



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE Private Car Liability Policy

UIN Number - IRDAN190RP0001V01200203

| Policy Number :16040131220200000486 | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| POLICY ISSUING OFFICE: BRANCH AURANGABAD AUTO TIE-UP (160401), THE NEW INDIA ASSURANCE CO. LTD., AUTO TIE-UP CITY BRANCH (160401), "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD, MAHARASHTRA, 431003. PHONE NUMBER:02402485446 / 02402484415 FAX NUMBER:NA / NA Email:nia.160401@newindia.co.in | BUSINESS CHANNEL/CPSC User: NAME: Jainuine Insurance Brokers Pvt. Ltd (DA3388757), PHONE NUMBER:02402350377 / / 9850049400 LAND/FAX NUMBER:/ EMAIL:kailash@jainuineinsurance.co.in / | CLAIM CONTACT: AURANGABAD (160002) ADDRESS: JEEVAN SUMAN LIC BLDG., PL.NO.3N-5, CIDCO, JALGAON RD., AURANGABAD-431003., , MAHARASHTRA, 431003. PHONE NUMBER: 2402482715 / 2402480715 MOBILE NUMBER: Email: CH1602@newindia.co.in |

INSURED DETAILS

| Insured Name | SHAIKH VASEEM SHAIKH GULAM HUSAIN | Customer ID | PO94723151 (PAN No :NA) |
|-----------------|-----------------------------------------------------------------------------------------------|----------------|-------------------------|
| Insured Address | AT NOORANI MASJID NOORANI MOHALLA TQ. SILLOD DIST. A'BAD,,, SILLOD ,MAHARASHTRA, 431112 | Contact Number | / / XXXXXX3888 |
| | | Email | |
| | | GSTIN | NA |

POLICY DETAILS

| Period of cover | 25/06/2022 12:00:01 AM to 24/06/2023 11:59:59 PM | Receipt Number | 16040181220000000837 - 24/06/22 |
|------------------|--------------------------------------------------|------------------------|------------------------------------|
| Previous Insurer | THE NEW INDIA ASSURANCE COMPANY LTD. | Previous Policy Number | 16040131210100000352 |

VEHICLE DETAILS

| Registration Number | MH-04-FF-8983 | Chassis no./Engine Number | MA3EADE1S00364489/ K10BN4407792 |
|-----------------------------------------|----------------|-------------------------------------|------------------------------------|
| Make / Model | MARUTI/ALTO | Variant: | MARUTI ALTO |
| Year of manufacture | 2012 | Type of body / Type of Fuel | Saloon/Petrol |
| Colour | AS PER RC BOOK | Cubic capacity(cc) /Wattage(kW): | 998cc |
| Seating capacity including Driver | 5 | Name of registration authority | Thane - MH 04 |
| Geographical Area / Zone | India | Name of the Financier | |
| Cover Note No/Cover Note Issue Date: | / | Automobile Association membership | none |

INSURED DECLARED VALUE (in Rs)

| Vehicle | Trailer | Non-Elec Acc | Electrical Acc | Bi-fuel kit | Total Value |
|---------|---------|--------------|----------------|-------------|-------------|
| 0 | 0 | N/A | N/A | N/A | 0 |

SCHEDULE OF PREMIUM

| Own Damage | | Liability | | |
|-----------------------|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--|
| Basic OD Premium | 0 | Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000) (+)Legal Liability Premium for Paid Driver(0) (+)PA premium for UnNamed/Hirer/Pillion Persons(5) | 2094 275 50 250 | |
| Calculated OD Premium | 0 | Calculated TP Premium | 2669 | |
| Total OD Premium | 0 | Total TP Premium | 2669 | |
| Net Premium in Rs | | | 2669 | |

Policy No. : 1604013122020000466Document generated by 31229 at 2022/06/24 15:31:14. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. Give your valuable feedback on https://www.newindiac.ou/portal/policy/FeedbackGen. For redressal of your grievance, if any,you may approach any one of the following offices -1. Policy issuing office 2. Regional offices 3. Head office. In case, you are not satisfied with our own grievance redre enormach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in. sal mechanism; you may also



| | | | | | | | 400 |
|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------|-----------------------------------|-----------------------------------------|---------------------------------------------------|--------------------------------|-------------------------------------------------------------|
| GST in Rs | | | | | 480 | | |
| Total Payable in Rs | | | | | | | 3149 |
| Total Payable in Rs(in word | IS): | RUPEES THREE THO | USAND ONE H | UNDRED FORT | Y-NINE ONLY | | |
| GSTIN(Issuing Office) | | | | 27AAACN416 | 55C3ZP | | |
| SAC | | | | 997134 (Mot | or vehicle insurance s | ervices | |
| Limitation as to use: The po | licy cove | ers use for any purpos | se other than: | a)Hire or rewa | rd b)Organized racing | , OR c)S | peed testing |
| Limits of Liability:Limit of the Act, 1988. Limit of the amo event: Up to Rs. 7,50,000 | he amou ount of th | nt the Company's Lia ne Company's Liability | bility Under Se y Under Sectio | ection II 1(i) in n II 1(ii) in resp | respect of any one acc pect of any one claim o | cident: or serie | as per the Motor Vehicles s of claims arising out of one |
| For individual covers (OD) i | in RS:0 | | | Compulsory | excess in Rs:NA | | |
| Imposed excess in Rs:0 | | | | Voluntary excess in Rs:0 | | | |
| Persons or classes of perso license at the time of the a effective Learner's License Rules, 1989. PA cover for Owner Driver | may also | and is not disqualified o drive the vehicle and | I from holding d that such a p | or obtaining s erson satisfies | uch a license. Provide the requirement of R | d also ti ule 3 of | hat the person holding an the Central Motor Vehicles |
| Name of Nominee | ame of Nominee Age of Nominee Relationship | | Relationship Insured | | | Relationship to the Nominee | |
| NA | | NA | NA | | | NA | |
| PA cover for named persor | ıs | | | | | | |
| Name CSI Opted(Rs.) | | Nominee | | | Relationship | | |
| none 0 | | | NA | | NA | | |
| Premium and GST Details | | | | | | | |
| | | Rate of Tax | | Amount in INR | | | |
| Premium | | | | Rs 2669.00 | | | |
| SGST | 9 | | 240 | | | | |

| In witness where of this policy has been signed at BRANCH AURANGABAD AUTO TIE-UP on this 24/06/2022WARRANTED THAT IN CASE OF |
|--------------------------------------------------------------------------------------------------------------------------------------------|
| |
| DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, |
| |
| conditions and exceptions applicable to Package/Liability policy attached/available on the web site http://newindia.co.in; IMT Endorsement |
| |
| Number(s) printed herewith attached 16,22. |

Important notice:

CGST

IGST

The insured is not indemnified, if, the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicles Act, 1988 is recoverable from the insured: see clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case, the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 11akh or a claim for refund of premium exceeding Rs 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company website.

I/We hereby certify that the policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of Chapter X and XI of M.V. Act, 1988.

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For and on behalf of The New India Assurance Company Limited

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Duly Constituted Attorney(s)

Date of Issue: 24/06/2022

Tax Invoice No : 16040122E0001110

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IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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