HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

Memo No :1710 /GMC /2026-27 Dated: 17.09.2026

Notice Inviting E-Tender

E-Tender **(BOTH TECHNICAL AND COMMERCIAL)** as detailed below, for **coverage of Mediclaim Plan (Annex. I) of 92 employees of the Bank as per Annex. II** from different bonafide Insurance Companies are invited for usage of the Bank. **Interested Insurance Vendors** must submit the requisite information ***only in ONLINE MODE through the Website*** TENDERWIZARD.COM by 02.10.2026 positively. The Bank reserves the right to itself to cancel any or all the quotations without assigning any reasons thereto. The Bank does not bind itself to accept the lowest rate.

Sl No	Particulars	Price inclusive of taxes, GST etc.
01.	Mediclaim Coverage for 92 Employees of the Bank and their Family Members as per Annexure II and Policy Plan As per Annexure I. SLA to be signed for a period of 01 Year (One Year), (Previous Claim Dump Mentioned in Annexure III)	

Terms and conditions:

1. The ***Technical bid (GST, I.T details etc.)*** along with the **financial bid** with last three (03) years I.T Returns. Vendors having GST under COMPOSITE SCHEME are not eligible to participate in the E-TENDER. ONE PDF FILE TO BE UPLOADED IN SUPPORT OF ALL DOCUMENTS COPIES OF VENDOR'S TECHNICAL DOCUMENTS AND COPY OF PROPOSED RATE AS PER FORMAT. Attach list of Hospitals and Nursing Homes where CASHLESS facility will be available.
2. Delivery of Product
   The delivery & SLA should be completed within 03 (Three) Days with H.O of the Bank as noted above from the date of placement of work order.
3. Terms of Payment:
   100% after SLA as certified by this Bank. The payment will be made from Head Office of this Bank.
4. Taxes, Duties and levies:
   Your quoted price should be inclusive of all taxes, GST,

5 Validity: Quoted rate should be valid for **180 (one hundred eighty)** days from the date of opening of quotation.

The Bank reserves the right to accept and / or reject any or all the quotations without assigning any reason thereto and the Bank's decision shall be binding and final.

Quotations will be opened **on 03.10.2026 at 11.00 A.M** tentatively. Vendor's representation is solicited.

17.09.26

Chief Executive Officer

Memo No :1710 / GMC / 2026-27/1(32) **Dated : 17.09.2026**

Copy forwarded for information and necessary action to:-

1. The Special Officer, Hooghly District Central Co-operative Bank Ltd.
2. The Deputy General Manager I, H.O. Hooghly District Central Co-operative Bank Ltd.
3. The Grade I Officers (All), Hooghly District Central Co-operative Bank Ltd.
4. CBS & System Cell, Head Office, Hooghly District Central Co-operative Bank Ltd.
5. The Secretary, Hooghly Zilla Parishad, Hooghly.
6. Office of the DRCS, Hooghly.
7. The Branch Manager (All), with a request to display this notice on the Notice Board of the Branch.

17.09.26

Chief Executive Officer

CC: Guard File

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

Annex. I

Policy Conditions/Extensions/endorsements
Plan 1

Family Composition
**Maximum stipulated Family Size under the Policy: Family definition: E+5 = :::: Employee + Spouse + 2 Dependent Children + 2 Dependent Parents.

* Children are covered as an exception for mentally retarded children.

*Family Floater: Rs.3 Lac.

*Maximum age of any member in the group (now & future inclusions) : No age Limit

- ✓ **There will be a Corporate Buffer of Rs. 20 Lakhs**

Pre Existing Disease
**Pre - Existing Diseases Notwithstanding anything stated to contrary it is hereby declared and agreed that Clause 1 of 'what is not covered' under 'Coverage' clause (clause 40) of the Policy stands deleted.

First 30 Days Exclusion
**First 30 Days Exclusion (the clause no. 2 under "What is not covered") Waived.

First 1 Year Exclusion
**First year Exclusion (the clause no.3 under " What is not covered") Waived.

Maternity Benefit Cover

**Maternity Benefit covered subject to a maximum of Rs. 25,000/- (Normal) and Rs 50,000/- (Caesarian) without 9 months waiting period. Maternity Benefit(Applicable for First 2 Living children only)

New Born Dependent

**Baby covered from day 1 within family floater sum insured.

Room Rent Condition
**Maximum Room rent (inclusive of boarding and nursing expenses) per day : 2% of SI (Normal) & 2.5% of SI for Intensive Care Unit.

Room Rent Proportion
**All benefits as an inpatient in a hospital attached to room will be restricted to the room which falls within the room rent limits allowed. The enhanced difference in expenses due to opting rooms with higher room rent than what has been allowed will be borne by the insured only. Wherever the room rent based tariff for the other expenses is not available, the payment would be done in the same proportion as per the entitlement of room rent under the policy excluding medicines,consumables and implants medically prescribed by the treating doctor under the policy.

**In case of package treatment where individual bifurcation of room rent, medicines, operation theatre expenses, doctor's consultation charges etc are not available, then the package charges shall be proportionately linked to the entitled room rent of the insured person under the Policy.

Day One Cover for New Joinees
**Day one cover for New Joinee and their dependents as per maximum stipulated family size subject to receipt of premium / maintenance of CD balance & intimation by 15th of succeeding month.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

Declaration Period

**For Employees who are existing members of the group (at inception of the policy) and/ or their dependents who are left out at inception of the Policy , such left out employees and/or left out employee's dependents to be declared within 15 days of the inception of the Policy.

Mid Term Inclusion of Dep

*Mid-term inclusion of Existing Employee's newly acquired dependent (Newly Married Spouse/ New born baby/ newly adopted child), to be declared within 15th of succeeding month subject to maintenance of sufficient CD Balance

In case of Non Compliance of Conditions regarding new joinee , declaration period and mid term the following conditions shall apply

(I) Midterm additions of Employee / Employee's dependents other than Dependent Parents/Dependent Parent In Laws

1)* Risk premium on prorata basis on each inclusion of Employee/ Employee's dependent+ flat administrative charges Rs 500/- on each dependent + Service Tax shall be leviable

*2) nclusion of such midterm dependents shall be subject to Waiting period of 1 month for all claims except for Accidental Claims

(II)Midterm additions of Dependent Parents/Dependent Parent In Laws

1) Risk premium on prorata basis on each inclusion of dependent+ flat administrative charges Rs 2000/- on each dependent + Service Tax shall be leviable

2) Inclusion of such midterm dependents shall be subject to Waiting period of 4 months for all claims except for Accidental Claims

* Risk Premium: Basic GMC Premium based on ITGI Premium Rate Chart for the respective SI based on the age for each dependent irrespective of whether the sum insured is on family floater/ individual basis

*Deletion of employee / Member from Group

(a) In case of deletion of member from the Group the cover will be suspended from the date of separation from the group .Refund of premium on account of deletion will be allowed from the date of separation provided the declaration of the same is submitted to us latest by 15 th of next calendar month failing which refund will be calculated from the date of submission of declaration to ITGI.

(b) No refund Will be allowed to employees / Families who have made claim in the policy

*(c) To block policy coverage for the employee and his family members from the date of relieving / separation. The HR / Group administrator of the company / Organization should immediately inform TPA / Insurance company with date of relieving / separation. (Pls. Note : Along with the said intimation consolidated monthly declaration to be mandatorily provided on time as mentioned in condition 10(a) above as all the adjustments and refunds will be considered only on the basis of the date of receipt of monthly declaration)

Pre Hospitalization

**Pre-Hospitalisation Relevant medical expenses incurred up to 30 days prior to hospitalisation on disease/illness/injury sustained will be part of Hospitalisation Expenses claim.

Post Hospitalization

**Post Hospitalisation Relevant medical expenses incurred during period up to 60 days after Hospitalisation on disease/illness/injury sustained will be part of Hospitalisation Expenses claim.

Domiciliary Hospitalisation
**Domiciliary Hospitalization is not covered under the policy.

Corporate Floater:

***** THERE WILL BE A CORPORATE FLOATER OF Rs .20 Lakhs under this policy. The said corporate buffer with as maximum limit of Rs.2 Lakh (Rupees Two Lakh) only per employee member (employee and their family member will be utilize for medical treatment of the employees or their dependent family members under this scheme,after full utilization of family floater amount of Rs. 3Lakh by any employee or their family members during the year of policy coverage.***

Ambulance Charges
**Ambulance charges are covered up to Rs. 4,000/- per hospitalization.

Claim Intimation
**Intimation of claims : As per the Standard ITGI GMC policy. Non compliance will result in 10% Co-pay.

Submission Of Claim Documents

**Submission of Claim Documents : All Claim documents for reimbursement should be submitted within 30 days from the date of discharge in case of claim for Pre-hospitalisation and Hospitalisation expenses. For Post Hospitalisation expenses, all claim documents should be submitted within 15 days of the completion of Post hospitalisation treatment or Post hospitalisation days limit stated in the Policy whichever is earlier. Non compliance will result in 10% Co-pay.

*For all the reimbursement claims under Network Hospitals there will be an additional co-pay of 10%.

Other Exclusions
**Excluded Hospitals / Medical Practitioners: The policy does not pay for Cost of treatment (both cashless and reimbursement) pertaining to any procedure or treatment undertaken by Insured Person(s) in any of the Hospital(s) or from any of the Medical practitioner(s) specified in the list attached to this Policy. The list of such excluded hospitals / Medical Practitioner(s) is dynamic and may change from time to time. Hence we suggest you to please check our website or contact our call centre / nearest office.

Group Medical Policy Wording

This POLICY is evidence of the contract between YOU and US. The proposal along with any written statement(s), declaration(s) of YOURS for purpose of this POLICY forms part of this contract.

