



NEW INDIA BHARAT SOOKSHMA UDYAM SURAKSHA POLICY UIN-IRDAN190RP0011V02202021

1. Insured's Details :

| Insured Name | : | LAMBODAR MOULDERS PRIVATE | E-mail Id/Fax | : | bhandari.insurance@gmail.com, / |
|--------------|---|--|---------------|---|---------------------------------|
| Customer ID | : | PO48073402 | PAN No. | : | AACCL7143A |
| Address | | GUT NO.926,SOMPURI ROAD,BIDKIN TQ PAITHAN,DIST AURANGABAD PAITHAN ,MAHARASHTRA, 431107 | GSTIN/UIN. | : | 27AACCL7143A1ZV / NA |
| Phone No. | : | XXXXXX8899 | | | |

2. **Issuing Office Details :**

| | ı — | |
|-----------------|-----|---|
| Office Name | : | DO II AURANGABAD (160500) |
| Office Code | : | 160500 |
| Address | : | LIC BUILDING PLOT NO 3 JEEVAN SUMAN N 5 CIDCO JALGAON ROAD AURANGABAD |
| | | ,431003 MAHARASHTRA , 431003. |
| Phone No. | : | 02402482688 / 02402480985 |
| E-mail Id/Fax | : | nia.160500@newindia.co.in / 02402486895 |
| S.Tax Regn. No. | : | AAACN4165CST178 |
| GSTIN | : | 27AAACN4165C3ZP |
| SAC | : | 997137 (Other property insurance services) |

3. Policy Details :

| Policy Number | : | 16050011218000001052 |
|---|----|---|
| Period of Insurance | : | From: 27/02/2022 12:00:01 AM To: 26/02/2023 11:59:59 PM |
| Date of Proposal | : | 27-Feb-22 |
| Prev. Policy no. | : | 0 |
| Client Type | : | Non-Corporate |
| Business Source Code | : | |
| Dev.Off level./Broker | : | Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623), |
| Agent/Bancassurance/SPECIFIED PERSON | •• | |
| Phone No. | | 02402350377, 9850049400 / NA |
| E-mail Id/Fax | : | kailash@jainuineinsurance.co.in, / / |

4. **Collection Particulars :**

| Premium | : | 15770 |
|--------------------|----|---------------------------------|
| GST | •• | 2838 |
| Total (₹) | | 18608 |
| Receipt No. & Date | | 16050081210000007470 - 25/02/22 |

5. **Policy Level Covers :**

| Description of Property | : As per Block Details | |
|--------------------------------|------------------------|---------------|
| Location Address with Pin Code | : As per Block Details | |
| Risk Description | : As per Block Details | |
| Sum Insured | : ₹1000000 | |
| Risk Serial No | | IIB Risk Code |

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For redressal of your grievance, if any, you may approach any one of the following offices - 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website



| Risk Serial No | IIB Risk Code |
|----------------|---------------|
| 1 | 2216 |

6. **Block Details :**

Only Stocks on Floater basis is selected: Floater Stocks Sum Insured: <<FL_STANDARD_risk_SI>>

| SI No. | Location Address with Pin Code | Type of Construction - Walls | Type of Construction - Floor | Type of Construction - Roof |
|--------|---|------------------------------|------------------------------|-----------------------------|
| 1 | SHRI VINYAK ENGINEERING,CHITEGAON,I NDUTRIAL AREA 431105 | Pucca | Pucca | Pucca |
| 2 | SHRI VYANKATESH POYMOULD PVT LTD,P NO- 1/11, 1/15, RATNA IND ESTATE, CHITEGAON 431105 | Pucca | Pucca | Pucca |
| 3 | GANPATI MOULDERS PVT LTD,SOMPURI RD, BIDKIN, 431105 | Pucca | Pucca | Pucca |
| 4 | FUTURE TECH PLASTIC-156, WALUJ, MIDC, A,BAD 431105 | Pucca | Pucca | Pucca |

