



MARINE CARGO OPEN POLICY

Preamble

WHEREAS the ASSURED named in the schedule hereto have represented to THE NEW INDIA ASSURANCE COMPANY LIMITED (hereinafter called company) that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clauses, Endorsement, Conditions and Warranties contained herein/in the schedule.

Insured Details			Issuing Office Details			
Insured Name	:	OM COTTON .				
Customer ID	:	PO91053442	Office Code	:	AHMEDNAGAR D.O. 151800 (151800)	
Address	:	137/2,WAGHRUD KHURD,POST PIMPRI, TQ DHARANGAON, DIST JALGAON DHARANGAON(JALGAON) .MAHARASHTRA. 425105	Address	:	ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR,414001	
Phone No	:		Phone No	:	02412321538 / 02412329761	
E-mail/Fax	:	kailash@jainuineinsurance.co.in, /	E-mail/Fax	:	nia.151800@newindia.co.in/024123414 39	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27CHVPP0668R1Z2 / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997135 (Marine, aviation and other transport insurance srvc)	

Policy Details			Business Source Code			
Policy Number	:	15180021210200000287	Aggregator PVT. LTD. JAINUINE		JAINUINE INSURANCE BROKERS PVT. LTD (DA3388757) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623)	
Period of Insurance	:	From: 23/12/2021 03:41:25 PM To: 22/12/2022 11:59:59 PM	Agent/Bancassurance/Spe cified Person/CPSC User	:		
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA	
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //	

Co	-Insurance Details			
Incoming/Outgoing	Company	Office Code	% of Share	Share
OUT	CHOLAMANDALAM MS GENERAL INSURANCE CO. LTD.	210301_PUNE BRANCH - 1	49	4410
OUT	NEW INDIA ASSURANCE CO. LTD.	AHMEDNAGAR D.O. 151800	51	4590

	Premium D	Details			
Premium	GST	Stamp Duty	Total Premium(₹)	Rupees (in words)	Receipt No and Date
9000	1620	1	10621	RUPEES TEN THOUSAND SIX HUNDRED TWENTY- ONE ONLY	15180081210000010650 - 23/12/21

Journey Details		
Journey From	Journey To	Transport Mode
Anywhere in India TO	Anywhere in India	Rail/Road

Total Sum Insured (₹)	: Risk 1 :: 3000000
Basis of valuation + % Extra for Cargo Sum Insured	: Risk 1 :: C + 10
Commodity description	: Risk 1 :: COTTON FP BALES
Packaging description	: Risk 1 :: Standard and Costumery

Policy No. : 15180021210200000287Document generated by 24768 at 23/12/2021 16:40:52 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on https://www.newindia.co.in/portal/policyFeedbackGen. 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.



Single Carrying Limit (₹)	: Risk 1 :: 7000000
Limit per any one Vessel (₹)	: Risk 1 :: 0
Limit per any one Aircraft (₹)	: Risk 1 :: 0
Limit per Registered Post (₹)	: Risk 1 :: 0
Limit per location (₹)	: Risk 1 :: 3000000
Transit By	: Risk 1 :: Rail/Road
Place of Storage	: Risk 1 :: NA
Days of Storage	: Risk 1 :: NA
Risk Covered	: Risk 1 :: ITC-A, SRCC,
Excess	: Excess Applicable on - Claim Amount, Excess(%) Claim Amount5%

Terms of Insurance

Subject to Open Policy Clause and the following clauses written and attached hereunder, current on date of sailing or dispatch and/or otherwise stated. This Insurance is subject to Important notice, conditions and warranties attached herewith. Also this contract is subject to such regulations as in force at the time of risk on each dispatch/shipment attaches hereunder.

The Declaration should be furnished, in case of imports within 15 days from the date of the shipment or immidiately on reciept of shipping documents or before arrival of ship, whichever is earlier, and in case of exports immidiately on shipment.

This insurance is to remain in force for a period of 12 months i.e. from 23/12/2021 03:41:25 PM to 22/12/2022 11:59:59 PM unless the Sum Insured is previously exhausted by declaration/certificates.

- 1) Inland Transit (Rail or Road) Clause A (2010) 2) Subject to Duty Insurance Clause
- Subject to Increase Value Clause
- Strikes Riots And Civil Commotions Clause (Inland Transit Not In Conjunction With Ocean Going Voyage) Machinery Subject to Clause : Institute Replacement Clause -01.01.34 Subject To Sellers Interest Clause 4)
- 5

6) Subject To Selfers Interest Clause
7) Limit Per Location Clause: Not withstanding anything to the contrary contained in this contract, underwriters liability in respect of any one accident or series of accidents arising from the same event in any one location shall not exceed the Limit Per Location amount stated in the policy/open cover.

8) Communicable Disease Exclusion Clause (Cargo) JC2020-011

9) Institute Radioactive Contamination Exclusion Clause (1.10.1990)

- 10) Institute Radioactive Contamination Chemical, Biological Biochemical and Electromagnetic Weapons Excl. Clause 10/11/2003 CL 370
- 11) Termination of Transit Clause JC2009/056 01/01/2009
- 12) Subject to Important Notice Clause
 13) Subject to Sanctions, Limitation & Exclusion Clause JC 2010/014(11.08.2010)
 14) Subject to Private Carriers Warranty
- 15) Subject to closed vehicle Warranty
- 16) Cargo Termination of Transit (Storage) Clause
 17) Special Condition: All risk + SRCC+ ITC A + CIF- 10 %.

Coverage for Loading and Unloading

Each and every consignment should be declared through email on a Monthly Basis. In

Survey & Claim Settlement By

In Case of IMPORTS/DOMESTICS

Survey : In the event of loss or damage which may result in a claim under this Insurance immediate notice must be given to the Policy Issuing Office or nearest Branch/Divisional Office.

Nearest New India Assurance Company's Office or The Policy Issuing Office

Claims Payable By: Deliev lesuing Office

Policy issuing Office		
	Rate of Tax	Amount in INR
Taxable Value		₹9001
SGST	9	810
CGST	9	810
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 23rd day of December,2021

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For and on behalf of The New India Assurance Company Limited

Duly Constituted Attorney(s)

To intimate a Marine Cargo Claim, please visit the url https://newindia.co.in/portal/intimateClaim

Tax Invoice No : 15180021P0013015

IRDA Registration Number: 190

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