly)		
DATE OF BIRTH		
SEX		
DATE OF RETIREMENT		
DATE OF PAYMENT OF PREMIUM		
BANK A/C No.		
NAME OF THE BRANCH OF THE ACCOUNT		
MOBILE NO.of SELF & SPOUSE		
HEALTH CARD NO. OF UCO BANKS' GROUP MEDICLAIM POLICY		
PRESENT RESIDENTIAL ADDRESS		

I have read the terms & conditions of the Federation's Tailor made Insurance Policy with United India Insurance Co. Ltd as stated in the annexure . I agree to the said terms & conditions and hereby undertake to abide by them as mentioned in the annexure. The information details provided above are true & correct to the best of my knowledge.

Date :

Signature of the Member

We confirm that the above named pensioner is a member of our Unit.

Date :

Signature of President / Secretary  
 AIUCBPF..... Unit

**Pl. See annexure next page.**

**A. PREMIUM RATE CHART** ( INCLUSIVE OF ALL TAX & CHARGES)

THRESHOLD LIMIT (UNDER BANKS GROUP MEDICLAIM POLICY)	FAMILY SIZE	SUM INSURED ( PROPOSED POLICY OF ALL INDIA UCO BANK PENSIONERS FEDERATION WITH UNITED INDIA INSURANCE CO.LTD)		
		RS. 3 LACS	RS. 5 LACS	RS. 7 LACS
3, 4,5 & 6 LACS	SINGLE MEMBER	7871	9540	11461
	FAMILY OF 2	13336	16311	19589
7 & 8 LACS	SINGLE MEMBER	6681	8100	9731
	FAMILY OF 2	11319	13854	16641
9 LACS	SINGLE MEMBER	5882	7134	8579
	FAMILY OF 2	9982	12213	14675

( Pl. mark 'Y' in your choice of Premium)

**B. TERMS & CONDITIONS**

The above quote is valid as per the following terms and conditions: Cover Description under Uni Group Health Policy:

1. This Excess of Loss Group Health Policy covers Retired Employees (as per list submitted) of UCO Bank along with their spouses as on renewal date.

2. The Sum Insured is on Floater Basis.

3. Per family Sum Insured is varying- Rs. 3 lacs/ Rs. 5 lacs/ Rs. 7 lacs to be opted by members as per choice

4. The scope and cover of this policy will be identical to the IBA Base policy excluding expenses incurred on Domiciliary and OPD treatment.

5. Cover under this TopUp policy will trigger only after the exhaustion of limits under IBA Base and Top up policy (wherever opted). Page 1 of 2 OA IN SU Divn. No No-IV VKokav UNITED INDIA UNITED INDIA INSURANCE CO. LTD. (A GOVT. OF INDIA UNDERTAKING) Divisional Office No. IV: Govind Bhawan, 2, Brabourne Road, Kolkata-700 001 off: 033 2225-3139 (D. & Fax), 2225-4270/71/72, Website : [www.uic.co.in](http://www.uic.co.in)

6. Mid-term Inclusion of members retiring during the policy period: allowed within 30 Days from date of retirement subject to submission of proof of retirement. Premium will be charged at full for coverage of 6 months and more. Premium will be charged on pro rata basis for coverage of less than 6 months.

**7. Mid-term inclusion of retired members not covered in the expiring policy Or retired member covered under the expiring but not covered at inception: allowed within 90 Days from the date of inception of cover. For all such inclusions, waiting period of 90 days (from date of inclusion) will apply for any probable claim. Premium chargeable at Full.**

8. In case of membership cessation from All India UCO Bank Pensioners' Federation, insured person will continue to be covered under the policy till expiry date, unless he submits a request for midterm deletion. Refund of premium for Mid-term deletion of members (Cessation, Death, Opting out etc.) will be at short period rates.

9. Since the coverage under our Eol is identical to the 1BA policy (excluding expenses incurred on Domiciliary and OPD treatment), the policy will be operative only if the member is also covered under the underlying IBA Base &/or Top up policy (wherever opted).

10. Expenses incurred at PPN hospitals for the procedures as listed under PPN package shall be subject to the rates applicable to PPN package pricing.

11. All premium Payments under the policy shall be accompanied with corresponding List of Lives.

**IMPORTANT**

1. APPLICATION ALONG WITH THE CHEQUE /PAY ORDER SHOULD BE SENT TO RESPECTIVE STATE SECRETARY POSITIVELY BY 10<sup>TH</sup> MAY, 2022
2. THE STATE SECRETARIES WILL FORWARD THE APPLICATION ALONG WITH CHEQUE/PAY ORDER AFTER THOROUGHLY VERIFYING THEIR CORRECTNESS ALONG WITH THE LIST OF APPLICANTS IN LOTS BY SPEED POST/COURIER AT THE FOLLOWING ADDRESS POSITIVELY BY 20 TH MAY, 2022.

SRI SUBRATA SARKAR  
ANDUL CHOWDHURY PARA, P.O. ANDUL MOURI  
DIST. HOWRAH, PIN 711302 (West Bengal)  
(NEAR BLUE BELL NURSING HOME)  
MOBILE NO : 9830841788 ; 9830841700

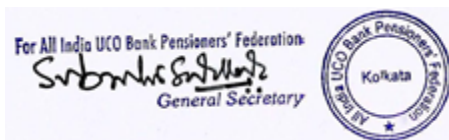
Members residing at West Bengal may submit their applications physically at our Association Office at Standard Chartered Bank Building, 4 Netaji Subhas Road, 172 Number Room, Kolkata -700 001 on Monday, Wednesday and Friday (Between 2 pm and 4 pm) within 10<sup>th</sup> May, 2022.

3. NO FURTHER EXTENSION OF TIME WILL BE ALLOWED BY UIIC.
4. APPLICANTS SHOULD VERIFY THEIR ACCOUNTS AFTER 15 DAYS OF REMITTANCE TO CONFIRM THAT THEIR ACCOUNTS HAVE BEEN DEBITED. If not debited within 15 days of their remittance, Please bring it to notice of General Secretary, AIUCBPF (Mail id: [s.sarkar7039@yahoo.com](mailto:s.sarkar7039@yahoo.com))(whats app number 9830841788).
5. No direct credit to Federation SB Account by applicants (for premium payment) will be allowed this time.

We request all our Central Office Bearers / State General Secretaries to please look into all the points noted above and arrange to take appropriate steps for circulation of this communication so that all our members across the country receive this Circular and can decide to enter into FEDERATION (AIUCBPF) GROUP MEDICAL INSURANCE SCHEME 2022-23 (30.4.2022 to 29.4.2022) and send applications with requisite cheques to us within the stipulated time.

With Best Regards,

Comradely Yours,



(SUBRATA SARKAR)  
General Secretary

Place: Kolkata.

Dated 25.4.2022.

Mob.Nos. 9830841788 / 9830841700