This POLICY witnessed that in consideration of YOUR having paid the premium for the period stated in the schedule or for any further period for which WE may accept the payment for renewal of this policy, WE will insure the Insured Person(s) and accordingly. WE will pay to YOU or to insured person(s) or their legal representatives, as the case may be in respect of events occurring during the period of insurance in the manner and to the extent set-forth in the policy including endorsements provided that all the terms, conditions, provisions, and exceptions of this policy in so far as they relate to anything to be done or complied with by YOU and/or Insured Person(s) have been met.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

The Schedule shall form part of this POLICY and the term 'POLICY' whenever used shall be read as including the Schedule.

Any word or expression to which a specific meaning has been attached in any part of this POLICY or of Schedule shall bear such meaning whenever it may appear.

THE POLICY is based on information which have been given to US about Insured Person(s) pertaining to risk insured under the policy and the truth of this information shall be condition precedent to YOUR or the Insured Person(s) right to recover under this POLICY.

Definition of Words

1. **Any One illness** It means continuous period of illness and it includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment may have been taken.

2. **Cashless facility** means a facility extended by the insurer to the insured where the payments, of the costs o f treatment undergone by the insured in accordance with the policy terms and conditions, are directly made to the network provider by the insurer to the extent pre-authorization approved.

3. **Condition Precedent** shall mean a policy term or condition upon which the Insurer's liability under the policy is conditional upon.

4. **Congenital Anomaly**-- Congenital Anomaly refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.
   a. **Internal Congenital Anomaly:** Anomaly which is not in the visible and accessible parts of the body
   b. **External Congenital Anomaly:** Anomaly which is in the visible and accessible parts of the body

5. **Contribution** is essentially the right of an insurer to call upon other insurers, liable to the same insured, to share the cost of an indemnity claim on a ratable proportion of the Sum Insured.

6. **Domiciliary Hospitalization** means Medical treatment for an illness/ disease/ injury which in the normal course would require care and treatment at a *hospital*, but is actually taken while confined at home under any of the following circumstances:
   a) Condition of the patient is such that he/she is not in a condition to be removed to a hospital or
   b) The patient takes treatment at home on account of non availability of room in hospital.

7. **Emergency Care** means management for a severe illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a *medical practitioner* to prevent death or serious long term impairment of the insured person's health.
8. **Grace Period** means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of *Pre- existing diseases.* Coverage is not available for the period for which no premium is received.

9. **Hospital** means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act **OR** complies with all minimum criteria as under:

--has qualified nursing staff under its employment round the clock;
--has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
--has qualified medical practitioner(s) in charge round the clock;
--has a fully equipped operation theatre of its own where surgical procedures are carried out;
--maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.
***Following are the enactments specified under the Schedule of section 56 of clinical Establishments (Registration and Regulation) Act, 2010 as of October 2013. Please refer to the act for amendments, if any.**

1. The Andhra Pradesh Private Medical Care Establishments (Registration and Regulation) Act, 2002.
2. The Bombay Nursing Homes Registration Act, 1949.
3. The Delhi Nursing Homes Registration Act, 1953.
4. The Madhya Pradesh Upcharya Griha Tatha Rujopchar Sanbabdu Sthapamaue (Ragistrikaran TathaAnugyapan) Adhiniyam, 1973.
5. The Manipur Homes and Clinics Registration Act, 1992.
6. The Nagaland Health Care Establishments Act, 1997.
7. The Orissa Clinical Establishments (Control and Regulation) Act, 1990.
8. The Punjab State Nursing Home Registration Act, 1991.
9. The West Bengal Clinical Establishments Act, 1950.

10. **Hospitalization** means admission in a Hospital for a minimum period of 24 hours Inpatient Care consecutive hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

11. **Illness** means a sickness or pathological condition leading to the impairment of normal physiological function which manifests itself during the Policy Period and requires medical treatment.

12. **Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.

13. **Inpatient Care** means treatment for which the insured person has to stay in a *hospital* for more than 24 hours for a covered event.

14. **Insured Person:** The person named as insured person(s) in the schedule lodged with US by YOU.

15. **Intensive Care Unit** means an identified section, ward or wing of a *hospital* which is under the constant supervision of a dedicated *medical practitioner(s),* and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

16. **Maternity Expenses** shall include

(a) medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization.

(b) expenses towards lawful medical termination of pregnancy during the Policy period.

17. **Medical Advise** Any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.

18. **Medical Practitioner** is a person who holds valid registration from the Medical Council of any State or Medical Council of India or Council of Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license. The registered Medical Practitioner should not be the Insured or close family member.

19. **Network Provider** means hospitals or health care providers enlisted by an insurer or by a TPA and insurer together to provide medical services to an insured on payment by a cashless facility.

20. **Non- Network** means any *hospital,* day care centre or other provider that is not part of the *network.*

21. **Notification of Claim** is the process of notifying a claim to the Insurer or TPA by specifying the timelines as well as the address / telephone number to which it should be notified.

22. **Period of Insurance:** It means the duration of this policy as shown in the Schedule.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

23. **Policy** It means the policy booklet, the Schedule and any applicable endorsement or memoranda. The policy contains details of the extent of cover available to Insured person (s), what is excluded from the cover and the conditions on which the policy is issued.

24. **Portability**-- Portability means transfer by an individual health insurance policy holder (including family cover) of the credit gained by the insured for pre-existing conditions and time bound exclusions if he/she chooses to switch from one insurer to another.

25. **Post Hospitalization** Medical Expenses means medical expenses incurred immediately after the Insured Person is discharged, provided that
    a. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
    b. The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company.

26. **Pre-existing Disease** Any condition, ailment or injury ,or related condition (s) for which you had signs or symptoms, and / or were diagnosed, and / or received medical advice / treatment within 48 months to prior to the first policy issued by the insurer.

27. **Pre-Hospitalization** Medical Expenses means medical expenses incurred immediately before the Insured Person is Hospitalized, provided that
    a. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
    b. The In-patient Hospitalization claim for such Hospitalization is admissible by Us

28. **Proposal** It means any signed proposal by filing up the questionnaires and declarations, written statements and any information in addition thereto supplied to US by YOU.

29. **Qualified Nurse** is a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

30. **Reasonable and Customary Charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.

31. **Renewal** defines the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of all waiting periods.

32. **Schedule** It means latest Schedule issued by US as part of the policy. It provides details of the policy of Insured person(s) which are in force and the level of cover Insured Person(s) have.

33. **Subrogation** shall mean the right o f the insurer to assume the rights o f the insured person to recover expenses paid out under the policy that may be recovered from any other source.

34. **Sum Insured** It means the monetary amount shown against Insured Person.

35. **Surgery/Surgical Procedure** It means manual and/or operative procedure(s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a *medical practitioner.*

36. **Terrorism / Terrorist Incident** Means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or the commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered terrorist activity.

Terrorism shall also include any act, which is verified or recognized by the relevant Government as an act of terrorism".

37. **Third Party Administrator** means any person who is licensed under the IRDA (Third Party Administrators - Health Services) Regulations,2001 by the Authority, and is engaged, for a fee or remuneration by an insurance company, for the purposes of providing health services.

38. **WE/OUR/US:** It means HOOGHLY DISTRICT CENTRAL COOPERATIVE BANK LTD..

39. **YOU/YOUR:** It means the person(s)/the company/the entity named as Insured in the Schedule.

40. **Coverage**

WHAT IS COVERED

If the Insured Person sustains injury or contracts any disease and upon advice of Medical Practitioner, he/she has to incur Hospitalization Expenses then WE will pay for the following in Hospitalization Expenses:

1. Room, Boarding Expenses as provided by the Hospital/Nursing Home.
2. Nursing Expense.
3. Medical Practitioner/Anesthetist, Consultant fees
4. Expense on Anesthesia, Blood, Oxygen, operation Theatre charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, Dialysis, Chemotherapy, Radiotherapy, Cost of pacemaker, Artificial Limbs, Cost of organs and similar expenses.

5 Expenses on Vitamins and Tonics forming part of treatment as certified by the attending Medical Practitioner.

6. WE will also pay for those of above relevant expenses in Domiciliary

WHAT IS NOT COVERED

WE will not pay for

1. Any expense incurred for treatment of any pre-existing condition.
2. Any Expense on Hospitalization /Domiciliary Hospitalization for any diseases other than those stated in Clause 3. Of "What is not covered" during first 30 days of commencement of this Insurance cover. This exclusion shall not however apply if in the opinion of Panel of Medical Practitioners constituted by US, the Insured Person could not have known of the existence of the Disease or any symptoms or complaints thereof at the time of making the proposal for Insurance to US. This exclusion shall not, however, apply in case of the Insured Person having been covered under this Scheme or Group Insurance Scheme with any of Indian Insurance Companies for a continuous period of preceding 12 months without any break.
3. In the first year of operation of Insurance Cover on treatment of disease such as:
   - Cataract, Benign, Prostatic Hyperthropy, Hysterectomy for Mennorrahagia or Fibromyoma
   - Hernia, Hydrocele, Congenital Internal Disease.
   - Fistula in anus, Piles, Sinusitis and related disorders.

   If the above mentioned diseases are pre-existing at the time of proposal, they will not be covered even during subsequent period of renewal too.
4. Circumcision except for disease not excluded here or Injury, Vaccination or Inoculation or change of life or cosmetic or aesthetic treatment of any

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

7. Pre-Hospitalization and Post Hospitalization expenses for 30 and 60 days respectively as defined under the Policy will also be reimbursed along with the aforesaid Hospitalization expenses subject to the overall Sum Insured limit of the Insured Person.

description, plastic surgery except for relating to treatment of injury or illness.

