

**Service Branch Address:** 2nd Floor, "Sakar", CTS No.18030, Above Axis Bank, Adalat Road, Kranti Chowk., M8-Aurangabad, AURANGABAD - 431001.

May 05, 2022  
Mrs.SURAJDEVI NATHMAL BAID  
HOUSE NO-37 MAIN ROAD HINGANGHAT  
TQ-HINGANGHAT DIST-WARDHA

WARDHA, MAHARASHTRA  
442301  
Telephone :  
Mobile: 77xxxxxx79

**Intermediary Code:** BR500066  
**Intermediary Name:** Jainuine Insurance Brokers Pvt. Ltd  
**Contact:** -

**CERTIFICATE OF INSURANCE & POLICY SCHEDULE**

(See Form 51 of The Central Motor Vehicles Rules, 1989) Motor Vehicles Act, 1988  
**Private Car Policy - Liability only [Reprint]**

<b>Certificate of Insurance and Policy No.</b> VPT0136670000102		<b>Policy Period: Period of insurance</b> From 16:24 hours on 07/05/2022 To Midnight of 06/05/2023			
<b>INSURED DETAILS</b>					
Name of Insured	Insured Date of Birth	Geographical Area	Business/Profession	Registration Authority	Registration Date
Mrs.SURAJDEVI NATHMAL BAID		India		WARDHA	25/10/2013
<b>VEHICLE DETAILS</b>					
Registration Number	MH32Y0712	Model Description	New Alto K10 VXI	Gross Vehicle Weight(Kgs)	0
Engine Number	589841	Type of Body	Hatchback	Seating Capacity (including Driver)	5
Chassis Number	1958KD	Cubic Capacity	998		
Make of the Vehicle	MARUTI UDYOG LTD.	Year of Manufacture	2013	<b>Total Premium (in Rs.)</b>	<b>3,170.66</b>
<b>LIMITATIONS AS TO USE:</b> The Policy covers use of the vehicle for any purpose other than: a) Hire or Reward b) Carriage of goods (other than samples or personal luggage) c) Organised racing d) Pace making e) Speed testing f) Reliability Trials g) Any purpose in connection with Motor Trade.			<b>DRIVER:</b> Any person including the Insured: • Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. • Provided also that the person holding an effective Learner's License may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of The Central Motor Vehicles Rules, 1989.		
<b>LIMITS OF LIABILITY:</b> Under Section I-1 (i) of the Policy - Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988. Under Section I-1 (ii) of the Policy - Damage to Third Party Property - Rs 750,000. In respect of any one claim or series of claims arising out of one event/-					
<b>Nominee Name :</b>		<b>Nominee Age : 0</b>		<b>Relationship with :</b>	
<b>Guardian Name :</b>		<b>Guardian Age : 0</b>		<b>Guardian Relation :</b>	
Personal Accident Cover for Owner - Driver under Section III: CSI - Rs.1,500,000/-					
<b>B - LIABILITY</b>					
1. Basic premium including premium for TPPD		2,072.00			
2. Less: For restricted TPPD cover for Rs.6000/- (IMT 20)		0.00			
3. Trailers (IMT30)		0.00			
4. Bi-fuel kit (CNG)		0.00			
<b>Add: Personal Accident Benefits</b>					
5. Under Section III (Owner Driver), CSI Rs.1,500,000		315.00			
6. Named Passengers, CSI Rs.0 each as per list attached (IMT 15)		0.00			
7. Unnamed Passengers, CSI Rs.100,000 each (IMT 16)		250.00			
8. Geographical Area Extn.Endt.IMT-1		0.00			
9. P.A Cover to Paid Driver, CSI Rs.0 (IMT 17)		0.00			
<b>ADD: Legal Liability</b>					
10. To Paid Driver (IMT 28)		50.00		<b>ADD: SGST</b> 241.83	
11. To Employees (IMT 29)		0.00		<b>ADD: CGST</b> 241.83	
<b>TOTAL LIABILITY PREMIUM (B)</b>		<b>2,687.00</b>		<b>TOTAL PREMIUM</b> 3,170.66	
In Witness whereof this Policy has been signed at Chennai on 05/05/2022 in lieu of Cover note No. dated Receipt No. CBCMOR8735789. Subject to IMT Endt. Nos & Memorandum 16,28. 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 Chapter XI of the Motor Vehicles Act, 1988.					
<b>IMPORTANT NOTICE:</b> 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 the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY" under Policy Terms and Conditions.					
<b>For Royal Sundaram General Insurance Co. Limited</b>					
Authorised Signatory					

Consolidated Stamp Duty Paid to Govt of TamilNadu

This document is digitally signed, hence counter signature / stamp is not required.

GSTIN : 27AABCR7106G1ZJ

PAN Number : AABCR7106G

For Legal interpretation, English version will hold good.  
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You can reach us through the details given below Mon - Sat 8.00am to 9.00pm and Sunday up to 5.00pm



Call: 1860 425 0000, 1860 258 0000



SMS: type <MOTORCLAIMS> and send to 567675



E-Mail: customer.services@royalsundaram.in



www.royalsundaram.in

## GST Invoice

Royal Sundaram General Insurance Co. Limited  
M8:M8-Aurangabad  
Address: 2nd Floor, "Sakar", CTS No.18030,Above Axis Bank, Adalat Road, Kranti Chowk,,M8-Aurangabad ,AURANGABAD - 431001.  
GSTIN: 27AABCR7106G1ZJ

Policy Number : VPT0136670000102  
GST Invoice Number : VPT013667002000  
Invoice Date : 07/05/2022

Address of insured:  
Insured Name: Mrs.SURAJDEVI NATHMAL BAID  
HOUSE NO-37 MAIN ROAD HINGANGHAT  
TQ-HINGANGHAT DIST-WARDHA  
  
WARDHA  
State:MAHARASHTRA  
Pincode: 442301

Accounting code of service : 997134  
Description of service: Motor vehicle insurance services

Taxable Premium		2,687.00
SGST	9.00%	241.83
CGST	9.00%	241.83
Gross Premium		3,170.66

Indication if tax payable under reverse charge - No

**Note:**“This document is digitally signed”  
“This document is electronically generated.This document should be issued along with the Policy document.This document stands invalid,if issued separately”

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