



MARINE CARGO SPECIFIC VOYAGE 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	:	SHREE KALKA COTEX				
Customer ID	:	PO94049930	Office Code	:	AHMEDNAGAR D.O. 151800 (151800)	
Address	:	AT. PAHUR ROAD, SHENDURNI, DIST. JALGAON 424204 JALGAON ,MAHARASHTRA, 424204	Address	:	ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR,414001	
Phone No	:	XXXXXX0053	Phone No	:	02412321538 / 02412329761	
E-mail/Fax	:	mg_kalka@yahoo.com, /	E-mail/Fax	:	nia.151800@newindia.co.in/024123414 39	
PAN No	:	AAYFS9248N	S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27AAYFS9248N1ZV / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997135 (Marine, aviation and other transport insurance srvc)	

Policy Details			Bu	Business Source Code			
Policy Number	:	15180021210100000042	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User		JAINUINE INSURANCE BROKERS PVT. LTD (DA3388757) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623)		
Date of Issue	:	31/12/2021 05:43:05 PM	Agent/Bancassurance/Spe cified Person	:			
Date of Proposal	:	31-Dec-21	Phone No	:	02402350377, 9850049400 / NA		
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //		

Premium Details Premium GST Stamp Duty Total (₹) Rupees (in words) Receipt No. & Date RUPEES ONE THOUSAND SIXTY-THREE ONLY 100000892112007 900 162 1 1063 38782 - 31/12/21

Journey Details			
Journey From	Journey To	Transport Mode	
NAIGAON, Maharashtra 431709	VILL- DUDHOLA, DIST- PALWAL, Haryana 121102.	Road	
Cargo Sum Insured (₹)	: 1123423		
Cargo Sum Insured in Foreign Currency	: NA		
Lorry Receipt(LR) Number	: S81 Date : 31/12/2021		
Marks and nos	: TRUCK NO. RJ-02-GB-5835		
Basis of valuation + % Extra for Commodity	: CIF + 10		
Transit Type	: Road		
Consignment Invoice No & Date	: S81 & 31-Dec-2021		
Commodity description	: Seed and Bardan		
Packaging description	: Standard and Customary		
Risk Covered	: ITC-A SRCC		
Excess	: .5 % of Claim		

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 websit

http://newindia.co.in.



Terms of Insurance-

As per following clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated. This Insurance is subject to Important notice, conditions and warranties attached. Also this contract is subject to such regulations as in force at the time the risk hereunder.

- Inland Transit (Rail or Road) Clause A (2010)
 Strikes Riots And Civil Commotions Clause (Inland Transit Not In Conjunction With Ocean Going Voyage)- 2010
 Machinery Subject to Clause : Institute Replacement Clause -01.01.34
 Subject to Increase Value Clause

- Subject to Duty Insurance Clause
 Communicable Disease Exclusion Clause (Cargo) JC2020-011
- Institute Radioactive Contamination Exclusion Clause (1.10.1990)
- 8) Institute Radioactive Contamination Chemical, Biological Biochemical and Electromagnetic Weapons Excl. Clause
- 10/11/2003 CL 370

- 9) Termination of Transit Clause JC2009/056 01/01/2009 10) Subject to Important Notice Clause 11) Subject to Sanctions, Limitation & Exclusion Clause JC 2010/014(11.08.2010) 12) Cargo Termination of Transit (Storage) Clause
- 13) Special Condition: Cover Risk:
- All risk + SRCC+ ITC A + Invoice + 10%
- Coverage for Loading and Unloading

Excess Clause: 0.50% of the admissible claim amount or ₹ 500/- whichever is higher.

Survey & Claim Settlement

In the event of loss or damage which may result in a claim under this Insurance immediate notice must be given to Nearest New India Assurance Company's Office or The Policy Issuing Office without which no claim or loss will be paid.

Claim Pavable Bv:

In the event of loss or damage which may result in a claim under this insurance immediate notice must be given to Policy Issuing Office

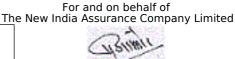
Premium and GST Details

	Rate of Tax	Amount in INR
Taxable Value		901
SGST	9	81
CGST	9	81
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 31st day of December,2021

To view the certificate details please visit :https://online.newindia.co.in/authenticatecertificate.

Date of Issue: 31/12/2021



(Premchand Abarao More) [DIVISIONAL MANAGER]

Duly Constituted Attorney(s)

Tax Invoice No : 15180021P0013546

IRDA Registration Number: 190

Policy No. : 15180021210100000042Document generated by QR_RENEWAL at 31/12/2021 17:43:07 Hours.

Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

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