5. Cost of Spectacles and contact lens, hearing aids.

6. Convalescence, General Debility, Run down condition or rest cure, congenital External Disease or defects or anomalies, sterility, venereal disease, intentional self injury and use of Intoxicating drugs /alcohols.

7. Any Expense of any treatment related to Human T.Cell Lymphotropic viruses Types III (11TLB-III) or Lymphadinspathy Associated viruses (LAV) or the Mutant derivatives or Variations Deficiency Syndrome or any syndrome or a Condition of a similar kind referred to as AIDS.

8. Expenses on Diagnostic, X-Ray, or Laboratory examinations unless related to the treatment of sickness or injury falling within ambit of Hospitalization or Domiciliary Hospitalization.

9. (a)Expenses on treatment as a consequence of pregnancy childbirth including caesarean section. (This exclusion will stand deleted where policy is extended to cover Maternity Benefits).
   (b) Voluntary Medical termination of pregnancy during the first 12 (twelve) weeks from the date of conception

. Any Expenses on treatment of Insured person as outpatient in the Hospital.

II. Bronchitis
III. Chronic Nephritis and Nephritic Syndrome
IV. Diarrhoea and all type of Dysenteries including Gastro-enteritis
V. Diabetes Mellitus and Insipidus
VI. Epilepsy
VII. Hypertension
VIII. Influenza, Cough and Cold
IX. All types of Psychiatric or Psychosomatic Disorders
X. Pyrexia of unknown Origin for less than 20 days
XI. Tonsillitis and Upper Respiratory Tract infection including Laryngitis and Pharingitis
XII. Arthritis, Gout and Rheumatism
XIII. Dental Treatment or Surgery

13. Terrorism / Terrorist Incident of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

General Conditions

1. **Conditions Precedent**- Where this Policy requires You/your family member(s) named in the Schedule to do or not to do something, then the complete satisfaction of that requirement by You or someone claiming on Your behalf is a precondition to any obligation We have under this Policy. If You or someone claiming on Your behalf fails to completely satisfy that requirement, then We may refuse to consider Your claim. You/your family member(s) named in the schedule will cooperate with Us at all times

2. **Reasonable Precautions** YOU/Insured Person shall take all reasonable precautions to prevent injury, illness, disease in order to minimize claims.

3. **Notice** YOU/Insured Person will give every notice and communication in writing to our office through which this insurance is affected.

4. **Disclosure to information norm:** The Policy shall be void and all premium paid hereon shall be forfeited to the Company in the event of misrepresentation, non-description or non-disclosure of any material fact.

5. **Changes in Circumstances** YOU must inform US, as soon as reasonably possible of any change in information YOU have provided to US about Insured person(s) which may affect the Insurance cover provided e.g. duty, business, occupation.

6. **Claim Procedure and Requirements**

Notification of Claim: An event which might become a claim under the policy must be reported to US as soon as possible, but not later than 7 days from the date of Hospitalization. A written statement of the claim will be required and a claim form will be provided and the claim must be filed within 30 days from the date of discharge from the Hospital except for in extreme cases of hardship where it is proved to our satisfaction that under the circumstances, in which YOU, the Insured Person or his/her personal representative were placed, it was not possible for any one of YOU to give notice or file claim within the prescribed time limit.

The Insured Person must give all bills, receipts, certificates, information and evidences from a Medical Attendant or otherwise required by US in the manner and form as WE may prescribe. In such claims our representative shall be allowed to carry out examination and obtain information in case of alleged injury or disease requiring Hospitalization if and when WE may reasonably require.

7. **Fraud:** If a claim is fraudulent in any respect or supported by any fraudulent statement or device with or without YOUR knowledge or that of Insured Person, all benefit(s) under this Policy shall be forfeited.

8. **Contribution** is essentially the right of an insurer to call upon other insurers, liable to the same insured, to share the cost of an indemnity claim on a ratable proportion.

9. **Renewal** The renewal defines the terms on which the contract o f insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of all waiting periods

10. **Cancellation** WE may cancel this policy by sending 30(Thirty) days notice by registered post to YOUR last known address. YOU will then be entitled to a pro-rata refund of premium for unexpired period of this policy in respect of such insured person(s) in respect whom no claim has arisen.

YOU may cancel the policy by sending written notice to US under Regd. Post WE will then allow a refund on following scale, except for those Insured Person(s) where claim has been preferred on US under the current policy:

Period of Cover up to	Refund of Annual Premium rate (%)
1 Month	75%
3 Month	50%
6 Month	25%
Exceeding Six Months	NIL

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

11. WE will not be bound to take notice or be affected by any notice of any trust, charge, lien, assignment or other dealings with or relating to this policy. YOUR receipt or receipt of Insured Person shall in all cases be an effective discharge to US.
12. **Arbitration** Should any dispute arise between US and YOU on quantum of Amount payable (liability being admitted by US), such dispute will be referred to Arbitrator to be appointed in accordance with statutory provisions of the country in force at that time. Further, if when any dispute is referable or referred to arbitration, the making of an award by arbitration, shall be a condition precedent to any right of action by YOU against US.

13. **Disclaimer Clause** If WE shall disclaim our liability in any claim and such claim shall not have been made subject matter of suit in a court of law within 12(twelve) months from date of disclaimer, then the claim shall for all purpose be deemed to have been abandoned and shall not thereafter be recoverable under this Policy.

14. No sum payable under this policy shall carry any interest/ penalty.

15. The geographical scope of this policy will be India.

16. **Maternity Expenses Benefit** (Wherever applicable) This is an optional cover, which can be obtained on payment of additional premium for all the Insured Persons under the Policy.

    a. Option for Maternity Benefits has to be exercised at the inception of the policy period and no refund is allowable in case of Insured's cancellation of this option during currency of the policy.

    b. The maximum benefit allowable under this clause will be up to Rs.50,000/- or 20% of the Sum Insured opted by the member of the group whichever is lower.

    c. **Special conditions applicable to Maternity Expenses Benefit Extension**

    1. These benefits are admissible only if the expenses are incurred in Hospital/Nursing Home as in-patients in India.

    2. A waiting period of 9 months is applicable for payment of any claim relating to normal delivery or caesarean section or abdominal operation for extra uterine Pregnancy. The waiting period may be relaxed only in case of delivery, miscarriage or abortion induced by accident or other medical emergency.

    3. Claim in respect of only first two children and/or operations associated therewith will be considered in respect of any one Insured Person covered under the Policy or any renewal thereof. Those Insured Persons who are already having two or more living children will not be eligible for this benefit.

    4. Pre-natal and post-natal expenses are not covered unless admitted in Hospital/Nursing Home and treatment is taken there.

17. **Free Look Period:** The free look period shall be applicable at the inception of the policy and
    i. The insured will be allowed a period of at least 15 days from the date of receipt of the Policy to review the terms and conditions of the Policy and to return the same if not acceptable;

    ii. If the insured has not made any claim during the free look period, the insured shall be entitled to-

    a. A refund of the premium paid less any expenses incurred by the insurer on medical examination of the insured persons and the stamp duty charges or;
    b. Where the risk has already commenced and the option of return of the policy is exercised by the policyholder, a deduction towards the proportionate risk premium for period on cover or
    c. Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.

18. **Alteration of Policy Conditions**: The policy terms and conditions may undergo alteration as per the IRDA Health Regulation. However the same shall be duly notified to you at least three months prior to the date when such alteration or revision comes into effect by registered post at your last declared correspondence address. The timeliness for revision in terms and rates shall be as per the IRDA Health Regulation.

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

19. **Withdrawal of Policy:** This product may be withdrawn with the prior approval of the Authority and information of withdrawal shall be given to you in advance as per the IRDA guidelines with details of options provided by us. If we do not receive your response on the intimation of withdrawal, the existing product shall be withdrawn on the renewal date and you shall have to take a new policy available with us, subject to portability conditions.

20. **Portability**
   a. Portability shall be granted only to the Insured Person/s who is/are presently covered and were continuously covered without any lapses under any other similar health insurance plan with equivalent Deductible with an Indian Non life/Health insurer in the past.
   b. In case portability is granted by us the proviso's regarding the waiting periods specified under Exclusion Nos 1,2 and 3 of the Policy stand modified as under in respect of such insured persons granted with portability.
      i. The waiting periods shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy/Policies; AND
      ii. If the proposed Sum Insured for a proposed Insured Person is more than the Sum Insured applicable under the previous health insurance policy, then the reduced waiting period shall apply only to the extent of the Sum Insured under the previous health insurance policy.
      iii. The reduction in the waiting period specified above shall be only if We have received the database and claim history from the previous Indian insurance company;
      iv. We shall consider only completed years of coverage for waiver of waiting periods. Policy extensions if any sought during or **DAY CARE PROCEDURES**

ENT: **Operation of the ear**	26 Procedures for pterygium
1 Stapedotomy or Stapedectomy	27 Removal of a foreign body from the
2 Myringoplasty (Type -I	lens of the eye
Tympanoplasty)	28 Removal of a foreign body from the
3 Tympanoplasty (closure of an	posterior chamber of the eye
eardrum perforation)	29 Removal of a foreign body from the
4 Reconstruction and other	orbit and eyeball
Procedures of the auditory ossicles	30 Operation of cataract
5 Myringotomy	31 Chalazion removal
6 Removal of a tympanic drain	32 Glaucoma Surgery
7 Mastoidectomy	33 Surgery for Retinal detachment
8 Reconstruction of the middle ear	**Procedures on the skin & subcutaneous**
9 Fenestration of the inner ear	tissues
10 Incision (opening) and destruction	34 Incision of a pilonidal sinus
(elimination) of the inner ear	35 Other incisions of the skin and
ENT: Procedures on the nose & the nasal	subcutaneous tissues
sinuses	36 Surgical wound toilet (wound
11 Excision and destruction of diseased	debridement)
tissue of the nose	37 Local excision or destruction of
12 Procedures on the turbinates (nasal	diseased tissue of the skin and
concha)	subcutanous tissues
13 Nasal sinus aspiration	38 Simple restoration of surface
ENT: **Procedures on the tonsils & adenoids**	continuity of the skin and
14 Transoral incision and drainage of a	subcutanous tissues
pharyngeal abscess	39 Free skin transplantation, donor
15 Tonsillectomy and / or	site
adenoidectomy	40 Free skin transplantation, recipient
16 Excision and destruction of a lingual	site
tonsil	41 Revision of skin plasty
17 Quinsy drainage	42 Restoration and reconstruction of

