



मानव संसाधन विभाग / HUMAN RESOURCES DEPARTMENT

कर्मचारी कल्याण प्रभाग / STAFF WELFARE DIVISION

प्रधान कार्यालय : मणिपाल / HEAD OFFICE: MANIPAL

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Ref No.0749-0012-HRD-SWD-2017

दिनांक/Date: 03.11.2017

**NOTIFICATION**

**Reg: IBA GROUP HEALTH INSURANCE SCHEME FOR RETIREES-EXTENSION OF LAST DATE FOR RENEWAL/JOINING OF POLICY EXPIRED ON 31.10.2017.**

Attention is drawn to Bank's Circular no. 420-2017-BC-HRD-SWD dated 09.10.2017. It is informed by United India Insurance Co. Ltd. that the last date for renewing/joining the IBA Group Health Insurance Policy for Retirees is extended by one month subject to the following guidelines:

1. Extension is for retirees who could not submit their option on or before 31<sup>st</sup> October, 2017. No Option change is allowed during the extension period.
2. The premium along with the list is to be remitted to United India Insurance Co. Ltd. in one lot only and no piece meal remittance shall be done.
3. The premium payable is the full premium as conveyed earlier.
4. The period of coverage will be from 01/12/2017 till the expiry date of the Group Policy i.e. 31.10.2018.
5. A declaration as per annexure shall be obtained from all retirees who have opted for cover during the above period and shall be sent to UIICo. Ltd.
6. OPTION/Premium remittance without submission of the declaration shall not be accepted.
6. The above guidelines are applicable for Super-Top up policy for Retirees also.
7. All other guidelines issued in respect of renewal of Group Health Insurance Policy for Retirees for 2017-2018 shall continue to apply.

In view of above, all the Retirees/staff-family pensioners who have not exercised their OPTION for renewal/joining the policy cover during October 2017 are advised to contact the Pension disbursing Branch/Home branch for exercising their OPTION now. The last date for exercising the OPTION at the respective Branch is 24.11.2017. The premium payable will be debited to respective Pension SB/ Home Branch SB account on 29.11.2017 at 11.00 AM centrally at HO: HRD: SWD for remittance to UIICo. Ltd.

महा प्रबंधक (मा.सं.) /GENERAL MANAGER (HR)

**ANNEXURE**

**DECLARATION**

I, ..... (Name of the Retiree/Staff-Family Pensioner)  
Employee No..... could not submit the option to renew/ join the IBA Group Health Insurance for Retirees for 2017-2018 on or before 31.10.2017 due to some unavoidable reasons. I hereby opt to join /renew the IBA Group Health Insurance for Retirees for 2017-18 and remit the full premium. I further agree that the period of coverage shall be from 01/12/2017 to 31/10/2018.

**PLACE:**

**DATE:**

**Signature**

**Name:**

**E. No. :**