7. Additional Covers:

a) Built-in Covers:

| Cover Name | Opted | or Not | | | | | |
|--|--|-------------|--|--|--|--|--|
| Additions, alterations or extensions | Additions, alterations or extensions Yes | | | | | | |
| Temporary removal of stocks | Ye | es | | | | | |
| Cover for specific content | Ye | es | | | | | |
| Start-up expenses | Yes | | | | | | |
| Professional fees | Yes | | | | | | |
| Removal of debris | Yes | | | | | | |
| Costs compelled by Municipal Regulations | Yes | | | | | | |
| Cover Name | Opted or Not | Sum Insured | | | | | |
| Floater Add-on | YES | 1000000 | | | | | |

b) Add-on Covers:

| Cover Name | Opted or Not | Sum Insured | |
|--------------------|--------------|-------------|--|
| Declaration Add-on | NO | 0 | |

| 8.Sum Ins | sured Summary : | | |
|-----------|--|---|-----------------|
| SI. No. | Asset Description | | Sum Insured (₹) |
| 1. | Building superstructure Sum Insured | : | |
| 2. | Plinth & foundation Sum Insured | : | |
| 3. | Basement & Additional Structures Sum Insured | : | |
| 4. | Furniture, Fixture & Fittings Sum Insured | : | |
| 5. | Plant & Machinery | : | |
| 6. | Other Contents Sum Insured | : | |
| 7. | Stocks held in trust Sum Insured | : | |
| 8. | Stocks in process Sum Insured | : | |
| 9. | Stocks Sum Insured | : | |
| | Total Sum Insured | : | |

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http://newindia.co.in.



| 9. Terror | ism/EQ/STF | =1 : | | | | | | | |
|-------------------------------|------------|------|---------|--------------------|-----|------------|--------------|---|-----|
| Terrorism C | overed | : | Yes | Earthquake Covered | : | Yes | STFI Covered | : | Yes |
| | | | | | | | | | |
| 10. Hyp | othecation | De | tails : | | | | | | |
| SI.No. | | | | Name of | the | Financiers | | | |
| 1 THE SARASWAT CO OP BANK LTD | | | | | | | | | |
| - | | | | | | | | | |

11. Coinsurance Details :

| SI.No. | Coinsurance Type | Company | Office Code | % Share | Premium Share |
|--------|------------------|---------|-------------|---------|---------------|
| 1 | NOT OPTED | | | | |

12. Subjectivities :

The insurance under this policy is subject to

| The insurance ander this policy is sub | Jeee | |
|--|------|--|
| Special Conditions | : | PLASTIC GOODS MFG PLASTIC GOODS MFG ABOVE 15000 BTU BLDG-INCLUDING ACTUAL OWNER OF THIS DIES & MOULD IS VOLTAS LTD WE HAVE TAKEN IN TRUST ONLY. POLICY SUBJECT TO REINSTATEMENT CLAUSE BASIS |
| Special Warranties | : | DIES MOULD, FIXTURES & ITS PARTS ETC HELD IN TRUST FROM VOLTAS LTD |
| Special Exclusion | : | NA |
| Clauses | : | Terrorism Clause Agreed Bank Clause Architects ClauseUpto 5% of the claim amount for reasonable fees of architect, Surveyor,Consulting Engineer Removal of Debris ClauseUpto 2% of the claim of the amount for reasonable costs of Removing debris from the site. |
| Risk Covered | : | As per Risk covered attached |
| Fire Products-Exclusions | : | As per Exclusions attached |

13. A) Compulsory Deductible: ₹ 5000/- for each claim

| B) Terrorism Deductibles: | | | | | | | |
|---------------------------|---|---------------|-----------------------------------|--|--|--|--|
| Nature of Risk | Deductibles (as a % of claim/loss amount) | Minimum Limit | Maximum Limit | | | | |
| Non-Industrial | 1 % of claim amount | ₹ 25,000/- | ₹ 10,00,000/- (Rupees 10 Lacs) | | | | |
| Industrial | 5 % of claim amount | ₹1,00,000/- | ₹ 25,00,000/- (Rupees 25 Lacs) | | | | |

14. Premium Details :

| Premium Head | | Premium Amount (₹) | |
|---------------------------------------|---|---|--|
| Net Premium under the policy | : | 15770 | |
| GST | : | 2838 | |
| Total premium including GST | : | 18608 | |
| Total premium including GST(In words) | : | RUPEES EIGHTEEN THOUSAND SIX HUNDRED EIGHT ONLY | |

| Premium and GST Details | | | | | | |
|-------------------------|-------------|---------------|--|--|--|--|
| | Rate of Tax | Amount in INR | | | | |
| Premium | | ₹ 15770.00 | | | | |
| SGST | 9 | 1419 | | | | |
| CGST | 9 | 1419 | | | | |
| IGST | 0 | 0 | | | | |

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In witness whereof the undersigned being duly authorized by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 25th day of February,2022.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 25/02/2022

Duly Constituted Attorney(s)

Tax Invoice No : 16050021P0014443

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C