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

OPTHALMOLOGY: Procedures on the eyes	the skin and subcutanous tissues
18 Incision of tear glands	43 Chemosurgery to the skin
19 Excision and destruction of diseased	44 Excision of Granuloma
tissue of the eyelid	45 Incision and drainage of abscess
20 Procedures on the canthus and	Procedures on the tongue
epicanthus	46 Incision, excision and destruction of
21 Corrective surgery for entropion and	diseased tissue of the tongue
ectropion	47 Partial glossectomy
22 Corrective surgery for	48 Glossectomy
blepharoptosis	49 Reconstruction of the tongue
23 Removal of a foreign body from the	**Procedures on the salivary glands &**
conjunctiva	salivary ducts
24 Removal of a foreign body from the	50 Incision and lancing of a salivary
cornea	
25 Incision of the cornea	
salivary gland and a salivary duct	82 Sclerotherapy
52 Resection of a salivary gland	83 Therapeutic Ascitic Tapping
53 Reconstruction of a salivary gland	84 Endoscopic ligation /banding
and a salivary duct	85 Dilatation of digestive tract
Procedures on the mouth & face	strictures
54 External incision and drainage in the	86 Endoscopic ultrasonography and
region of the mouth, jaw and face	biopsy
55 Incision of the hard and soft palate	Replacement of Gastrostomy tube
56 Excision and destruction of diseased	87 Endoscopic decompression of colon
hard and soft palate	88 Therapeutic ERCP
57 Incision, excision and destruction in	89 Nissen fundoplication for Hiatus
the mouth	Hernia /Gastro esophageal reflux Disease
58 Plastic surgery to the floor of the	90 Endoscopic Gastrostomy
mouth	91 Laparoscopic procedures e.g.
59 Palatoplasty	colecystectomy, appendicectomy
Trauma surgery and orthopaedics	etc.
60 Incision on bone, septic and aseptic	92 Endoscopic Drainage of
61 Closed reduction on fracture,	Pseudopancreatic cyst
luxation or epiphyseolysis with	93 Hernia Repair (Herniotomy /
osteosynthesis	hernioraphhy / hernioplasty)
62 Suture and other Procedures on	Procedures on the female sexual organs
tendons and tendon sheath	94 Incision of the ovary
63 Reduction of dislocation under GA	95 Insufflation of the Fallopian tubes
64 Arthroscopic knee aspiration	96 Dilatation of the cervical canal
65 Aspiration of hematoma	97 Conisation of the uterine cervix
66 Excision of dupuytren's contracture	98 Incision of the uterus (hysterotomy)
67 Carpal tunnel decompression	99 Therapeutic curettage
68 Surgery for ligament tear	100 Culdotomy
69 Surgery for meniscus tear	101 Local excision and destruction of
70 Surgery for hemoarthrosis/	diseased tissue of vagina and Pouch
pyoarthrosis	of Douglas
71 Removal of fracture pins/nails	102 Procedures on Bartholin's glands
72 Removal of metal wire	(cyst)
73 Joint Aspiration - Daignostic /	103 Endoscopic polypectomy

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

therapeutic	104 Myomectomy , hysterscopic or
Procedures on the breast	laparascopic biopsy or removal
74 Incision of the breast	Procedures on the prostate & seminal vesicles
75 Procedures on the nipple	105 Incision of the prostate
76 Excision of breast lump /Fibro	106 Transurethral excision and
adenoma	destruction of prostate tissue
Procedures on the digestive tract	107 Open surgical excision and
77 Incision and excision of tissue in the	
perianal region	
78 Surgical treatment of anal fistulas	
79 Surgical treatment of haemorrhoids	
80 Division of the anal sphincter	
(sphincterotomy)	
81 Ultrasound guided aspirations	
Procedures on the digestive tract	

destruction of prostate tissue	136 Tran urethral resection of bladder
108 Radical prostatovesiculectomy	tumor
109 Incision and excision of	137 Suprapubic cytostomy
periprostatic tissue	Procedures of Respiratory System
Procedures on the scrotum & tunica	138 Brochoscopic treatment of bleeding
vaginalis testis	lesion
110 Incision of the scrotum and tunica	139 Brochoscopic treatment of fistula /
vaginalis testis	stenting
111 Operation on a testicular hydrocele	140 Bronchoalveolar lavage & biopsy
112 Excision and destruction of diseased	141 Direct Laryngoscopy with biopsy
scrotal tissue	142 Therapeutic Pleural Tapping
113 Plastic reconstruction of the	**Procedures of Heart and Blood vessels**
scrotum and tunica vaginalis testis	143 Coronary angiography (CAG)
Procedures on the testes	144 Coronary Angioplasty (PTCA)
114 Incision of the testes	145 Insertion of filter in inferior vena
115 Excision and destruction of diseased	cava
tissue of the testes	146 TIPS procedure for portal
116 Orchidectomy- Unilateral / Bilateral	hypertension
117 Orchidopexy	147 Blood transfusion for recipient
118 Abdominal exploration in	148 Therapeutic Phlebotomy
cryptorchidism	149 Pericardiocentesis
119 Surgical repositioning of an	150 Insertion of gel foam in artery or vein
abdominal testis	151 Carotid angioplasty
120 Reconstruction of the testis	152 Renal angioplasty
121 Implantation, exchange and	153 Varicose vein stripping or ligation
removal of a testicular prosthesis	**OTHER Procedures**
Procedures on the spermatic cord,	154 Radiotherapy for Cancer
epididymis and Ductus Deferans	155 Cancer Chemotherapy
122 Surgical treatment of a varicocele	156 True cut Biopsy
and hydrocele of spermatic cord	157 Endoscopic Foreign Body Removal
123 Excision in the area of the epididymis	158 Vaccination / Inoculation - Post Dog
124 Epididymectomy	bite or Snake bite
125 Reconstruction of the spermatic	159 Endoscopic placement/removal of
cord	stents
126 Reconstruction of the ductus	160 Tumor embolisation
deferens and epididymis	161 Aspiration of an internal abscess
Procedures on the penis	under ultrasound guidance
127 Procedures on the foreskin	

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

128 Local excision and destruction of	
diseased tissue of the penis	
129 Amputation of the penis	
130 Plastic reconstruction of the penis	
Procedures on the urinary system	
131 Cystoscopical removal of stones	
132 Lithotripsy	
133 Haemodialysis	
134 PCNS (Percutaneous nephrostomy)	
135 PCNL (Percutanous Nephro-	
Lithotomy)	

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

Annex. II

Details of Employees & Their Family Members to Be Covered Under the Mediclaim Policy

Annex. II

Details of Employees & Their Family Members to Be Covered Under the Mediclaim Policy

SL NO.	Emp ID	First Name	Last Name	Gender	Relationship	Date of Birth (DD/MM/YY)	Sum Insured	Date Of Joining
1	188	MR. KOUSHICK	CHAKRABORTY	M	EMPLOYEE	23-12-1975	300000	20.06.2000
2	1	MRS. BITHIKA	CHAKRABORTY	F	SPOUSE	03-02-1972		
3	3	MISS. ANWESA	CHAKRABORTY	F	DAUGHTER	22-11-2004		
4	261	MR. MONOJ	MONDAL	M	EMPLOYEE	25-08-1972	300000	31.05.2008
5	1	MRS. BITHIKA	MONDAL	F	SPOUSE	17-07-1977		
6	2	MR. MANDEEP	MONDAL	M	SON	15-11-2018		
7	3	MR. MAHITOSH	MONDAL	M	FATHER	01-01-1949		
8	4	MRS. RENUKA	MONDAL	F	MOTHER	01-01-1952		
9	318	MR. PRITAM	HALDER	M	EMPLOYEE	13-09-1984	300000	01.02.2013
10	1	MRS. PIYALI	HALDER	F	SPOUSE	29-01-1995		
11	2	MISS. MEGHADRITA	HALDER	F	DAUGHTER	18-12-2014		
12	3	MR. GOKUL	HALDER	M	FATHER	04-02-1964		
13	4	MRS. SWARNALATA	HALDER	F	MOTHER	13-02-1965		
14	273	MR. BIBEKANANDA	CHAKRABORTY	M	EMPLOYEE	30-09-1970	300000	02.02.2009
15	1	MRS. MOUSUMI	CHAKRABORTY	F	SPOUSE	15-07-1975		
16	181	MR. UTPAL	MUKHERJEE	M	EMPLOYEE	01-01-1971	3,00,000	22-03-2000
17	1	MRS. SUBHRA	MUKHERJEE	F	SPOUSE	08-12-1981		
18	2	MR. AGNIK	MUKHERJEE	M	SON	21-01-2004		
19	3	MISS. SRIJITA	MUKHERJEE	F	DAUGHTER	29-07-2013		
20	4	MRS. ARATI	MUKHERJEE	F	MOTHER	01-01-1958		
21	213	MR. KAJAL KUMAR	DHARA	M	EMPLOYEE	31-12-1967	3,00,000	03-01-2003
22	1	MRS. DIPALI	DHARA	F	SPOUSE	01-01-1981		
23	3	MRS. SANDHYA	DHARA	F	MOTHER	01-01-1947		
24	277	MR. UTTAM KUMAR	BERA	M	EMPLOYEE	15-08-1982	3,00,000	28-01-2010
25	1	MRS. PAPIYA	PAKRAY	F	SPOUSE	26-02-1986		
26	2	MR. ARIV	BERA	M	SON	21-03-2017		
27	3	MR. JOYDEB	BERA	M	FATHER	01-01-1950		
28	4	MRS. SHILA	BERA	F	MOTHER	17-04-1954		
29	274	MR. MAHESWAR	HANSDA	M	EMPLOYEE	03-02-1980	3,00,000	28-01-2010
30	1	MRS. PANMONI	HANSDA	F	SPOUSE	05-04-1991		
31	2	MR. RITAM	HANSDA	M	SON	19-04-2014		
32	3	MR. RAM	HANSDA	M	FATHER	05-01-1951		
33	4	MRS. RAIMONI	HANSDA	F	MOTHER	01-01-1960		
34	255	BANIBRATA	HALDER	M	EMPLOYEE	25-10-1979	300000	12-02-2008
35	1	LABONI	PAL	F	SPOUSE	08-07-1988		
36	2	LAHARI	HALDER	F	DAUGHTER	10-09-2016		
37	3	ROSHNI	HALDER	F	DAUGHTER	10-09-2016		
38	4	JHARNA	HALDER	F	MOTHER	01-01-1945		
39	304	PRASANTA	JAS	M	EMPLOYEE	17-09-1969	300000	30-09-2011

