



NEW INDIA BHARAT LAGHU UDYAM SURAKSHA POLICY UIN-IRDAN190RP0012V02202021

| 1. Insured's De | tails |): | | | |
|-----------------|-------|--|---------------|---|-----------------------------|
| Insured Name | : | VIVEKANAND COTSPIN LLP | E-mail Id/Fax | : | pancholi.tejas@gmail.com, / |
| Customer ID | : | PO95359548 | PAN No. | : | |
| Address | | S/NO 181/1,182/1., AT:- RANGPURDA, TA:- KADI, DIST.:-MEHSANA KADI ,GUJARAT, 382715 | GSTIN/UIN. | : | 24AAMFV9024F1Z1 / NA |
| Phone No. | : | XXXXX9898 | | : | |

| 2. Issuing Office | e D | etails : | | | |
|-------------------|-----|---|-----------------|------------|--|
| Office Name | : | AHMEDNAGAR D.O. 151800 (151800) | E-mail Id/Fax | <u> </u> : | nia.151800@newindia.co.in / 02412341439 |
| Office Code | : | 151800 | S.Tax Regn. No. | <u> </u> : | AAACN4165CST178 |
| Address | : | ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR,414001 MAHARASHTRA, 414001. | GSTIN | : | 27AAACN4165C3ZP |
| Phone No. | : | 02412321538 / 02412329761 | SAC | : | 997137 (Other property insurance services) |

| 3. Policy Details : | | |
|--------------------------------------|----|---|
| Policy Number | | 15180011214300000144 |
| Period of Insurance | : | From: 24/02/2022 06:52:35 PM To: 23/04/2022 11:59:59 PM |
| Date of Proposal | : | 24-Feb-22 |
| Prev. Policy no. | : | 0 |
| Client Type | : | Non-Corporate Non-Corporate |
| Business Source Code | : | |
| Dev.Off level./Broker | : | Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623), |
| Agent/Bancassurance/SPECIFIED PERSON | : | |
| Phone No. | •• | 02402350377, 9850049400 / NA |
| E-mail Id/Fax | : | kailash@jainuineinsurance.co.in, // |

| 4. Collection Pa | rtic | ulars : | | | | |
|------------------|------|---------|-------------|---|---|---------------------------------|
| Premium | : | 33600 | Total (₹) | | : | 39649 |
| GST | : | | Receipt No. | & | : | 10000089210200680839 - 24/02/22 |

| 5. Policy Level Covers : | |
|--------------------------------|------------------------|
| Description of Property | : As per Block Details |
| Location Address with Pin Code | : As per Block Details |
| Risk Description | : As per Block Details |
| Sum Insured | : ₹160000000 |

| Risk Serial No | IIB Risk Code |
|----------------|---------------|
| 1 | 2999Н |

6. **Block Details:**



| i | Location Address with Pin Code | Building superstruc ture | Plinth & foundation | Basement & Additional Structures | Furniture, Fixture & Fittings | Plant & Machinery | Other Contents Details | Other Contents SI | Stocks held in trust | Stocks in process | Stocks |
|---|---|--------------------------------|---------------------|---|-------------------------------------|----------------------|------------------------------|-------------------------|----------------------------|-------------------------|--------|
| | I VIVEKANAND COTSPIN LLP, S/NO 181/1,182/1., AT:- RANGPURDA, TA:- KADI, DIST.:- MEHSANA 382715 | , | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 160000 |

| SI No. | Location Address with Pin Code | Type of Construction - Walls | Type of Construction - Floor | Type of Construction - Roof |
|-----------|--|------------------------------|------------------------------|-----------------------------|
| 1 | VIVEKANAND COTSPIN LLP, S/NO 181/1,182/1., AT:- RANGPURDA, TA:- KADI, DIST.:-MEHSANA 382715 | Pucca | Pucca | Pucca |

