



**POLICY SCHEDULE FOR MONEY INSURANCE**

<b>Insured's Name</b>	: NARMADA FIBRES LLP		
<b>Insured's Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: PO92806147	<b>Office Code</b>	: AHMEDNAGAR D.O. 151800 (151800)
<b>Address</b>	: SURVEY NO 203, KAIJ ROAD, AT.P.TQ.DHARUR, BEED  FATEHA BAD ,MAHARASHTRA, 431124	<b>Address</b>	: ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR,414001
<b>Phone No</b>	:	<b>Phone No</b>	: 02412321538 / 02412329761
<b>E-mail/Fax</b>	: madhav.nirmal555@gmail.com, /	<b>E-mail/Fax</b>	: nia.151800@newindia.co.in / 02412341439
<b>PAN No</b>	:	<b>S.Tax Regn. No</b>	: AAACN4165CST178
<b>GSTIN/UIN</b>	: 27AAOFN2993D1ZX / NA	<b>GSTIN</b>	: 27AAACN4165C3ZP
		<b>SAC</b>	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>			
<b>Policy Number</b>	: 15180048210300000026	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 08/11/2021 04:45:54 PM To: 07/11/2022 11:59:59 PM	<b>Dev.Off. level/Broker/Corp. Agent/Web Aggregator</b>	: JAINUINE INSURANCE BROKERS PVT. LTD. - (DA3388757) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623)
<b>Date of Proposal</b>	: 08-Nov-21	<b>Agent/Bancassurance/ Specified Person</b>	:
<b>Prev. Policy no.</b>	:	<b>Phone No</b>	: 02402350377, 9850049400 / NA
<b>Client Type</b>	: Non-Corporate	<b>E-mail/Fax</b>	: kailash@jainuineinsurance.co.in, / /

<b>Premium(₹)</b>	<b>GST(₹)</b>	<b>Total(₹)</b>	<b>Total (₹ in words)</b>	<b>Receipt No. &amp; Date</b>
35000	6300	41300	RUPEES FORTY-ONE THOUSAND THREE HUNDRED ONLY	1518008121000000827 3 - 08/11/21

<b>Money in safe (during and after business hours)</b>	: 10000000
<b>Money in Till</b>	: 10000000

<b>Sl. No.</b>	<b>Location &amp; Address</b>
1	NARMADA FIBRES LLP SURVEY NO 203, KAIJ ROAD, AT.P.TQ.DHARUR, Beed
2	FACTORY, BANKS, RESIDENCE OF ALL PARTNER / PROPRIETOR.

<b>SECTION - 1</b>				
<b>Sl. No.</b>	<b>Sub Sections</b>	<b>Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts</b>	<b>Single Carrying Limits for - Foreign Currency</b>	<b>Single Carrying Limits for - Any other (Specify)</b>
1.	Section 1 A - Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insureds premises from the time the cash is received at the bank by the insured or the authorized employee/ s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the insured to provide for such cash are covered in transit from the premises to the Bank.	10000000	0	0
2.	Section 1 B - Money (other than described in 1A above) in the personal custody of the insured or the authorized employee/s of the insured whilst in direct transit between the premises and the bank or post office and vice versa	10000000	0	0



3.	Section 1 C - Money ( other than described in 1A and 1B above ) collected by and in the personal custody of the insured or the authorized employee/s of the insured whilst in transit to the premises or hank within a period not exceeding 48 hours from the time of collection and vice versa	10000000	0	0
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Limit over the Policy period (Estimated Annual Turnover)	:	500000000
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Optional Covers	Sum Insured (₹)
SRCC Cover	NOT OPTED
Terrorism	NOT OPTED

Risk Details		
1.	Maximum distance over which money will be conveyed	500
2.	Details of employees handling Money	OWNER OR AUTHORIZED EMPLOYEE
3.	How is money carried	BAGS, TRUNKS, SUITCASE WITH
4.	Mode of Transport	VEHICLE PUBLIC OR PR
5.	Details of armed guards or any other protection	No Security Guard
6.	Details of money kept outside business hours	Safe Consists of Wooden / Steel Cupboard.
7.	Is the safe where money is kept, fixed to the walls or floor	No
8.	By whom are the keys held	OWNER OR AUTHORIZED EMPLOYEE
9.	Are all the keys removed outside business hours	No

Special Conditions	:	Section 1 A ₹ 1,00,00,000/- (1.00 cr) Section 1 B ₹ 1,00,00,000/- (1.00 cr) Section 1 C ₹ 1,00,00,000/- (1.00 cr) Section 2 ₹ 1,00,00,000/- (1.00 cr)
Excess	:	1000

This Policy shall subject to MONEY INSURANCE policy clauses attached herewith.

**Premium and GST Details**

	Rate of Tax	Amount in INR
Premium		₹ 35000.00
SGST	9	3150
CGST	9	3150
IGST	0	0

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 08th day of November,2021.

For and on behalf of  
The New India Assurance Company Limited

Date of Issue: 08/11/2021

Duly Constituted Attorney(s)

Mudrank \_\_\_\_\_ Dt. \_\_\_\_\_ consolidated Stamp Fees Paid by Pay Order Number \_\_\_\_\_ vide receipt number \_\_\_\_\_ dt. \_\_\_\_\_. Stamp Duty under the Policy is ₹1/-.



Tax Invoice No : 15180021P0010026

**IRDA Registration Number: 190**