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

40	1	BASABDATTA	JAS	F	SPOUSE	24-06-1977		
41	2	SOMDATTA	JASH	F	DAUGHTER	02-05-2001		
42	262	SANTANU	BISWAS	M	EMPLOYEE	12-06-1979	300000	25-06-2008
43	1	BARNALI	SARKAR BISWAS	F	SPOUSE	10-09-1986		
44	2	RABINDRA NATH	BISWAS	M	FATHER	04-03-1949		
45	3	SANDHYA	BISWAS	F	MOTHER	25-10-1957		
46	4	RUDRANIL	BISWAS	M	SON	30-09-2023		
47	211	MOUSUMI	KOLEY	F	EMPLOYEE	02-02-1967	300000	07-05-2002
48	303	SUSANTA KUMAR	KHARA	M	EMPLOYEE	18-01-1970	300000	30-09-2011
49	1	KRISHNA	KHANRA	F	SPOUSE	06-01-1982		
50	2	SUDESHNA	KHANRA	F	DAUGHTER	12-02-2003		
51	3	SUTRISHNA	KHANRA	F	DAUGHTER	01-12-2008		
52	344	MADHUMITA	MAJI	F	EMPLOYEE	12-11-1975	300000	01-07-2017
53	2	KRISHANU	MAJI	M	SON	02-01-2005		
54	2	TRISHA	MAJI	F	DAUGHTER	24-04-2001		
55	254	TARAK CHANDRA	ROY	M	EMPLOYEE	18-01-1977	300000	01-01-2008
56	1	MOUSUMI	ROY	F	SPOUSE	15-06-1983		
57	2	MOURITRI	ROY	F	DAUGHTER	14-06-2012		
58	4	TANVITA	ROY		DAUGHTER	01-11-2023		
59	309	DURGAPADA	PANJA	M	EMPLOYEE	01-01-1968	3,00,000	01-02-2012
60	1	TANUSHREE	PANJA	F	SPOUSE	15-08-1981		
61	3	BANANTI	PANJA	F	DAUGHTER	07-12-2007		
62	184	MR. NRIPENDRA NATH	BISWAS	M	EMPLOYEE	20-12-1971	300000	27-03-2000
63	1	MRS. SOMDATTA ROY	BISWAS	F	SPOUSE	03-01-1982		
64	2	SPANDAN	BISWAS	M	SON	04-03-2009		
65	3	DIBYANSHI	BISWAS	F	DAUGHTER	20-02-2018		
66	332	MISS. DEBJANI	SAHA	F	EMPLOYEE	23-02-1984	300000	30-09-2014
67	1	MR. DEBDAS	SAHA	M	FATHER	18-05-1956		
68	2	MRS. MALATI	SAHA	F	MOTHER	17-12-1962		
69	327	SREEJITA	GHOSH	F	EMPLOYEE	30-06-1984	300000	06-12-2013
70	1	SANDIP SANKAR	GHOSH	M	SPOUSE	10-10-1982		
71	2	SANANDITA	GHOSH	F	DAUGHTER	04-09-2013		
72	293	MR. JOY	MUKHERJEE	M	EMPLOYEE	22-02-1972	300000	13-04-2010
73	1	MRS. SMITA	MUKHERJEE	F	SPOUSE	04-11-1983		
74	2	ARANYA	MUKHERJEE	M	SON	15-06-2012		
75	3	MRS. ANGUR	MUKHERJEE	F	MOTHER	01-01-1958		
76	287	MR. TARAK	NATH	M	EMPLOYEE	15-05-1986	300000	03-02-2010
77	1	MRS. MANALI	NATH AOUN	F	SPOUSE	28-07-1988		
78	2	MISS. DEBARCHANA	NATH	F	DAUGHTER	22-07-2013		
79	3	MRS. ANITA	NATH	F	MOTHER	08-05-1960		
80	201	MR. ARUP KUMAR	BISWAS	M	EMPLOYEE	05-09-1975	300000	09-01-2002
81	1	MRS. SOMA	BISWAS	F	SPOUSE	06-04-1980		
82	2	MR PARNAVA	BISWAS	M	SON	29-05-2011		
83	145	MR. PRADYOT KUMAR	BOSE	M	EMPLOYEE	09-01-1968	300000	13-04-1992
84	1	MRS. SOMA	BASU	F	SPOUSE	22-03-1976		

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

85	2	SOUMYADIP	BASU	M	SON	20-07-2001		
86	325	MR. SUFAL	SARKAR	M	EMPLOYEE	13-11-1986	300000	12-03-2013
87	1	MRS. TIYA	SARKAR	F	SPOUSE	03-04-1997		
88	2	MR. ANKIT	SARKAR	M	SON	23-09-2018		
89	3	MR. SUKUMAR	SARKAR	M	FATHER	01-01-1962		
90	4	ADRIKA	SARKAR	F	DAUGHTER	05-11-2023		
91	212	MR. SOURAV	DAS	M	EMPLOYEE	05-01-1977	300000	01-10-2002
92	1	MRS. MITHU	DAS	F	SPOUSE	26-11-1981		
93	2	MR. SPANDAN	DAS	M	SON	07-06-2009		
94	3	MRS. MANIMALA	DAS	F	MOTHER	03-01-1960		
95	289	MR. DIBYENDU	DEY	M	EMPLOYEE	22-05-1973	3,00,000	05-02-2010
96	1	MRS. ISHITA	DEY	F	SPOUSE	22-02-1989		
97	2	MISS. DEBASHMI	DEY	F	DAUGHTER	08-08-2013		
98	3	MRS. MINA	DEY	F	MOTHER	01-01-1950		
99	297	MR. DIBAKAR	SHARMA	M	EMPLOYEE	18-04-1977	3,00,000	13-08-2010
100	1	MRS. SANJEETA	SHARMA CHATTOPADHAYAY	F	SPOUSE	31-03-1993		
101	2	MISS. SRIJA	SHARMA	F	DAUGHTER	10-04-2014		
102	317	MR. BIBEKANANDA	MANDAL	M	EMPLOYEE	15-04-1983	3,00,000	24-12-2012
103	1	MRS. SWAPNA	MANDAL	F	SPOUSE	19-12-1991		
104	2	MISS. BEDANTIKA	MANDAL	F	DAUGHTER	27-01-2017		
105	3	MR. BHARAT CHANDRA	MANDAL	M	FATHER	01-01-1952		
106	4	MRS. KANANDEBI	MANDAL	F	MOTHER	01-01-1963		
107	5	MISS AYANTIKA	MANDAL	F	DAUGHTER	29-06-2022		
108	186	MR. PRATAP CHANDRA	BAGCHI	M	EMPLOYEE	30-01-1973	300000	19.05.2000
109	1	MS.RUPA	BAGCHI	F	SPOUSE	20-08-1982		
110	2	MR. YASH	BAGCHI	M	SON	13-07-2006		
111	330	MR. CHIRANJIB	CHOUDHURY	M	EMPLOYEE	05-02-1981	300000	26.09.2014
112	1	MRS.ANJANA	CHOUDHURY	F	SPOUSE	23-03-1982		
113	302	MR.ASIM KUMAR	DAS	M	EMPLOYEE	15-10-1971	300000	27.01.2011
114	1	MRS.RAMA	DAS	F	SPOUSE	19-05-1982		
115	3	MR.CHIRANJIT	DAS	M	SON	12-06-2004		
116	4	MR.MOHAN LAL	DAS	M	FATHER	01-01-1944		
117	5	MRS.SANDHYA	DAS	F	MOTHER	07-03-1955		
118	338	MR.SUMAN	ROY	M	EMPLOYEE	25-11-1990	300000	24.12.2014
119	1	MRS.BINA	ROY	F	MOTHER	01-01-1972		
120	2	MRS BANANI	GHOSH	F	SPOUSE	20-04-1993		
121	173	ABHIJIT	NAYAK	M	EMPLOYEE	25-02-1972	300000	10-11-1997
122	1	STELLA	NAYAK	F	SPOUSE	29-01-1977	DO	
123	2	NIRMAL KUMAR	NAYAK	M	FATHER	25-12-1938	DO	
124	3	SUCHISMITA	NAYAK	F	DAUGHTER	25-01-2002	DO	
125	256	SUDIPTA NARAYAN	SUR	M	EMPLOYEE	01-10-1976	300000	12-02-2008
126	1	MALLIKA SUR	GHOSH	F	SPOUSE	11-11-1980	DO	
127	2	SHRESTHA	SUR	F	DAUGHTER	02-08-2010	DO	

