

Declaration to be obtained from the proposer at the time of seeking enhancement of sum insured during renewals.

From

To

Star Health and Allied Insurance Company Limited

Dear Sirs,

Re : Renewal of policy no _____ ; Request for increase in sum insured.

I have requested for enhancement of sum insured under above cited policy.

I understand and agree that both the acceptance for enhancement and the amount of enhancement will be at the discretion of the Company.

I understand and agree that the quantum of increase in sum insured shall be subject to all waiting periods and exclusions and sub limits if any, as per the policy.

Thanking you,

Yours faithfully

Signature

Place :

Date :