



## POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

## UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	ESS DEE INDUSTRIES .			
Insureds Details			Issuing Office Details		
Customer ID	:	PO88553222	Office Code	:	AURANGABAD DO-160400 (160400)
Address	:	A 33/34 MIDC AREA ,WALUJ AURANGABAD	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
		AURANGABAD ,MAHARASHTRA, 431001			
Phone No	:	XXXXX2347	Phone No	:	02402333572 / 02402333361
E-mail/Fax	:	finance1@essdeeind.com, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27ACDPV1267F1ZI / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

		Poli	cy Details		
Policy Number	:	16040046210100000240	Business Source Code		
Period of Insurance	:	From: 31/03/2022 12:00:01 AM To: 30/03/2023 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User	:	Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),
Date of Proposal	:	31-Mar-22	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:	16040046200100000307	Phone No	:	02402350377, 9850049400 / NA
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, / /

Financier(s) Details					
SI. No.	Name of the Financiers				
1		THE SARASWAT CO-OPERATIVE BANK LTD BRANCH-SME PUNE			
Data ma lu una ( <b>3</b> )	007/3)		Tatal (7 in words)	Dessint No. C. Data	
Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date	

900	162	1062	RUPEES ONE THOUSAND SIXTY- TWO ONLY	1604008121000001486 6 - 31/03/22
Location Details	: /	4 33/34 MIDC AREA ,W	ALUJ AURANGABAD	

First Loss Percentage

Details of assets covered under the Policy

: NA

Stocks in	n Trade	
SI. No.	STOCK DETAILS	Sum Insured
1	Stock ( Raw,Semi Finished & Finished Goods )	7072499

Goods held in Trust / Commision				
SI. No.	GOODS HELD DETAILS	Sum Insured		
1	NA	0		

Furniture / Fixture / Fittings				
SI. No.	FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured		
1	FFF	269959		

Office Ed	quipments	
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	Office equipment details	37760

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Coins / Currenc		JRRENCY/CURIOS E		Sum Insured		
1		NA		0		
1		NA .		0		
escription of a						
SI. No.		THER ITEM DETAILS		Sum Insured		
1 P	lant & Machinery W	lith its Spares, Fixtu	ares & Accessories	1611411		
A	dd on Covers		S	um Insured (₹)		
Other Extensio	n			NOT OPTED		
heft Extensior	1			NOT OPTED		
Ferrorism				NOT OPTED		
Special Conditi	ons	: AS PER PO	LICY			
Excess		: 1000				
his Policy sha	l subject to BURGLA	ARY policy clauses	attached herewith.			
Premium and GS	۲ Details					
			Rate of Tax	Amount in INR		
Premium			0	₹ 900.00		
SGST			9	81		
CGST			9	81		
GST			0	0		
set his (their) h on this 31st da	and(s) y of March,2022.					
				For and on behalf of		
				The New India Assurance Company Limite		
Date of Issue: 3	81/03/2022					
	J1  J] Z U Z Z					
				Duly Constituted Attorney(s)		
Mudrank	Dt.	consolidated Sta	mp Fees Paid by Pay Order	Numbervide receipt		
number	dt Si	tamp Duty under t	he Policy is ₹1/			
		Tax Invo	ice No : 16040021E002 <sup>.</sup>	1999		
			atentian Neuralean 400	1		

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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