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

128	3	SHREYA	SUR	F	DAUGHTER	20-01-2017	DO	
129	5	JAYDEBI	SUR	F	MOTHER	26-11-1949	DO	
130	295	GOPAL CHANDRA	BISWAS	M	EMPLOYEE	06-05-1974	300000	07-04-2010
131	1	SAMPA	BISWAS	F	SPOUSE	10-10-1986	DO	
132	2	SAYAN	BISWAS	M	SON	05-11-2011	DO	
133	299	ASHIT	BISWAS	M	EMPLOYEE	17-03-1978	300000	06-08-2010
134	1	MALINA	BISWAS	F	MOTHER	01-01-1967	DO	
135	2	SHYAMALY	BISWAS	F	SPOUSE	05-04-1985	DO	
136	3	ADITRI	BISWAS	F	DAUGHTER	27-12-2020	DO	
137	315	KRISHNA SHAW	DEY	F	EMPLOYEE	03-04-1985	300000	21-12-2012
138	1	SAMBHU	SHAW	M	SPOUSE	22-12-1984	DO	
139	2	SANVI	SHAW	F	DAUGHTER	16-02-2016	DO	
140	3	SAINA	SHAW	F	DAUGHTER	16-02-2016	DO	
141	4	SARATHI	DEY	F	MOTHER	01-01-1965	DO	
142	245	RABIN	DEY	M	EMPLOYEE	29-01-1972	300000	17-10-2007
143	1	RUMA	DEY	F	SPOUSE	09-04-1974	DO	
144	296	ENAMUL	HOQUE	M	EMPLOYEE	10-06-1972		08-04-2010
145	1	DILROSE	BEGAM	F	SPOUSE	14-01-1984		
146	2	IISHA	HOQUE	M	SON	23-10-2013		
147	342	KAUSTUBH	MAJUMDAR	M	EMPLOYEE	31-12-1978		06-04-2015
148	1	SMT MOUSUMI	MAJUMDAR	F	SPOUSE	08-11-1984		
149	2	ADHRIT	MAJUMDAR	M	SON	16-06-2020		
150	3	SMT RITA	MAJUMDER	F	MOTHER	01-01-1952		
151	4	SRI PRITISH KANTI	MAJUMDER	M	FATHER	01-01-1942		
152	313	ABHISHEK	BISWAS	M	EMPLOYEE	22-09-1983		29-11-2012
153	1	BAISAKHI	NAG	F	SPOUSE	03-05-1985		
154	320	JOYDEEP	MITRA	M	EMPLOYEE	01-09-1986		01-02-2013
155	1	ARPITA	GUNIN MITRA	F	SPOUSE	23-12-1986		
156	2	OISHIKI	MITRA	F	DAUGHTER	02-11-2017		
157	3	NIRENDRA NATH	MITRA	M	FATHER	02-01-1948		
158	4	DEBJANI	MITRA	F	MOTHER	17-08-1959		
159	219	PRADIP KUMAR	GHOSH	M	EMPLOYEE	08-04-1970		10-01-2003
160	1	RAJNANDINI	GHOSH	F	SPOUSE	06-10-1977		
161	301	MR. PRANAB	CHOWDHURY	M	EMPLOYEE	22-09-1979	300000	16-09-2010
162	1	MANJU	CHOWDHURY	F	MOTHER	12-07-1954		
163	2	PARITOSH	CHOWDHURY	M	FATHER	18-05-1947		
164	268	MR. RANADEEP	DASS	M	EMPLOYEE	21-01-1978	300000	14-08-2008
165	1	MRS. SUSMITA DASS	GHOSH	F	SPOUSE	20-03-1977		
166	2	MR. RANJIT COOMAR	DOSS	M	FATHER	15-08-1946		
167	3	SUPRITI	DOSS	F	MOTHER	30-10-1952		
168	179	MR. MILAN	KARMAKAR	M	EMPLOYEE	06-09-1968	300000	01-01-1999
169	1	MRS ARUNA	KARMAKAR(BANERJEE)	F	SPOUSE	21-02-1968		
170	324	JHUNU	PATRA	F	EMPLOYEE	11-08-1977	300000	06-03-2013
171	1	DEBASIS	ROY	M	SPOUSE	29-01-1964		
172	2	RAJANYA	ROY	M	SON	29-10-2014		

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

173	3	ASTA	PATRA	F	MOTHER	29-01-1957		
174	4	SUBHALAKSHMI	ROY	F	DAUGHTER	17-12-2006		
175	348	MISS SONIYA	KARAK	F	EMPLOYEE	06-01-1981	300000	09-12-2019
176	1	MRS. JOGMAYA	KARAK	F	MOTHER	12-08-1960		
177	259	MANOJ	DEBNATH	M	EMPLOYEE	13-01-1973	300000	09-05-2008
178	1	UMA SAHA	DEBNATH	F	SPOUSE	11-10-1986		
179	2	OISHI	DEBNATH	F	DAUGHTER	08-09-2016		
180	253	MR. AMITAVA	GHOSH	M	EMPLOYEE	26-10-1976	300000	30-11-2007
181	1	MRS. SAHELI	GHOSH	F	SPOUSE	19-09-1986		
182	2	MISS ASMITA	GHOSH	F	DAUGHTER	31-01-2012		
183	328	MR. BISWAJIT	SEN	M	EMPLOYEE	27-09-1991	300000	24-09-2014
184	1	MRS. ARPITA	SEN	F	SPOUSE	06-11-1991		
185	2	MS AYUSHMITA	SEN	F	DAUGHTER	03-09-2018		
186	177	MR. DIPANKAR	CHAKRABORTY	M	EMPLOYEE	01-01-1968	300000	29-05-1998
187	1	DR. PAPIYA	CHAKRABORTY	F	SPOUSE	05-12-1972		
188	331	MR. GOPAL KRISHNA	BISWAS	M	EMPLOYEE	02-01-1983	300000	29-09-2014
189	1	MRS. CHANDRANI DAS	BISWAS	F	SPOUSE	04-03-1993		
190	2	MR. AYUSH	BISWAS	M	SON	05-10-2016		
191	231	TARUN KANTI	BISWAS	M	EMPLOYEE	05-12-1976	300000	13-04-2005
192	1	RIKTA	BISWAS	F	SPOUSE	25-10-1980		
193	2	TURYA	BISWAS	M	SON	18-11-2005		
194	3	TANBEE	BISWAS	F	DAUGHTER	25-12-2009		
195	4	DULAL CHANDRA	BISWAS	M	FATHER	18-11-1949		
196	5	RENUKA	BISWAS	F	MOTHER	25-12-1979		
197	350	PRIYANKA	KARMAKAR	F	EMPLOYEE	28-11-1989	300000	06-02-2020
198	1	AMIT	BHATTACHARYA	M	SPOUSE	09.01.1985		
199	2	MR. PURNA CHANDRA	KARMAKAR	M	FATHER	07-09-1963		
200	3	MRS. SARASWATI	KARMAKAR	F	MOTHER	01-01-1973		
201	215	SUVAJITE	BANERJEE	M	EMPLOYEE	05-01-1968	300000	09-01-2003
202	2	SUNITA	BANERJEE	F	MOTHER	01-01-1954		
203	129	BHASKAR	MUKHERJEE	M	EMPLOYEE	03-01-1967	300000	18-01-1989
204	1	DEBASRI	MUKHERJEE	F	SPOUSE	03-01-1977		
205	345	ARNAB	BARICK	M	EMPLOYEE	25-07-1994	300000	08-06-2018
206	1	SMT SIKHA	BARICK	F	MOTHER	27-10-1961		
207	2	SMT ARKITA	BARICK	F	SPOUSE	14-10-2003		
208	3	MAHIMA	BARICK	F	DAUGHTER	19-04-2024		
209	286	SAILESWAR	SINHA	M	EMPLOYEE	02-06-1975	300000	03-02-2010
210	1	BARNALI	SINHA	F	SPOUSE	08-02-1981		
211	2	PRAJNA	SINHA	F	DAUGHTER	05-01-2014		
212	3	SHOBHA RANI	SINGHA	F	MOTHER	01-01-1954		
213	279	MR. RAJAT BARAN	SINHA	M	EMPLOYEE	27-03-1976	300000	29-01-2010
214	1	MRS. ARPITA	SINHA	F	SPOUSE	26-04-1986		
215	2	MR RAJANYA	SINHA	M	SON	15-10-2014		
216	3	MR ARANYA	SINHA	M	SON	21-12-2018		
217	4	MRS JHARNA	SINHA	F	MOTHER	06-05-1949		

