



NEW INDIA BHARAT SOOKSHMA UDYAM SURAKSHA POLICY
UIN-IRDAN190RP0011V02202021

1. Insured's Details :

| | | | |
|--------------|---|---------------|---------------------------|
| Insured Name | : NAVIN COTEX | E-mail Id/Fax | : NAVINCOTIX@GMAIL.COM, / |
| Customer ID | : PO89121878 | PAN No. | : |
| Address | : SILLIOD DIST AURANGABAD SILLIOD ,MAHARASHTRA, 431112 | GSTIN/UIN. | : 27AAIFN3467E1Z6 / NA |
| Phone No. | : | | |

2. Issuing Office Details :

| | |
|-----------------|--|
| Office Name | : AHMEDNAGAR D.O. 151800 (151800) |
| Office Code | : 151800 |
| Address | : ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR, 414001 MAHARASHTRA, 414001. |
| Phone No. | : 02412321538 / 02412329761 |
| E-mail Id/Fax | : nia.151800@newindia.co.in / 02412341439 |
| S.Tax Regn. No. | : AAACN4165CST178 |
| GSTIN | : 27AAACN4165C3ZP |
| SAC | : 997137 (Other property insurance services) |

3. Policy Details :

| | |
|--------------------------------------|---|
| Policy Number | : 15180011228000000039 |
| Period of Insurance | : From: 22/04/2022 12:00:01 AM To: 21/06/2022 11:59:59 PM |
| Date of Proposal | : 22-Apr-22 |
| Prev. Policy no. | : 0 |
| Client Type | : Non-Corporate |
| Business Source Code | : |
| Dev.Off level./Broker | : 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 | : 10499 |
| GST | : 1890 |
| Total (₹) | : 12390 |
| Receipt No. & Date | : 15180081220000000345 - 13/04/22 |

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 | : ₹ 20000000 |
| Risk Serial No | IIB Risk Code |
| 1 | 4002 |

6. Block Details :



Building, Contents & Stocks or Building Contents & Stocks on Declaration basis is selected:

| Sl No. | Location Address with Pin Code | Building superstructure | Plinth & foundation | Basement & Additional Structures | Furniture, Fixture & Fittings | Plant & Machinery | Other Contents Details | Other Contents Sl | Stocks held in trust | Stocks in process | Stocks |
|--------|--|-------------------------|---------------------|----------------------------------|-------------------------------|-------------------|------------------------|-------------------|----------------------|-------------------|---------|
| 1 | Y N WHERE HOUSE, GOD NO 2, GUT NO 289, BHARADI ROAD, SILLOD.DIST AURANGABAD 431112 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2000000 |

| Sl No. | Location Address with Pin Code | Type of Construction - Walls | Type of Construction - Floor | Type of Construction - Roof |
|--------|--|------------------------------|------------------------------|-----------------------------|
| 1 | Y N WHERE HOUSE, GOD NO 2, GUT NO 289, BHARADI ROAD, SILLOD.DIST AURANGABAD 431112 | Pucca | Pucca | Pucca |

7. Additional Covers:

a) Built-in Covers:

| Cover Name | Opted or Not |
|--|--------------|
| Additions,alterations or extensions | Yes |
| Temporary removal of stocks | Yes |
| Cover for specific content | Yes |
| 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 | NO | 0 |

b) Add-on Covers:

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

8.Sum Insured Summary :

| Sl. No. | Asset Description | Sum Insured (₹) |
|---------|--|-------------------|
| 1. | Building superstructure Sum Insured | 0 |
| 2. | Plinth & foundation Sum Insured | 0 |
| 3. | Basement & Additional Structures Sum Insured | 0 |
| 4. | Furniture, Fixture & Fittings Sum Insured | 0 |
| 5. | Plant & Machinery | 0 |
| 6. | Other Contents Sum Insured | 0 |
| 7. | Stocks held in trust Sum Insured | 0 |
| 8. | Stocks in process Sum Insured | 0 |
| 9. | Stocks Sum Insured | 20,000,000 |
| | Total Sum Insured | 20,000,000 |

9. Terrorism/EQ/STFI :

| | | | | | |
|-------------------|-------|--------------------|-------|--------------|-------|
| Terrorism Covered | : Yes | Earthquake Covered | : Yes | STFI Covered | : Yes |
|-------------------|-------|--------------------|-------|--------------|-------|



| | |
|------------------------------------|-------------------------------|
| 10. Hypothecation Details : | |
| Sl.No. | Name of the Financiers |
| 1 | S.B.I BR SENDHWA |

| | | | | | |
|----------------------------------|-------------------------|----------------|--------------------|----------------|----------------------|
| 11. Coinsurance Details : | | | | | |
| Sl.No. | Coinsurance Type | Company | Office Code | % Share | Premium Share |
| 1 | NOT OPTED | | | | |

| | |
|---|---|
| 12. Subjectivities : | |
| The insurance under this policy is subject to | |
| Special Conditions | : Godowns Stock On stock of Cotton FP Bales, only whilst stored or lying in the godowns. |
| Special Warranties | : NA |
| Special Exclusion | : NA |
| Clauses | : (1) Terrorism Clause (2) Agreed Bank Clause (3) Architects Clause..Upto 5% of the claim amount for reasonable fees of architect, Surveyor,Consulting Engineer (4) Removal of Debris Clause...Upto 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 | : 10499 |
| GST | : 1890 |
| Total premium including GST | : 12390 |
| Total premium including GST(In words) | : RUPEES TWELVE THOUSAND THREE HUNDRED NINETY ONLY |

| | | |
|--------------------------------|--------------------|----------------------|
| Premium and GST Details | | |
| | Rate of Tax | Amount in INR |
| Premium | | ₹ 10499.00 |
| SGST | 9 | 945 |
| CGST | 9 | 945 |
| IGST | 0 | 0 |

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 13th day of April,2022.



For and on behalf of
The New India Assurance Company Limited

Date of Issue: 13/04/2022

Duly Constituted Attorney(s)

Tax Invoice No : 15180022P0000493

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| IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C |
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