7. Additional Covers:

a) Built-in Covers:

| Cover Name | Opted or Not |
|--|--------------|
| Additions, alterations or extensions | Yes |
| Temporary removal of stocks | Yes |
| Cover for specific content | Yes |
| Start-up expenses | Yes |
| Professional fees | Yes |
| Removal of debris | Yes |
| Costs compelled by Municipal Regulations | Yes |

b) Add-on Covers:

| Cover Name | Opted or Not | Sum Insured |
|--------------------|--------------|-------------|
| Declaration Add-on | NO | 0 |
| | | |
| Cover Name | Opted or Not | Sum Insured |

| Cover Name | Opted or Not | Sum Insured |
|----------------|--------------|-------------|
| Floater Add-on | NO | 0 |

| SI. No. | Asset Description | | Sum Insured (₹) |
|---------|--|---|-----------------|
| 1. | Building superstructure Sum Insured | : | 0 |
| 2. | Plinth & foundation Sum Insured | : | 0 |
| 3. | Basement & Additional Structures Sum Insured | : | 0 |
| 4. | Furniture, Fixture & Fittings Sum Insured | : | 0 |
| 5. | Plant & Machinery | : | 0 |
| 6. | Other Contents Sum Insured | : | 0 |
| 7. | Stocks held in trust Sum Insured | : | 0 |
| 8. | Stocks in process Sum Insured | : | 0 |



| 9 | 9. | Stocks Sum Insured | : | 160,000,000 |
|---|----|--------------------|---|-------------|
| | 7 | Total Sum Insured | : | 160,000,000 |

| 9. Terrorism/EQ/STFI: | | | | | | | |
|-----------------------|---|-----|--------------------|---------|--------------|---|-----|
| Terrorism Covered | : | Yes | Earthquake Covered | Yes | STFI Covered | : | Yes |

| 10. Hypothecation Details : | | | | | | |
|-----------------------------|------------------------|--|--|--|--|--|
| SI.No. | Name of the Financiers | | | | | |
| 1 | BANK OF BADODA BR KADI | | | | | |

| 11. Coinsurance Details : | | | | | | | | |
|---------------------------|------------------|---------|-------------|---------|---------------|--|--|--|
| SI.No. | Coinsurance Type | Company | Office Code | % Share | Premium Share | | | |
| 1 | NOT OPTED | | | | | | | |

12. Subjectivities:

The insurance under this policy is subject to

| The insurance under this policy is sub | ject | . LO |
|--|------|--|
| Special Conditions | | All stock,packing materials, goods pertaining to the insured's Location. |
| Special Warranties | : | NA |
| Special Exclusion | : | NA |
| Clauses | : | (1) Terrorism Clause (2) Agreed Bank Clause (3) Architects ClauseUpto 5% of the claim amount for reasonable fees of architect, Surveyor, Consulting Engineer (4) Removal of Debris ClauseUpto 2% of the claim of the amount for reasonable costs of Removing debris from the site. (5) Escalation Clause in case of Long Term Policy |
| Risk Covered | : | As per Risk covered attached |
| Risk Covered | | As per Risk covered attached |
| Fire Products-Exclusions | : | As per Exclusions attached |

13. A) Compulsory Deductible:

5% of claim amount subject to minimum of ₹ 10000/- for each and every loss.

B) Terrorism Deductibles:

| b) Terrorism Deductibles. | | | | | | | | | |
|---------------------------|---|---------------|-----------------------------------|--|--|--|--|--|--|
| Nature of Risk | Deductibles (as a % of claim/loss amount) | Minimum Limit | Maximum Limit | | | | | | |
| Non-Industrial | 1 % of claim amount | ₹ 25,000/- | ₹ 10,00,000/- (Rupees 10 Lacs) | | | | | | |
| Industrial | 5 % of claim amount | ₹1,00,000/- | ₹ 25,00,000/- (Rupees 25 Lacs) | | | | | | |

14. Premium Details:

Premium Head Premium Amount (₹)

Net Premium under the policy 33600 **GST** 6048 39649 Total premium including GST

RUPEES THIRTY-NINE THOUSAND SIX HUNDRED FORTY-NINE ONLY Total premium including GST(In words)

| Premium and GST Details | | | | | | |
|-------------------------|-------------|---------------|--|--|--|--|
| | Rate of Tax | Amount in INR | | | | |
| Premium | | ₹ 33600.00 | | | | |
| SGST | 0 | 0 | | | | |
| CGST | 0 | 0 | | | | |
| IGST | 18 | 6048 | | | | |

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



In witness whereof the undersigned being duly authorized by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 24th day of February,2022.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 24/02/2022



(Premchand Abarao More) [DIVISIONAL MANAGER]

Duly Constituted Attorney(s)

Tax Invoice No: 15180021P0016323

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C