

Bajaj Allianz General Insurance Company Limited

Please find below the check list for submission of the Reimbursement claims:

DOCUMENTS CHECK LIST –

1. Bajaj Allianz reimbursement claim form.
2. NEFT Form duly completed & signed along with cancelled cheque leaf
3. Copy of first page of pass book if name is not mentioned on cheque leaf
4. Check list for reimbursement claim
5. Bill detail sheet
6. Copy of ID Card / Copy of policy
7. First Consultation Letter
8. Original Discharge Summary / Card
9. Indoor case papers (ICP) attested from Hospital
10. Original pre-numbered Final Hospital Bill giving detailed break up of all expense heads mentioned in the bill
11. Stamped payment receipt for final hospital bill
12. Pharmacy cash receipts/ cash bills along with supporting prescriptions
13. Reports towards investigations done, Pathology/ Radiology/ Cardiology
14. Original paid receipt towards the investigation charges
15. In case of a Cataract Operation, the IOL Sticker & Invoice
16. In case of Implant, Stent sticker alongwith Invoice
17. Claim settlement letter with details of approved & deducted claim amount with reason & policy SI with attested copy of claim documents & bills retained by other insurer (IF CLAIMED FROM OTHER INSURCE CO. IN ADDITION TO BAGIC)



952/954, Appa Saheb Marathe Marg, Near Chaitanya Tower, Prabhadevi, Mumbai- 400 025.

Regd. & Head Office : GE Plaza, Airport Road, Yerawada, Pune 411 006. Tel (+91 20) 66026666. Fax (+91 20) 66026667.

E-mail: customercare@bajajallianz.co.in Website: www.bajajallianz.com CIN No. : U66010PN2000PLC015329