# Steps for online payment of Mediclaim premium

Login to SBI online → <u>https://www.onlinesbi.com/</u> And click on State Bank Collect link

<b>?</b> SBI			🔶 Use l Links										
Services	SB Anywhere	FAQ	Corporate Website	Mobile/Bill Payments	State Bank	Collect	EPF	Videos	mCash	Apply SB Account	CASH@SBI	Merger FAQ	हिंदी
			SE	BI never asks for config by such call can be ma	dential infor de only by a	mation s a frauds	such as ter. Ple	PIN and ase do r	d OTP fro tot share	om customers. personal info.			
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#### Select Check Box and Click on Proceed



# Select the State and Type of corporate as mentioned below

<b>9</b> SBI				
State Bank Collect	State Bank MOPS	Pay EPFO		
ou are here: State Ban	k Collect > State Bank	Collect		
State Bank Collect     Reprint Remittance Form     Payment History		State Bank Collect 15-4		
		Select State and Type of Corporate / In	stitution	
-		State of Corporate/Institution *	National Capital Territory of Delhi	
		Type of Corporate/Institution *	Industry	
			Go	
		<ul> <li>Mandatory fields are marked wit</li> <li>State Bank Collect is a unique s maintain their accounts with the</li> </ul>	h an asterisk (*) ervice for paying online to educational institutions, temples, charities and/or any other corporates/institu Bank.	
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## Select Industry name as below

<b>O</b> SBI						
State Bank Collect	State Bank MOPS	Pay EPFO				
You are here: State Bank	<pre>c Collect &gt; <u>State Bank</u></pre>	Collect				
State Bank Collect     Reprint Remittance Fo	rm	State Bank Collect		15-Apr-2017		
Payment History		Select from Industry *				
		Industry Name	STEEL AUTHORITY OF INDIA LTD	<b>T</b>		
			Submit Back			
		Mandatory fields are marked with	an asterisk (*)			
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## Select applicable payment category

<b>•</b> SBI				
State Bank Collect State Bank MOPS	Pay EPFO			
You are here: State Bank Collect > State Bank	Collect			
State Bank Collect	State Bank Collect		15-Apr-2017	
	STEEL AUTHORIT ISPAT BHAVAN, LOD सेल SAIL Provide details of payment	TY OF INDIA LTD DI ROAD, NEW DELHI-110003		
	Select Payment Category *	Select Category	•	
		1		
	<ul> <li>Mandatory fields are marked with an at</li> <li>The payment structure document if available</li> </ul>	Select Category	A 15	
	Date specified(if any) should be in the interview of the specified of t	SAIL Mediclaim (SELF)		
		SAIL Mediclaim (SPOUSE)		
© Copyright OnlineSBI		SAIL Mediclaim (BOTH)	y Statement   Disclosure	

Enter Employee Min number (Note: Please don't prefix zero) and click Submit



A page shall open in which one needs to fill in Mediclaim Center, Contact Numbers etc. Then Proceed for payment .

If payment is successful, an e-receipt page is generated. Take a print-out using the Print button on the receipt page.

You may take the print of the e-receipt at a later date by furnishing the following information by using the Payment History link on the page as shown below.

State Bank Collect State Bank M You are here: State Bank Collect > Payn	OPS Pay EPFO	Lu Lu
State Bank Collect Reprint Remittance Form Payment History	State Bank Collect	15-Apr-2017 [04:5
	Select a date range to view details of previous payments (OR) Date of Birth * (Date provided at the time of making payment) Mobile Number * (Mobile Number provided at the time of making payment) Start Date * End Date * 15/04/2017	Center the INB Reference Number (Starting with 'DU') & DOB/Mobile Number to view a specific payment DU Reference Number *  (As appearing in your pass book/statement in the narration pertaining to the transaction) Date of Birth *  (Date provided at the time of making payment)  (OR) Mobile Number *  (Mobile Number rovided at the time of making payment)
	Enter the text as shown in the image * 1E50A	