

ANNEXURE**Date:**
Place:To:
Human Resources Wing
Industrial Relations Section
HO: Bengaluru.Through:
Branch Manager,
Branch:_____

Dear Sir,

SUB: Renewal of IBA Group Health Insurance Scheme for retirees for the year 2020-21.

I am interested in joining the Medical Insurance Scheme of IBA for member banks introduced as per 10th Bipartite Settlement/Joint Note dated 25.05.2015 and furnish here below the required information pertaining to me.

Details of Pensioner / Retiree		Details of spouse of Pensioner / Retiree	
Name		Name of spouse	
Emp. No		Date of Birth	
Pension No (If applicable)			
Date of Birth			
Date of Retirement			
Cadre at the time of retirement			
Mobile No			
Email Id			
Bank Account No			
IFSC Code			
Address			

Premium payable for policy year 2020-21:

Retiree Option-I (Without domiciliary for Retired officers):

Sum Insured	Family Floater	Please put tick (√) mark in the Option selected	Single Person	Please put tick (√) mark in the Option selected
4,00,000	32264		19358	
3,00,000	24199		14520	
2,00,000	16133		9680	
1,00,000	10890		6534	

Retiree Option-I (Without domiciliary for Retired Award Staff):

Sum Insured	Family Floater	Please put tick (√) mark in the Option selected	Single Person	Please put tick (√) mark in the Option selected
3,00,000	24199		14520	
2,00,000	16133		9680	
1,00,000	10890		6534	

Retiree Option-II (With domiciliary for Retired officers):

Sum Insured	Family Floater	Please put tick (√) mark in the Option selected	Single Person	Please put tick (√) mark in the Option selected
4,00,000	80067		48040	
3,00,000	60054		36032	
2,00,000	40036		24021	
1,00,000	27024		16215	

Retiree Option-II (With domiciliary for Retired Award Staff):

Sum Insured	Family Floater	Please put tick (✓) mark in the Option selected	Single Person	Please put tick (✓) mark in the Option selected
3,00,000	60054		36032	
2,00,000	40036		24021	
1,00,000	27024		16215	

Super Top Up Policy:

Super Top up policy is only available to Retired Award staff who opt 3 lacs and Retired Officers who opt 4 lacs Sum Insured in Base Retirees Policy.

Award Staff can opt for 1 lac to 4 lacs Sum Insured in Super Top up policy; however officer can choose any sum insured from 1 lac to 5 lacs in Super Top up Policy.

Super Top up Policy Premium (without domiciliary coverage):

For Retired Officers:

Sum Insured	Family Floater	Please put tick (✓) mark in the Option selected	Single Person	Please put tick (✓) mark in the Option selected
5,00,000	6554		3932	
4,00,000	5243		3146	
3,00,000	4194		2517	
2,00,000	3408		2045	
1,00,000	2097		1258	

For Retired Award Staff:

Sum Insured	Family Floater	Please put tick (✓) mark in the Option selected	Single Person	Please put tick (✓) mark in the Option selected
4,00,000	5243		3146	
3,00,000	4194		2517	
2,00,000	3408		2045	
1,00,000	2097		1258	

I hereby undertake to maintain sufficient balance in the accounts specified in Annexure-1 for availing the health insurance policy.

I hereby authorize you to debit the premium amount of _____ ₹ from my SB a/cNo _____ Maintained at.....Branch and IFSC Code is

Yours faithfully

SIGNATURE

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