



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name		:	PRADEEP FIBERS PRIVATE LIMITED			
Insureds Details			Issuing Office Details			
Customer ID	tomer ID :		PO97792819	Office Code :		BRANCH AURANGABAD AUTO TIE-UP (160401)
Address			PLOT NO. 100, "MANU PRABHA", THIRD FLOOR, GURUSAHANI NAGAR, N- 4, CIDCO, AURANGABAD AURANGABAD(MA) ,MAHARASHTRA, 431003	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		:		Phone No	1:	02402485446 / 02402484415
E-mail/Fax		:	pradeepfibers.abad@gmail.com, /	E-mail/Fax	:	nia.160401@newindia.co.in /
PAN No		$: \]$		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN		$: \]$	27AADCP3567F1ZC / NA	GSTIN	:	27AAACN4165C3ZP
		:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details						
Policy Number : 16040146220100000056 Business Source Code						
Period of Insurance	:	From: 22/06/2022 04:45:36 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
1249	226	1476	RUPEES ONE THOUSAND FOUR HUNDRED SEVENTY-SIX ONLY	1604018122000000079 8 - 22/06/22
Location Details :		B GODOWN, UT NO 188/1/3, PLOT I	NO 9, DEVI KA MALA, OLD AGRA ROA	D, MALEGAON - 423203

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in Trade					
Sl. No.	STOCK DETAILS	Sum Insured			
1	On stock of all types of Yarn	500000			

Goo	Goods held in Trust / Commision						
SI. I	No.	No. GOODS HELD DETAILS Sum Insured					
1	1	NA	0				

Furniture / Fixture / Fittings						
SI. No.	I. No. FURNITURE/FIXTURE/FITTINGS DETAILS Sum Insured					
1	NA	0				

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

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



Coins / Currency	/ notes					
SI. No. COINS/CURRENCY/CURIOS				DETAILS Sum Insured		
1			NA		0	
Description of o	ther item					
SI. No.		HER	ITEM DETAILS	S Sum Insured		
1			NA		0	
A	dd on Covers			9	Sum Insured (₹)	
Other Extension					NOT OPTED	
Theft Extension					NOT OPTED	
Terrorism					NOT OPTED	
Special Condition	nc .	Π:	I B GODOWN,			
Special Collulus	1115	•				
				PLOT NO 9, DEVI KA	A MALA, OLD AGRA ROAD, MALEGAON - 423203	
Excess		:	1000			
This Policy shall	subject to BURGLA	RY p	olicy clauses attac	hed herewith.		
Premium and GST	Details					
	Document			Rate of Tax	Amount in INR	
Premium					₹ 1249.00	
SGST				9	113	
CGST				9	113	
IGST				0	0	
In witness when set his (their) ha	eof the undersigned and(s)	d bei	ng duly authorised	by the Insurers and	on behalf of the Insurers has (have) hereunde	
on this 22nd da	y of June,2022.					
					For and on behalf of	
					i di dila dii bellali di	

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 receipt

 number______dt.____. Stamp Duty under the Policy is ₹1/-.

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C