



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	LAXMINARAYAN FIBER PVT LT				
Insureds Details			Issuing Office Details			
Customer ID	:	PO94934377	Office Code		: JALGAON (160700)	
Address	:	GUT NO.275 & 276,HELESWADI, AT MANTHA DIST JALNA	Address	:	MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001	
		MANTHA ,MAHARASHTRA, 431504				
Phone No	:		Phone No	:	02572236189 / 02572232179	
E-mail/Fax		laxminarayanfiber@gmail.com, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27AACCL2664G1ZJ / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details					
Policy Number	umber : 16070046210100000040 Business Source Code				
Period of Insurance	:	V06/2022 11:59:59 PM Ievel/Broker/Corp. Agent/Web LTD (DA3388757) JAINUINE INSURANCE PVT.LTD. (SI00028623) INSURANCE BROKERS (SI00028623) JAINUINE BROKERS PVT.LTD. (S		JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623) JAINUINE INSURANCE BROKERS	
Date of Proposal	:	07-Feb-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 BR SENDHWA				

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
5997	1080	7078	RUPEES SEVEN THOUSAND SEVENTY-EIGHT ONLY	1607008121000000467 1 - 07/02/22
Location Details		In the godown of Bhagwan Warehouse,Gut No.84, Nanded road, Nardsi, Dist anded-431709		

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in Trade				
SI. No.	STOCK DETAILS Sum Insured			
1	F P Bales, Seeds, & Cotton seed Oil Cake, soyabean, pulses	2000000		

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

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

Office Equipments				
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured		

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



1	NA			0		
Coine / C						
Sl. No.	/ Currency notes o. COINS/CURRENCY/CURIOS DETAILS			Sum Insured		
1	COINS/CORRE	NA		O Sum insured		
		IVA		<u> </u>		
Descript	ion of other item					
SI. No.	OTHER	R ITEM DETAILS		Sum Insured		
1		NA		0		
	Add on Covers			Sum Insured (₹)		
Other Ex				NOT OPTED		
Theft Ex	tension			NOT OPTED		
Terrorisr	n			NOT OPTED		
	- ····		144			
Special	Conditions	: In the godown of Bhagw Nanded-431601	an Wareho	ouse,Gut No.84, Nanded road, Nardsi, Dist		
Excess		: 1000				
This Poli	cy shall subject to BURGLARY	policy clauses attached here	ewith.			
Premium	and GST Details					
		Ra	te of Tax	Amount in INR		
Premium				₹ 5997.00		
SGST		9		540		
CGST		9		540		
IGST		0		0		
In witnes	ss whereof the undersigned be	eing duly authorised by the I	nsurers an	d on behalf of the Insurers has (have) hereunder		
	their) hand(s) 17th day of February,2022.					
OH LIHS O	77th day of February,2022.					
				For and on behalf of		
				The New India Assurance Company Limited		
Date of I	ssue: 07/02/2022					
2010 0						
				Duly Constituted Attorney(s)		
MudrankDtconsolidated Stamp Fees Paid by Pay Order Numbervide receipt						
numberdt Stamp Duty under the Policy is ₹1/						
		Tax Invoice No: 1607	70021P00	006854		

IRDA Registration Number: 190