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

218	322	MR. BIKASH	MALLICK	M	EMPLOYEE	24-11-1988	300000	02-02-2013
219	1	MRS. SUJATA	MALLICK	F	SPOUSE	20-03-1992		
220	2	MR. SHREYANSH	MALLICK	M	SON	10-08-2018		
221	3	MR.BHOLA	MALLICK	M	FATHER	16-07-1965		
222	4	MRS. SABITRI	MALLICK	F	MOTHER	15-10-1972		
223	5	MISS.SHREYA	MALLICK	F	DAUGHTER	23-10-2025		
224	329	MRS APARNA	BAIDYA DAS	F	EMPLOYEE	15-04-1975	300000	26-09-2014
225	1	MR. GOUTAM	DAS	M	SPOUSE	12-01-1967		
226	2	MS.ROOCHISMITA	DAS	F	DAUGHTER	23-11-2011		
227	198	MR. RANAJIT	MITRA	M	EMPLOYEE	23-05-1972	300000	01-11-2001
228	1	MRS. ANANYA	MITRA	F	SPOUSE	09-12-1971		
229	2	MS. PUJARINI	MITRA	F	DAUGHTER	23-06-2004		
230	314	MR. SUMIT	SINHA	M	EMPLOYEE	15-09-1972	300000	06-12-2012
231	1	MRS. MANDIRA	SINHA GANGULY	F	SPOUSE	12-02-1979		
232	2	MR UJAN	SINHA	M	SON	22-09-2011		
233	3	MRS KALYANI	SINHA	F	MOTHER	01-01-1941		
234	251	MR. ABANI	MALIK	M	EMPLOYEE	27-02-1967	300000	14-07-2007
235	1	MRS. PRATIMA	MALIK	F	SPOUSE	22-08-1976		
236	343	MR. CHANCHAL	MITRA	M	EMPLOYEE	19-01-1975	300000	29-07-2015
237	1	INDRA	MITRA	M	SON	24-07-2006		
238	2	MANAB	MITRA	M	SON	09-07-2014		
239	3	SANDHYA RANI	MITRA	F	MOTHER	01-01-1953		
240	323	MRS. JAYITA	BISWAS	F	EMPLOYEE	29-10-1982	300000	11-02-2013
241	326	MRS. RUMA	DAS BAURI	F	EMPLOYEE	16-01-1986	300000	04-12-2013
242	1	MR.SWAPAN	DAS	M	SPOUSE	05-06-1973		
243	2	MOHUL	DAS	M	SON	10-09-2016		
244	3	MR.SATYALAL	BAURI	M	FATHER	01-04-1957		
245	4	MRS. SHEFALI	BAURI	F	MOTHER	06-05-1965		
246	333	MR. ARIJIT	BOSE	M	EMPLOYEE	19-08-1982	300000	29-10-2014
247	1	RIMPA	MAJUMDER	F	WIFE	13-03-1985		
248	2	ADRITA	BOSE	F	DAUGHTER	28.01.2025		
249	3	MRS. URMILA	BOSE	F	MOTHER	27-01-1959		
250	225	MR.PROKASH CHANDRA	DAS	M	EMPLOYEE	01-05-1979	300000	27-04-2004
251	1	MS.RANU DAS	SARKAR	F	SPOUSE	12-11-1987		
252	2	MS. RITOMA	DAS	F	DAUGHTER	15-10-2015		
253	3	MS.ISHA	DAS	F	DAUGHTER	30-09-2018		
254	5	MS.HEMLATA	DAS	F	MOTHER	01-01-1955		
255	336	MR.DIPANKAR	DEBNATH	M	EMPLOYEE	02-06-1985	300000	06-12-2014
256	1	PARAMITA	DASGUPTA	F	SPOUSE	02-11-1985		
257	2	KRISHNAPRAYOSI	DEBNATH	F	DAUGHTER	28-12-2014		
258	3	NARAYAN	DEBNATH	M	FATHER	23-10-1959		
259	4	LALITA	DEBNATH	F	MOTHER	12-07-1963		
260	5	UPADRITI	DEBNATH	F	DAUGHTER	07-12-2022		
261	340	MS. SEFALI MONDAL	ROY	F	EMPLOYEE	06-01-1978	300000	23-03-2015

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

262	1	MR.DHRITI	MONDAL	M	SPOUSE	11-09-1976		
263	2	SAMRIDHA	MONDAL	F	DAUGHTER	19-09-2022		
264	238	PROSANTA	MONDAL	M	EMPLOYEE	28-01-1974	300000	27-12-2006
265	1	PRONATI	MONDAL	F	SPOUSE	01-01-1969		
266	175	SWAPAN	DAS	M	EMPLOYEE	06-12-1974	300000	29-05-1998
267	1	SUMITA	DAS	F	SPOUSE	25-04-1981		
268	3	SUKANYA	DAS	F	DAUGHTER	04-10-2008		
269	4	REKHARANI	DAS	F	MOTHER	01-01-1947		
270	5	SUSHOVAN	DAS	M	SON	09-08-2002		
271	310	HARADHAN	RANA	M	EMPLOYEE	15-02-1969	300000	12-03-2012
272	1	SUJATA	RANA	F	SPOUSE	15-08-1973		
273	2	SUBHARADEEP	RANA	M	SON	11-07-2004		
274	3	SOUMADIP	RANA	M	SON	19-06-1998		
275	347	MR. CHIRANJIT	MAHATO	M	EMPLOYEE	04-05-1991	300000	28-11-2019
276	1	MRS. APARNA	MAHATO	F	SPOUSE	03-10-1993		
277	2	MR. ATMAJA	MAHATO	M	SON	09-09-2018		
278	3	MRS. SULEKHA	MAHATO	F	MOTHER	01-01-1958		
279	271	MR. SATYAJIT	GHOSH	M	EMPLOYEE	04-01-1973	300000	19-12-2008
280	1	MRS. SHRABANTI	GHOSH	F	SPOUSE	02-04-1985		
281	2	MR. SUBHAJIT	GHOSH	M	SON	14-10-2004		
282	3	MS. SUMONA	GHOSH	F	DAUGHTER	15-12-2006		
283	4	MR. SUKUMAR	GHOSH	M	FATHER	01-03-1947		
284	5	MRS. SOVA	GHOSH	F	MOTHER	01-01-1956		
285	185	IFTIKAR	AHAMMAD	M	EMPLOYEE	05-01-1970	300000	15-04-2000
286	1	AZMIRA	KHATUN	F	SPOUSE	19-01-1980		
287	2	AYESHA	SIDDIQUA	F	DAUGHTER	18-05-2004		
288	3	KHADIZA	ABIDA	F	DAUGHTER	05-09-2013		
289	178	SWAPAN	DAS	M	EMPLOYEE	27-10-1967	300000	29-06-1998
290	1	MONDIRA	DAS	F	SPOUSE	07-07-1975		
291	3	SANTOSH KUMAR	DAS	M	FATHER	01-01-1937		
292	4	CHHAYA RANI	DAS	F	MOTHER	01-01-1947		
293	250	BIPLAB KUMAR GHOSH	GHOSH	M	EMPLOYEE	25-01-1969	300000	07-11-2007
294	1	SHAMPA	GHOSH	F	SPOUSE	02-03-1987		
295	2	BIBHAS	GHOSH	M	SON	29-10-2004		
296	3	SANDHYA	GHOSH	F	MOTHER	01-01-1954		
297	190	NARAN	ROUTH	M	EMPLOYEE	03-01-1977	300000	28-09-2000
298	1	RANJU	ROUTH	F	SPOUSE	17-04-1981		
299	3	RIYA	ROUTH	F	DAUGHTER	02-06-2004		
300	243	SANJAY KUMAR	DAS	M	EMPLOYEE	13-01-1968	300000	26-04-2007
301	1	MANASI	DAS	F	SPOUSE	08-01-1979		
302	3	SOUMYAJIT	DAS	M	SON	10-05-2011		
303	4	SUBHOJIT	DAS	M	SON	01-11-1998		
304	180	UJWAL	ADHIKARY	M	EMPLOYEE	23-11-1971	300000	22-04-2000
305	1	SONALI	ADHIKARY	F	SPOUSE	19-11-1978		
306	2	SUBHANEEL	ADHIKARY	M	SON	03-06-2005		

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

307	346	SOURENDRA MOHAN	JANA	M	EMPLOYEE	26-02-1989	300000	22-11-2019
308	1	RITUPARNA	GHARA	F	SPOUSE	29-03-1993		
309	2	KRISHNA	JANA	F	MOTHER	01-01-1965		
310	3	SMRITI KUMAR	JANA	M	FATHER	01-12-1955		
311	4	BHUBANYA	JANA	F	DAUGHTER	24-09-2020		
312	288	BINOY KUMAR	ROY	M	EMPLOYEE	31-12-1982	300000	01-02-2010
313	1	PINKI	ROY	F	SPOUSE	06-05-1987		
314	2	PRATIVA	ROY	F	DAUGHTER	16-09-2010		
315	3	KAMALA	ROY	F	MOTHER	01-01-1943		
316	4	ADBITIYA	ROY	F	DAUGHTER	17-02-2022		
317	349	ARIJIT	MONDAL	M	EMPLOYEE	11-08-1989	300000	06-02-2020
318	1	TANUSHREE	MONDAL	F	MOTHER	12-09-1968		
319	300	BULBUL	MUKHERJEE	M	EMPLOYEE	10-04-1967	300000	31-07-2010
320	1	SHYAMALI	MUKHERJEE	F	SPOUSE	17-09-1973		
321	266	MR. SUDDHASATTVA	MAZUMDER	M	EMPLOYEE	10-09-1984	300000	17-07-2008
322	1	MRS. PRAMITA	BASU MAZUMDER	F	SPOUSE	12-11-1983		
323	2	MST. WRIDDHISATTVA	MAZUMDER	M	SON	26-12-2011		
324	3	MRS. SHYAMALI	MAZUMDER	F	MOTHER	19-08-1962		
325	226	MR. SURYA NARAYAN	DEY	M	EMPLOYEE	23-01-1976	300000	23-07-2004
326	1	MRS. RASHMI	DEY	F	SPOUSE	28-06-1984		
327	2	MST. ROHAN	DEY	M	SON	26-11-2008		
328	3	MST. RONIT	DEY	M	SON	10-02-2013		
329	4	MRS. UMA	DE	F	MOTHER	01-09-1940		
330	282	MR. SANJAY	PATRA	M	EMPLOYEE	06-03-1969	300000	27-01-2010
331	1	MRS. JHUMA	PATRA	F	SPOUSE	04-09-1983		
332	2	MR. SRIJAN	PATRA	M	SON	06-07-2011		
333	3	MRS. MAHARANI	PATRA	F	MOTHER	01-01-1953		
334	214	MR. DUKHIRAM	MANDI	M	EMPLOYEE	10-12-1969	300000	09-01-2003
335	1	MRS.BASANTI	MANDI	F	SPOUSE	30-04-1978		
336	352	MISS. SAHISNUTA	SAMNATA	F	EMPLOYEE	25.01.2001	300000	24.01.2025
337	1	ARUPA	SAMNATA	F	MOTHER	28.12.1975		
338	2	ARNATRI	SAMNATA	F	SISTER	21.11.2005		

