



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

| Insured's Name | : | RAVIKAMAL COTEX | | | | |
|------------------|---|--|----------------|------------------------|--|--|
| Insureds Details | | | | Issuing Office Details | | |
| Customer ID | | PO96745700 | Office Code | : | DO II AURANGABAD (160500) | |
| Address | : | AT. SHIVAJI WARD, HINGANGHAT - 442301 HINGANGHAT ,MAHARASHTRA, 442301 | Address | : | LIC BUILDING PLOT NO 3 JEEVAN SUMAN N 5 CIDCO JALGAON ROAD AURANGABAD ,431003 | |
| Phone No | : | | Phone No | : | 02402482688 / 02402480985 | |
| E-mail/Fax | : | chordiaindustries@gmail.com, / | E-mail/Fax | : | nia.160500@newindia.co.in / 02402486895 | |
| PAN No | : | | S.Tax Regn. No | : | AAACN4165CST178 | |
| GSTIN/UIN | : | 27AAPFR5965E1ZO / NA | GSTIN | : | 27AAACN4165C3ZP | |
| | : | | SAC | : | 997139 (Other non-life insurance services excl RI) | |

| Policy Details | | | | | | | |
|---------------------|---|--|---|---|---|--|--|
| Policy Number | : | 16050046220100000034 | Business Source Code | | | | |
| Period of Insurance | : | From: 29/04/2022 06:07:51 PM To: 28/07/2022 11:59:59 PM | Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User | : | Jainuine Insurance Brokers Pvt.Ltd (SI00028623), | | |
| Date of Proposal | : | 29-Apr-22 | Agent/Bancassurance/S pecified Person | : | | | |
| Prev. Policy no. | : | | 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 | | AXIS BANK LTD WARORA | | | |
| Premium(₹) | GST(₹) | Total(₹) | Total (₹ in words) | Receipt No. & Date | |
| 4998 | 900 | 5899 | RUPEES FIVE THOUSAND FIGHT | 1605008122000000050 | |

| 4998 | 900 | 5899 | RUPEES FIVE THOUSAND EIGHT HUNDRED NINETY-NINE ONLY | 1605008122000000050 0 - 29/04/22 |
|------------------|---|------|--|-------------------------------------|
| Location Details | : godown of Shreeji Warehousing Services Servey No. 102/2, Mauja Borgaon, Tq. Hinganghat, Dist. Wardha | | | |

First Loss Percentage

Details of assets covered under the Policy

: | NA

| Stocks in Trade | | | | | |
|-----------------|---|-------------|--|--|--|
| SI. No. | STOCK DETAILS | Sum Insured | | | |
| 1 | Godown Stock:- | 2000000 | | | |
| | On stock of Tuvar whilst | | | | |
| | stored &/or lying in Godown / & or Warehouse. | | | | |
| | | | | | |

| 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 | NA | 0 |

Policy No. : 16050046220100000034Document generated by 36776 at 29/04/2022 18:14:03 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.



| Office Ec | quipments | | | | | |
|------------------------|--------------------------|------------------------|---|---|--|--|
| SI. No. | OFFICE EQUIPMENT DETAILS | | | Sum Insured | | |
| 1 | | N | 4 | 0 | | |
| Coins / C | Currency notes | | | | | |
| SI. No. | COINS/CURRI | ENCY, | CURIOS DETAILS | Sum Insured | | |
| 1 | | N | 4 | 0 | | |
| Descript | ion of other item | | | | | |
| SI. No. | OTHEI | OTHER ITEM DETAILS Sum | | | | |
| 1 | | N | A 0 | | | |
| | Add on Covers | | | Sum Insured (₹) | | |
| Other Extension | | | | NOT OPTED | | |
| Theft Extension | | | NOT OPTED | | | |
| Terrorism | | | NOT OPTED | | | |
| Special Conditions : L | | | ocation:- In the godown of Shree ervey No. 102/2, Mauja Borgaon, | ji Warehousing Services Tq. Hinganghat, Dist. Wardha | | |
| Excess | | | : 1000 | | | |

This Policy shall subject to BURGLARY policy clauses attached herewith.

| | Rate of Tax | Amount in INR |
|---------|-------------|---------------|
| Premium | | ₹ 4998.00 |
| SGST | 9 | 450 |
| CGST | 9 | 450 |
| 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 29th day of April,2022.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 29/04/2022

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 : 16050022P0001032

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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