



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-UF (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	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 Address : Phone No : pradeepfibers.abad@gmail.com, / E-mail/Fax : S.Tax Regn. No : 27AADCP3567F1ZC / NA GSTIN	Insureds Details Iss : PO97792819 Office Code : : PLOT NO. 100, "MANU PRABHA", THIRD FLOOR, GURUSAHANI NAGAR, N- 4, CIDCO, AURANGABAD Address : AURANGABAD(MA) ,MAHARASHTRA, 431003 Aurade Noo : : : pradeepfibers.abad@gmail.com, / E-mail/Fax : : 27AADCP3567F1ZC / NA GSTIN :

Policy Details					
Policy Number	:	16040146220100000054	Business Source Code		
Period of Insurance	:	From: 22/06/2022 04:36:10 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	

3749	676	4426	RUPEES FOUR THOUSAND FOUR HUNDRED TWENTY-SIX ONLY	1604018122000000079 6 - 22/06/22
Location Details		/ithoba Warehouse,Go niwandi - 421302	odown No 2/3/11, Choudhary Compou	ınd,Purna Village

First Loss Percentage

Details of assets covered under the Policy

: NA

Stocks in Trade					
STOCK DETAILS	Sum Insured				
On stock of all types of Yarn	1500000				
-	STOCK DETAILS				

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

Policy No. : 16040146220100000054Document generated by 31229 at 22/06/2022 18:02:39 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/CURREN	ICY/CURIOS DETAILS	Sum Insured	
1		NA	0	
Description of ot	her item			
SI. No.	OTHER I	TEM DETAILS	Sum Insured	
1	NA		0	
Ad	d on Covers		Sum Insured (₹)	
Other Extension			NOT OPTED	
Theft Extension			NOT OPTED	
Terrorism			NOT OPTED	
Special Condition	ns :	Godown No 2/3/11, Chouc	lhary Compound, Near Laxmi Goods transports, Behind oadway Cinema, Purna Village Bhiwandi - 421302	
Excess	:			

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹ 3749.00
SGST	9	338
CGST	9	338
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)

_____Dt.____consolidated Stamp Fees Paid by Pay Order Number______vide receipt _____dt.____. Stamp Duty under the Policy is ₹1/-. Mudrank number____

> **IRDA Registration Number: 190** NIA PAN NUMBER: AAACN4165C

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