

# Schedule - Marine Cargo Open Policy - Inland Only [UIN:IRDAN123CP0058V01201819]





In consideration of the insured named herein paying to Cholamandalam MS General Insurance Company Ltd. (hereinafter called the Insurer) the premium as stated in the Schedule and in reliance upon the statements made by the Policyholder, the Insurer agrees to provide insurance against loss damage liability or expense to the extent and in the manner herein provided subject to all terms, conditions, exceptions and warranties hereinafter set forth.

Policy No	2455/00021961/000/00			
Name of the Assured / Insured	MAHAVEER GINNING AND PRESSING			
Address of the Assured	AT 221/3,MALKAPUR ROAD,BODWAD BODWAD S.O JALGAON MAHARASHTRA PIN - 425310			
Aadhar No.:				
PAN No.:	AAMFM6965G			
Period of Insurance	From 00:01 hrs on 26/05/2022 To 23:59 hrs on 25/05/2023			
Transit Details	Anywhere in the India to Anywhere in India			
Sum Insured (Cargo)	INR 122,500,000.00			
Limit Per Sending	INR 4,900,000.00			
Limit Per Location	INR 49,000,000.00			
Subject Matter Insured	ANY TYPE OF GRAINS, ALL TYPES PULSES AND ANY TYPE OF OIL SEEDS IN THE ANY FORM OF SEEDS IN THE HDP BAGS and/ OR ANY TYPE OF BAGS.			
Packing	Standard and Customary			
Mode of Conveyance	Rail, Road			
Basis of valuation (Cargo)	CIF + 10%			
Basis of Declaration	All dispatches made during the previous month shall be declared within 10th of the succeeding month			

Net Premium	27,561.00
CGST (9%)	NA
SGST (9%)	NA NA
IGST (0%)	NA NA
Stamp Duty	- >
Gross Premium	27,561.00

Coinsurance

Name of the Company	all the state of t	1				Share%
The New India Assurance Company Ltd.	annin a	//	<u> </u>	V//		51%( Policy No: 15180021220200000080)
Cholamandalam MS General Insurance Company Ltd.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ù			49%

Condition, Clauses and Warranties

As per Annexure Attached

Intermediary Name: JAINUINE INSURANCE BROKERS PRIVATE LIMITED

Code: 200149210153

POSP Aadhaar No.:

Note: The Certificate of Insurance / Policy Schedule is an important document issued based on your declaration. We request you to verify the details and ensure that everything is in order. In case of any discrepancies, please contact us within 15 days from the date of issuance of policy.

Place : CHENNAI

For Cholamandalam MS General Insurance Company Ltd.

Contact No:8149178773

Date of Issue :03/06/2022

Authorised Signatory

PAN: AABCC6633K

Policy Issuing Office : AURANGABAD BRANCH OFFICE

Agent / broker : 201208127508 Client Code : 1016476900540004

Service Tax Registration No.: AABCC6633KST001

Amount : Nil

Date: Nil

Receipt No : Nil

## Attached to and forming part of the Policy Number: 2455/00021961/000/00 dt 26/05/2022

#### ANNEXURE TO SCHEDULE

# OTHER TERMS AND CONDITIONS

All Clauses, Warranties, Exclusions, Excess and Other Terms and Conditions As per Leader Policy No: 1518002122020000080

### SURVEY AGENT

Cholamandalam MS General Insurance Company Ltd Aurangabad Branch Office Shop No- 4, Plot No- 33, Rokdiya Hanuman Colony, Opp. Lms Jeweller Jalna Road, Aurangabad - 431005 Maharashtra - 431001

### SETTLING AGENT

#### Inland

Infaru
Cholamandalam MS General Insurance Company Ltd
Dare House', 2 nd floor, No. 2, NSC Bose Road, Chennai - 600001
CIN: U66030TN2001PLC047977 | IRDAI Reg. No. 123

Place: CHENNAI

For Cholamandalam MS General Insurance Company Ltd.

Date of Issue :03/06/2022 **Authorised Signatory** 

For Cholamandalam MS General Insurance Company Ltd.