



|                 |   |                         |
|-----------------|---|-------------------------|
| Customer ID No. | : | 216400222200054000      |
| Policy No       | : | P/181318/01/2022/000355 |
| Corporate Name  | : | THE DIRECTOR TSSS       |
| Name            | : | Ms.ALPHONSA V M         |
| Date of Birth   | : | Age : 37 Years          |
| Gender          | : | F Emp ID : 540          |
| Relationship    | : | Member                  |
| Valid From      | : | 30/04/2021              |
| Office Code     | : | 181318                  |

## Personal and Caring

**Emergency Help Line No. 1800 103 8318**

**E-mail: [support@starhealth.in](mailto:support@starhealth.in) Website: [www.starhealth.in](http://www.starhealth.in)**

**Please quote the Customer ID No. for assistance**

- Immediate intimation to Star through above Telephone number is a must in the case of Hospitalisation.
- This card to be produced at the time of Hospitalization along with the valid photo identity proof.
- This ID card is invalid, if the insurance cover is not in force.
- This card is valid until otherwise cancelled.

**IRDA Regn. No 129**

**Corporate Identity Number U66010TN2005PLC056649**

**Email ID : [info@starhealth.in](mailto:info@starhealth.in)**