



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

:	: PRADEEP FIBERS PRIVATE LIMITED			
Insureds Details		Issuing Office Details		
:	PO97792819	Office Code : BRANCH AURANGABAD AUTO TIE (160401)		
:	THIRD FLOOR, GURUSAHANI NÁGAR, N- 4, CIDCO, AURANGABAD AURANGABAD(MA) ,MAHARASHTRA,	Address	:	THE NEW INDIA ASSURANCE CO. LTD. AUTO TIE-UP CITY BRANCH (160401) "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD,431003
:		Phone No	:	02402485446 / 02402484415
:	pradeepfibers.abad@gmail.com, /	E-mail/Fax	:	nia.160401@newindia.co.in /
:		S.Tax Regn. No	:	AAACN4165CST178
:	27AADCP3567F1ZC / NA	GSTIN	:	27AAACN4165C3ZP
:		SAC	:	997139 (Other non-life insurance services excl RI)
		Insureds Details : PO97792819 : PLOT NO. 100, "MANU PRABHA", THIRD FLOOR, GURUSAHANI NAGAR, N- 4, CIDCO, AURANGABAD AURANGABAD(MA) ,MAHARASHTRA, 431003 :	Insureds Details Office Code : PO97792819 Office Code : PLOT NO. 100, "MANU PRABHA", THIRD FLOOR, GURUSAHANI NAGAR, N- 4, CIDCO, AURANGABAD Address AURANGABAD(MA) ,MAHARASHTRA, 431003 Aurangabab (MA) ,MAHARASHTRA, 431003 Phone No : Phone No E-mail/Fax : S.Tax Regn. No S.Tax Regn. No : 27AADCP3567F1ZC / NA GSTIN	Insureds Details Iss Insureds Details Iss P097792819 Office Code : PLOT NO. 100, "MANU PRABHA", THIRD FLOOR, GURUSAHANI NAGAR, N- 4, CIDCO, AURANGABAD Address : AURANGABAD(MA) ,MAHARASHTRA, 431003 Address : : Phone No : : pradeepfibers.abad@gmail.com, / E-mail/Fax : : 27AADCP3567F1ZC / NA GSTIN :

Policy Details					
Policy Number	Olicy Number : 16040146220100000052 Business Source Code				
Period of Insurance	:	From: 22/06/2022 04:18:57 PM To: 21/09/2022 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	:	22-Jun-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	S.B.I IFB BR AURANGABAD				
Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date	

6248	6248 1124 7373		RUPEES SEVEN THOUSAND THREE HUNDRED SEVENTY-THREE ONLY	1604018122000000079 4 - 22/06/22
Location Details	: Jyotirling Warehouse, Godown No 2/3, Choudhury Compound, Purna Village Bhiwandi, Dist. Thane- 421302			d, Purna Village

		First	Loss	Percentage
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Details of assets covered under the Policy

: NA

Stocks in Trade				
SI. No.	STOCK DETAILS	Sum Insured		
1	On stock of all types of Yarn	2500000		

Goods held in Trust / Commision				
GOODS HELD DETAILS	Sum Insured			
NA	0			

Furniture / Fixture / Fittings					
SI. No.	FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured			
1	NA	0			
Office Equipments					
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured			
1	NA	0			

Policy No. : 16040146220100000052Document generated by 31229 at 22/06/2022 17:57:31 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.



Coins / Currency notes			
SI. No.	COINS/CURRENCY	CURIOS DETAILS	Sum Insured
1 NA		A	0
Description of other iter	m		
SI. No.	OTHER ITE	M DETAILS	Sum Insured
1	Ν	A	0
Add on Co	overs		Sum Insured (₹)
Other Extension NOT OPTED		NOT OPTED	
Theft Extension		NOT OPTED	
Terrorism			NOT OPTED
Special Conditions : J		Jyotirling Warehouse,Godown No 2/3, Choudhury Compound, Near Laxmi Goods ransports, Purna Village Bhiwandi, Dist. Thane- 421302	
Excess	: 1000		

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹ 6248.00
SGST	9	562
CGST	9	562
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 22nd day of June,2022.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 22/06/2022

Duly Constituted Attorney(s)

Mudrank_____Dt.____consolidated Stamp Fees Paid by Pay Order Number_____vide receiptnumber_____dt.____. Stamp Duty under the Policy is ₹1/-.

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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