



FIRE DECLARATION POLICY

1. Insured's Details :

Insured Name	:	PAITHAN MEGA FOOD PARK PRIVATE LIMITED .
Customer ID	:	PO65885662
Address	:	T GUT NO.121/122/124/125 ETC. AT VILLAGE DHANGAON AND GUT NO.53, 55/1 55/3 ETC. AT VILLAGE WAHEGAON, TQ.PAITHAN, DIST. AURANGABAD NATHNAGAR NORTH ,MAHARASHTRA, 431106
Phone No.	:	
E-mail Id/Fax	:	gnramdas@nathpaper.com, /
PAN No.	:	AAGCP0920M
GSTIN/UIN.	:	27AAGCP0920M1ZB

2. Issuing Office Details :

Office Name	:	AURANGABAD DO-160400 (160400)
Office Code	:	160400
Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
Phone No.	:	02402333572 / 02402333361
E-mail Id/Fax	:	nia.160400@newindia.co.in / 02402331226
S.Tax Regn. No.	:	AAACN4165CST178
GSTIN	:	27AAACN4165C3ZP
SAC	:	997139 (Other non-life insurance services excl RI)

3. Policy Details :

Policy Number	:	16040011200200000004
Period of Insurance	:	From: 31/12/2020 12:00:01 AM To: 30/12/2021 11:59:59 PM
Date of Proposal	:	31-Dec-20
Prev. Policy no.	:	
Client Type	:	Non-Corporate
Business Source Code	:	
Dev.Off level./Broker	:	JAINUINE INSURANCE BROKERS PVT. LTD. - (DA3388757) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623) JAINUINE INSURANCE BROKERS PVT.LTD. (SI00028623)
Agent/Bancassurance/SPECIFIED PERSON	:	
Phone No.	:	025722225747, / NA
E-mail Id/Fax	:	/ /

4. Collection Particulars :

Premium	:	175000
GST	:	31500
Total (₹)	:	206500
Receipt No. & Date	:	16040081200000013302 - 29/12/20

5. Policy Level Covers :

Description of Property	:	As per Location Details
Location Address with Pin Code	:	As per Location Details

Policy No. : 16040011200200000004 Document generated by 38661 at 29/12/2020 16:19:20 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>.



Risk Description	:	As per Location Details
Risk Code	:	As per Location Details
STFI Deletion	:	NO
RSMD Deletion	:	NO
Sum Insured on Stocks	:	As per Sum Insured Summary

6. Location-wise details :

Sl.No.	Risk Code	Risk Description	Location Address	Pin Code	District Name	State Name
1	32	Cold Storage premises	At Gut No.121, 122, 124/1,124/2, 124.3, 125, 125/2, 126, 126/2 127, 127/2, 127/3, 127/5, 128/1, 128/ 128/2 at Village Dhangaon, andTq.Paithan, Dist. Aurangabad	431106	NATHNAGAR NORTH	MAHARASHTRA

7. Sum Insured Summary :

Sl. No.	Description of Stocks	Sum Insured (₹)
1	On Stock of All Raw Materials and Processed Frozen Foods such as Frozen Sweet Corn, Frozen Vegetables and Fruits, Milk, Processed Milk, Ghee, Paneer, Butter, etc. and any other Food Products processed or unprocessed stored in Cold St	100000000

8. Add on Covers Opted :

Sl. No.	Add on Cover	Sum Insured (₹)
1	Deterioration of stocks in cold storage premises due to accidental power failure consequent to damage at the premises of power station due to an insured peril(Add On 1003)	
2	Earthquake (Fire and Shock) (Add On 1009)	100000000

9. Terrorism :

Terrorism Covered	:	NOT OPTED
-------------------	---	-----------

10. Hypothecation Details :

Sl.No.	Name of the Financiers
1	OMPRAKASH DEORA PEOPLES CO-OPERATIVE BANK LTD., HINGLOW, BRANCH AURANGABAD

11. Coinsurance Details :

Sl.No.	Coinsurance Type	Company	Office Code	% Share	Premium Share
1	NOT OPTED				

12. Subjectivities :

Basis of Declaration	:	The highest value at risk during the month
----------------------	---	--

The insurance under this policy is subject to

Warranties	:	N/A
Endorsements	:	Endorsement3 - Deterioration of Stocks in Cold Storage premises due to accidental power failure consequent to damage at the premises of Power Station due to an insured peril, Endorsement9 - Earthquake (Fire and Shock),
Clauses	:	Clause1 - Agreed bank Clause, Clause3 - Designation of property clause, Clause10 - Declaration Clause,



Special Conditions	:	
Risk Covered	:	As per Risk covered attached
Fire Products-Exclusions	:	As per Exclusions attached

13. Deductibles :

(a) Compulsory:-

1.	Sum Insured upto ₹10 Cr per location: 5% of the claim amount subject to a minimum of ₹ 10,000/- each and every loss.
2.	Sum Insured above ₹10 Cr per upto ₹ 100Cr per location: 5% of the claim amount subject to a minimum of ₹ 25,000/- each and every loss.
3.	Sum Insured above ₹100 Cr per upto ₹ 1500Cr per location: 5% of the claim amount subject to a minimum of ₹ 5,00,000/- each and every loss.
4.	Sum Insured above ₹1500 Cr per upto ₹ 2500Cr per location: 5% of the claim amount subject to a minimum of ₹ 25,00,000/- each and every loss.
5.	Sum Insured above ₹2500 Cr per location: 5% of the claim amount subject to a minimum of ₹ 50,00,000/- each and every loss.

(b) Voluntary / Imposed:-

Not Applicable

(c) Terrorism Deductibles:-

Nature of Risk	Deductibles (as a % of claim/loss amount)	Minimum Limit	Maximum Limit
Shops and Residential	1 % of claim amount	₹ 10,000/-	₹ 5,00,000/- (Rupees 5 Lacs)
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/- (₹ Twenty five Lakhs)

14. Premium Details :

Premium Head	Premium Amount (₹)
Premium for Terrorism Cover	:
Net Premium under the policy	:
GST	:
Total premium including GST	:
Total premium including GST(In words)	:
	RUPEES TWO LAC SIX THOUSAND FIVE HUNDRED ONLY

Premium and GST Details

Premium	:	₹ 175000.00
SGST	9	15750
CGST	9	15750
IGST	0	0

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 29th day of December, 2020.



For and on behalf of
The New India Assurance Company Limited

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 : 16040020P0020163

IRDA Registration Number: 190