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

Annexure III:- CLAIM DUMP FROM 09/10/2024 TO 31/07/2025

GMC Claim data as on 30.08.2026

POLICYNUM	Policy_inception	Policy_Expiry	Group_Name	Patient_name	INSURED_OR_EMPLOYEE_N	EMPLOY	MEMBER_ID_ITGI	INSURED_CITY	AGE	Gender	RELATION	BASICS_SUM_INS
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	ARIV BERA	ARIV BERA	277	H1591366-277-04	HYDERABAD	8	MALE	SON	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	ASIMA MUKHERJEE	ASIMA MUKHERJEE	129	H1591366-129-02	NORTH TWENTY FOUR PARGANAS	79	FEMALE	MOTHER	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	ASIMA MUKHERJEE	ASIMA MUKHERJEE	129	H1591366-129-02	q	79	FEMALE	MOTHER	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	INDRA MITRA	INDRA MITRA	343	H1591366-343-01	HUGLI	19	MALE	SON	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	JYOTSNA GAYEN	JYOTSNA GAYEN	169	H1591366-169-01	KOLKATA	57	FEMALE	SPOUSE	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	KRISHNA KHANRA	KRISHNA KHANRA	303	H1591366-303-01	THIRUVALLUR	43	FEMALE	SPOUSE	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	MADHUMITA MAJI	MADHUMITA MAJI	344	H1591366-344-00	KOLKATA	49	FEMALE	SELF	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	NIRENDRA NATH MITRA	NIRENDRA NATH MITRA	320	H1591366-320-04	NORTH TWENTY FOUR PARGANAS	77	MALE	FATHER	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	PRADIP KUMAR GHOSH	PRADIP KUMAR GHOSH	219	H1591366-219-00	arambagh	55	MALE	SELF	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	RABIN DEY	RABIN DEY	245	H1591366-245-00	KOLKATA	53	MALE	SELF	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	RABIN DEY	RABIN DEY	245	H1591366-245-00	KOLKATA	53	MALE	SELF	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	REKHARANI DAS	REKHARANI DAS	175	H1591366-175-03	NORTH TWENTY FOUR PARGANAS	78	FEMALE	MOTHER	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	REKHARANI DAS	REKHARANI DAS	175	H1591366-175-03	NORTH TWENTY FOUR PARGANAS	78	FEMALE	MOTHER	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	SARASWATI KARMAKAR	SARASWATI KARMAKAR	350	H1591366-350-01	KOLKATA	52	FEMALE	MOTHER	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	SUSMITA DASS GHOSH	SUSMITA DASS GHOSH	268	H1591366-268-01	CHANDANNAGAR	48	FEMALE	SPOUSE	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	SUSMITA DASS GHOSH	SUSMITA DASS GHOSH	268	H1591366-268-01	KOLKATA	48	FEMALE	SPOUSE	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	SUVAJITE BANERJEE	SUVAJITE BANERJEE	215	H1591366-215-00	HUGLI	57	MALE	SELF	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	URMILA BOSE	URMILA BOSE	333	H1591366-333-02	NORTH TWENTY FOUR PARGANAS	66	FEMALE	MOTHER	300000
H1591366	9-Oct-25	8-Oct-26	HOOGHLY DISTRICT	PRITISH KANTIMAJUMDAR	PRITISH KANTIMAJUMDAR	342	H1591366-342-04	HUGLI	80	MALE	FATHER	300000

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

CLAIM_ID	HOSPITAL_NAME	HOSPITAL ADDRESS1	ICD_CODE_LEVEL_1_DESCRIPTION	ROOM_
2025120600065.C1	Rainbow Children's Medicare Pvt. Ltd.	Plot No. 22, Road No. 10, Banjara Hills	Diseases of the respiratory system	AC
2025121200074.C1	Charnock Hospital & Research Centre	RGM-2103, Teghoria (Rajarhat and VIP Road Junction)	Injury, poisoning and certain other consequences of external causes	AC
2026030200267.R1	THE DR DATTA S CLINIC	78, M G M SARANI, CHANDANNAGAR, PIN-712136.	Diseases of the circulatory system	AC
2026011900237.C1	CARE CONCERN HOSPITAL Pvt LTD	87/A, G.T.ROAD WEST HOOGHLY	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	General
2026070800226.C1	MEDICA SUPERSPECIALTY HOSPITAL	127, MUKUNDAPUR, EM BYPASS	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	AC
2025102200136.C1	Sri Ramachandra Medical Centre	No 1 Ramachandra Nagar, Porur	Diseases of the digestive system	AC
2026020700193.C1	MEDICA SUPERSPECIALTY HOSPITAL	127, MUKUNDAPUR, EM BYPASS	Endocrine, nutritional and metabolic diseases	AC
2025112400290.C1	I L S Hospitals, Dum Dum	1, Khudiram Bose Sarani (Mall Road)	Diseases of the respiratory system	AC
2025120800111.R1	ARAMBAGH NETRALAY	TIROL ROAD, HOOGHLY	Diseases of the eye and adnexa	AC
2026071300386.C1	Institute of Neurosciences Kolkata	185/1, AJC Bose Road	Diseases of the circulatory system	AC
2026082200324.A2	Institute of Neurosciences Kolkata	185/1, AJC Bose Road	Diseases of the nervous system	AC
2026032600152.C1	Disha Eye Hospitals Pvt Ltd	88 (63A), Ghosh Para Road, Barrackpore	Diseases of the eye and adnexa	AC
2025110700344.C1	Nehru Memorial Techno Global Hospita	6 Barasat road Barrackpore	Diseases of the digestive system	General
2026032600295.C1	Apollo Gleneagles Hospitals	58, Canal Circular Road	Diseases of the circulatory system	AC
2026020900282.PP1	Manipal Hospital- Salt Lake	IB - 193 Sector -3, Salt Lake	Diseases of the digestive system	AC
2026020900282.C1	Manipal Hospital- Salt Lake	IB - 193 Sector -3, Salt Lake	Diseases of the digestive system	AC
2026061500118.C1	DISHA EYE HOSPITALS PVT LTD	398(260), G. T Road, Sheoraphuli,Hoogly. Pin- 712223	Diseases of the eye and adnexa	General
2026061600161.C1	SARADA MULTISPECIALITY HOSPITAL	ROYAL PARK, KALYANI EXPRESSWAY, BARRACKPORE, KOLKATA - 7	Diseases of the circulatory system	AC
2026081600155.C1	DR. NAYAK NURSING HOME P LTD	Sevoke Road, 2nd Mile Siliguri, West Bengal 734001	Diseases of the digestive system	AC

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com

CLAIM_CATEGO	CLAIM_TYPE	Claim_type	CLAIM_STATUS	AL_REQUESTED_DATE	Total_Amount_Claimed
Hospitalization	Cashless	Hospitalization	Paid	06-Dec-2025	48094.00
Hospitalization	Cashless	Hospitalization	Paid	12-Dec-2025	444163.00
Hospitalization	Reimbursemen	Hospitalization	Paid	02-Mar-2026	45200.00
Hospitalization	Cashless	Hospitalization	Paid	19-Jan-2026	90277.00
Hospitalization	Cashless	Hospitalization	Paid	08-Jul-2026	79464.00
Day care	Cashless	Hospitalization	Paid	22-Oct-2025	91050.00
Hospitalization	Cashless	Hospitalization	Paid	07-Feb-2026	151287.00
Hospitalization	Cashless	Hospitalization	Paid	24-Nov-2025	236916.00
Day care	Reimbursemen	Hospitalization	Paid	08-Dec-2025	70700.00
Hospitalization	Cashless	Hospitalization	Paid	13-Jul-2026	291009.00
Hospitalization	Cashless	Hospitalization	Paid	22-Aug-2026	68577.00
Day care	Cashless	Hospitalization	Paid	26-Mar-2026	53000.00
Hospitalization	Cashless	Hospitalization	Paid	07-Nov-2025	85323.00
Hospitalization	Cashless	Hospitalization	Paid	26-Mar-2026	20000.00
Hospitalization	Cashless Pre-Po	Hospitalization	Paid	09-Feb-2026	33072.00
Hospitalization	Cashless	Hospitalization	Paid	09-Feb-2026	109121.00
Day care	Cashless	Hospitalization	Paid	15-Jun-2026	42000.00
Hospitalization	Cashless	Hospitalization	Paid	16-Jun-2026	99413.00
Hospitalization	Reimbursemen	Hospitalization	Auth - Approved	30-Aug-2026	64325.00
					2122991.00

IFFCO-TOKIO GENERAL INSURANCE CO. LTD. ★ Kolkata - 16 ★
KOLKATA (R) AGENCY (KB)
8th Floor, Saket Building
44 Park Street, Kolkata-16
West Bengal

HOOGHLY DISTRICT CENTRAL CO-OPERATIVE BANK LTD.

Netaji Subhas Road : P.O. Chinsurah
Dist. Hooghly : Pin – 712 101
Phone : (033) 2680 2949 / 9131 / 2408 / 6573 / 9303 (FAX)
E-mail : hooghlydccb@hooghlydccb.com
www.hooghlydccb.com