



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE Private Car Package Policy

UIN Number - IRDAN190RP0042V01100001

Policy Number :61380031220100001051			
POLICY ISSUING OFFICE: BALANAGAR DO (613800), AL-AMEEN PLAZA, PLOT NO. 21, D.NO. 6-3- 134/1, II FLOOR, BALANAGAR X ROADS, BALANAGAR, , , TELANGANA, 500037. PHONE NUMBER:04029556483 / 04029557483 FAX NUMBER:NA / NA Email:nia.613800@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: CLAIMS HUB (610001) ADDRESS: HYDERABAD CLAIMS HUB , , , TELANGANA , 500003. PHONE NUMBER: 04027155114 / MOBILE NUMBER: Email: ch61@newindia.co.in	

INSURED DETAILS	M/S. PREMIER SOLAR SYSTEM PVT LTD	Customer ID	PO62833415 (PAN No :NA)
Insured Address	SY NO: 64 PART, ABOVE G PULLA REDDY SWEET HOUSE,MAIN ROAD, KARKHANA, SECUNDERABAD,SECUNDERABAD, SECUNDERABAD,TELANGANA, 500015	Contact Number	11
		Email	Swapna.Madhuri@kmdast ur.com
		GSTIN	36AABCP8800D1ZP

POLICY DETAILS

Period of cover	26/06/2022 12:00:01 AM to 25/06/2023 11:59:59 PM		61380081220000001669 - 28/06/22
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	61380031210100001125

VEHICLE DETAILS

Registration Number	TS-10-EJ-5855	Chassis no./Engine Number	MA3EWDE1S00B21783JG/ K10BN7790898
Make / Model	MARUTI/WAGON R	Variant:	
Year of manufacture	2016	Type of body / Type of Fuel	Sedan/Petrol
Colour	GREY	Cubic capacity(cc) /Wattage(kW):	998cc
Seating capacity including Driver	5	Name of registration authority	RTA-HYDERABAD-NZ
Geographical Area / Zone	India	Name of the Financier	ICICI BANK LTD .
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none

INSURED DECLARED VALUE (in Rs) Bi-fuel kit Vehicle Trailer Non-Elec Acc Electrical Acc Total Value 0 0 0 0 201858 201858

SCHEDULE OF PREMIUM

Own Damage		Liability		
Basic OD Premium (-)(#)Total NCB Discount(50%)	3313 1656.75	Basic TP Premium (+)Legal Liability Premium for Paid Driver(0)	2094 50	
Calculated OD Premium	1657	Calculated TP Premium	2144	
Total OD Premium	1657	Total TP Premium	2144	
Net Premium in Rs			3801	
GST in Rs			684	
Total Payable in Rs			4485	

Policy No. : 61380031220100001051Document generated by 24050 at 2022/06/28 16:40:00. 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.newindia.co.in/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 office 3. Head office. In case, you are not satisfied with our own grievance re-anomach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in. echanism; you may also



Total Payable in Rs(in word	s):	RUPEES FOUR THOU	ISAND FOUR H	UNDRED EIGH	TY-FIVE ONLY		
				36AAACN4165C3ZQ			
SAC				or vehicle insurance se	ervices)	
Limitation as to use: The Po	licy cove e) c)Org	ers use of the vehicle t anized racing d)Pace	for any purpos making e)Spe	e other than: a	a)Hire or Reward b)Ca	rriade	
Limits of Liability:Limit of th Act, 1988. Limit of the amo event: Up to Rs. 7,50,000	ne amou unt of tl	nt the Company's Lial ne Company's Liability	bility Under Se y Under Sectio	ection II 1(i) in r n II 1(ii) in resp	espect of any one acc ect of any one claim c	ident: or serie	as per the Motor Vehicles s of claims arising out of one
For individual covers (OD) i	n RS:20	1858		Compulsory e	excess in Rs:1000		
Imposed excess in Rs:0				Voluntary exc	cess in Rs:0		
Persons or classes of person license at the time of the ad effective Learner's License Rules, 1989.	ccident	and is not disgualified	I from holding	or obtaining su	ich a license. Providec	l also t	lds an effective driving hat the person holding an f the Central Motor Vehicles
PA cover for Owner Driver					1		1
Name of Nominee	Age of	Nominee	Relationship Insured	with the	Name of the Appoint Nominee is a minor)	ee (if	Relationship to the Nominee
none	0		none		none		none
PA cover for named person	S	1		1			
Name		CSI Opted(Rs.)		Nominee		Relati	onship
none		0		NA		NA	
Premium and GST Details							
		Rate of T	ах		Amount in I	NR	
Premium			un	Rs 3801.00			
SGST		9		342			
CGST		9		342			
IGST		0		0			
In witness where of this policy has been signed at BALANAGAR DO on this 28/06/2022WARRANTED 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 22,7.							
Important notice: 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 Cla lakh, the insured will comp as Company website.	use: In t ly with t	he event of a claim ur he provisions of AML	nder the policy policy of the c	/ exceeding Rs company. The A	11akh or a claim for re ML policy is available	fund c in all (f premium exceeding Rs 1 our operating offices as well
I/We hereby certify that the as well as this Certificate of with the provisions of Chap	^r Insurar	ice are issued in accor	rdance	For and or	behalf of The New In	dia As	surance Company Limited
Date of Issue: 28/06/202	2				Duly Co	onstitu	ted Attorney(s)

Tax Invoice No : 61380022E0002389

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IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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