



**POLICY SCHEDULE FOR BURGLARY (Floater) INSURANCE**

<b>Insured's Name</b>	: AMBICA COTSEEDS LTD		
<b>Insureds Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: PO92672086	<b>Office Code</b>	: AHMEDNAGAR D.O. 151800 (151800)
<b>Address</b>	: AMBICA COTSEEDS LTD. S/NO. 185/1 THOL ROAD, AT. RANGPURDA, KADI KADI ,GUJARAT, 382715	<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>	: prasadagen@gmail.com, /	<b>E-mail/Fax</b>	: nia.151800@newindia.co.in / 02412341439
<b>PAN No</b>	: AAJCA4155E	<b>S.Tax Regn. No</b>	: AAACN4165CST178
<b>GSTIN/UIN</b>	: 24AAJCA4155E1ZZ / NA	<b>GSTIN</b>	: 27AAACN4165C3ZP
		<b>SAC</b>	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>			
<b>Policy Number</b>	: 15180046210100000154	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 01/11/2021 12:19:41 PM To: 31/10/2022 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>	: 01-Nov-21	<b>Agent/Bancassurance/S pecified 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>Financier(s) Details</b>	
<b>Sl. No.</b>	<b>Name of the Financiers</b>
1	THE KALUPUR COMM. CO.OPP. BANK LTD

<b>Premium(₹)</b>	<b>GST(₹)</b>	<b>Total(₹)</b>	<b>Total (₹ in words)</b>	<b>Receipt No. &amp; Date</b>
8250	1485	9735	RUPEES NINE THOUSAND SEVEN HUNDRED THIRTY-FIVE ONLY	1518008121000000807 0 - 03/11/21

<b>Limit per Location</b>	: 150000000
<b>Sl. No.</b>	<b>Location &amp; Address</b>
1	GODOWN NO. 01 S NO.: 224/2 3 4- 5, C/O, VIVEKANAND IND. THOL ROAD, RANGPURDA, KADI-382715
2	VIVEKANAND IND. S NO. 187/1 C/O, VIVEKANAND IND. THOL ROAD, RANGPURDA, KADI-
3	GODOWN NO. 28 GIDC, AT. DHRUB VILLAGE, MUNDRA, DI.: KACHCHH, GUJARAT-
4	GODOWN NO. 15, GIDC, AT. DHRUB VILLAGE, MUNDRA, DI.: KACHCHH, GUJARAT-
5	GODOWN NO. 15 GIDC, AT. DHRUB VILLAGE,MUNDRA, DI.:KACHCHH, GUJARAT-
6	R.K. LOGISTIC OPP.VINAY YARD,NH4B BEHIND JASAI RAILWAY YARD CHIRLE VILLAGE,URAN, MAHARASHTRA
7	KALUPUR PANCHAYET, MOUZA:KALUPUR, WEST BENGAL.J.L.NO.151,KHATIAN NO. 3038,DAG NO.5377, WEST BENGAL

<b>First Loss Percentage</b>	: NA
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**Details of assets covered under the Policy**

<b>Stocks in Trade</b>		
<b>Sl. No.</b>	<b>STOCK DETAILS</b>	<b>Sum Insured</b>
1	Stock Of Cotton Fp Bales and other products	150000000

<b>Goods held in Trust / Commision</b>		
<b>Sl. No.</b>	<b>GOODS HELD DETAILS</b>	<b>Sum Insured</b>
1	NA	0

<b>Furniture / Fixture / Fittings</b>		
<b>Sl. No.</b>	<b>FURNITURE/FIXTURE/FITTINGS DETAILS</b>	<b>Sum Insured</b>

Policy No. : 15180046210100000154 Document generated by 24768 at 03/11/2021 13:28:13 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

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 <http://newindia.co.in>.



1	NA	0
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Office Equipments		
Sl. No.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	NA	0

Coins / Currency notes		
Sl. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured
1	NA	0

Description of other item		
Sl. No.	OTHER ITEM DETAILS	Sum Insured
1	NA	0

Add on Covers	Sum Insured (₹)
Other Extension	NOT OPTED
Theft Extension	NOT OPTED
Terrorism	NOT OPTED

Special Conditions	:	AS PER POLICY CONDITION
Excess	:	0

This Policy shall subject to BURGLARY policy clauses attached herewith.

**Premium and GST Details**

	Rate of Tax	Amount in INR
Premium		₹ 8250.00
SGST	0	0
CGST	0	0
IGST	18	1485

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 03rd day of November,2021.

For and on behalf of  
The New India Assurance Company Limited

Date of Issue: 03/11/2021

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 : 15180021P0009798

**IRDA Registration Number: 190**