



POLICY SCHEDULE FOR MONEY INSURANCE

Insured's Name	: PUNEET COTTON PVT. LTD.		
Insured's Details		Issuing Office Details	
Customer ID	: PO93539188	Office Code	: AURANGABAD DO-160400 (160400)
Address	: GAT NO . 112A, SONWADI , JATEGAON ROAD, GEORAI , DIST -BEED GEVARAI ,MAHARASHTRA, 431127	Address	: AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
Phone No	:	Phone No	: 02402333572 / 02402333361
E-mail/Fax	: sanjaymangal09@gmail.com, /	E-mail/Fax	: nia.160400@newindia.co.in / 02402331226
PAN No	:	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: 27AAFCP1494D1ZG / NA	GSTIN	: 27AAACN4165C3ZP
		SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details			
Policy Number	: 16040048210300000027	Business Source Code	
Period of Insurance	: From: 10/12/2021 02:53:31 PM To: 09/12/2022 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator	: JAINUINE INSURANCE BROKERS PVT. LTD. - (DA3388757) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623)
Date of Proposal	: 10-Dec-21	Agent/Bancassurance/S pecified Person	:
Prev. Policy no.	:	Phone No	: 02402350377, 9850049400 / NA
Client Type	: Non-Corporate	E-mail/Fax	: kailash@jainuineinsurance.co.in, / /

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
7000	1260	8260	RUPEES EIGHT THOUSAND TWO HUNDRED SIXTY ONLY	1604008121000000923 3 - 10/12/21

Money in safe (during and after business hours)	: 9800000
Money in Till	: 9800000

Sl. No.	Location & Address
1	PUNEET COTTON PVT LTD, GAT NO. 112/A, SONWADI, JATEGAON ROAD, GEORAI, DIST. BEED + 1

SECTION - 1				
Sl. No.	Sub Sections	Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts	Single Carrying Limits for - Foreign Currency	Single Carrying Limits for - Any other (Specify)
1.	Section 1 A - Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insureds premises from the time the cash is received at the bank by the insured or the authorized employee/ s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the insured to provide for such cash are covered in transit from the premises to the Bank.	9800000	0	0
2.	Section 1 B - Money (other than described in 1A above) in the personal custody of the insured or the authorized employee/s of the insured whilst in direct transit between the premises and the bank or post office and vice versa	9800000	0	0



3.	Section 1 C - Money (other than described in 1A and 1B above) collected by and in the personal custody of the insured or the authorized employee/s of the insured whilst in transit to the premises or bank within a period not exceeding 48 hours from the time of collection and vice versa	9800000	0	0
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Limit over the Policy period (Estimated Annual Turnover)	:	100000000
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Optional Covers	Sum Insured (₹)
SRCC Cover	NOT OPTED
Terrorism	NOT OPTED

Risk Details	
1. Maximum distance over which money will be conveyed	500
2. Details of employees handling Money	AUTHORIZED EMPLOYEE OR OWNER
3. How is money carried	IN BAGS/TRUNK/SUITCASE
4. Mode of Transport	VECH PRIVATE/PUB./HI
5. Details of armed guards or any other protection	NO SECURITY GUARD
6. Details of money kept outside business hours	Safe Consists of Wooden / Steel Cupboard.
7. Is the safe where money is kept, fixed to the walls or floor	No
8. By whom are the keys held	AUTHORIZED EMPLOYEE OR OWNER
9. Are all the keys removed outside business hours	No

Special Conditions	:	Risk Covered As Per Proposal &/ or Addresses of at Factory, Office,Bank and Residence Of All Partner / Proprietor. with in radius of 500 km fro to
Excess	:	1000

This Policy shall subject to MONEY INSURANCE policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹ 7000.00
SGST	9	630
CGST	9	630
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 10th day of December,2021.

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 10/12/2021

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/-.

Tax Invoice No : 16040021P0014202



IRDA Registration Number: 190