Signature Not Verified___





POLICY SCHEDULE FOR MONEY INSURANCE

UIN NUMBER - IRDAN190P0127100001

Insured's Name	:	DURGESH IMPEX PVT LTD				
Insured's Details			Issuing Office Details			
Customer ID		PO92245613 Office Code		:	AURANGABAD DO-160400 (160400)	
Address	:	GAT NO 67 AT (BHOD KURD) ,TALUK DHARANGAON ,DIST JALGAON DHARANGAON(JALGAON) ,MAHARASHTRA, 425105	A Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005	
Phone No	:		Phone No	- I:	02402333572 / 02402333361	
E-mail/Fax	:	jalgaon@durgeshimpex.in, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27AACCD1075D1Z2 / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC]:	997139 (Other non-life insurance services excl RI)	

Policy Details						
Policy Number : 16040048220300000029 Business Source Code						
Period of Insurance	:	From: 10/10/2022 04:16:26 PM To: 09/10/2023 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User	:	Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),	
Date of Proposal	:	10-Oct-22	Agent/Bancassurance/S pecified Person	:		
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA	
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //	

Premium(₹)	Premium(₹) GST(₹)		Total (₹ in words)	Receipt No. & Date	
35000	6300	41300	RUPEES FORTY-ONE THOUSAND THREE HUNDRED ONLY	1604008122000000782 2 - 10/10/22	

Money in safe (during and after business hours)		:	5000000			
Money in Till			5000000			
SI. No.			Location & Address			
1	Durgesh Impex Pvt Ltd, Gat No 67 at (Bhod Kurd) , Taluka Dharangaon, Dist Jalgaon					
2	Bank, ALL FACTORIES, OFFICES, RESIDENCE OF ALL DIRECTOR/ PARTNER / PROPRIETOR vice versa					

SECTIO	SECTION - 1									
SI. No.	Sub Sections	Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts	Single Carrying Limits for - Foreign Currency	Single Carrying Limits for - Any other (Specify)						
1.	Section 1 A - Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insureds premises from the time the cash is received at the bank by the insured or the authorized employee/ s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the insured to provide for such cash are covered in transit from the premises to the Bank.	5000000	0	0						
2.	Section 1 B - Money (other than described in 1A above) in the personal custody of the insured or the authorized employee/s of the insured whilst in direct transit between the premises and the bank or post office and vice versa	5000000	0	0						

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



3.	Section 1 C - Money (other and 1B above) collected to custody of the insured or the employee/s of the insured premises or hank within a 48 hours from the time of versa	he authorized whilst in transit to the period not exceeding	5000000	0	0		
Limit o (Estim	over the Policy period ated Annual Turnover)	: 500000000					
Option	al Covers		Sum Insured	(₹)			
SRCC	Cover		NOT OPTED				
Terror	ism		NOT OPTED				
Risk D	otails						
1.	Maximum distance over w	hich money will be convey	ed	5.0	<u> </u>		
2.	Details of employees hand		cu	500 By owner or authorized employee			
3.	How is money carried	ining Money		IN ANY TYPE OF BAGS, TRUNKS,			
4.	Mode of Transport				· · · · · · · · · · · · · · · · · · ·		
5.	Details of armed guards or	any other protection		ANY VEHICLE PUBLIC O No Security Guard			
6.	Details of money kept outs			Safe Consists of Wooden / Steel Cupboard			
7.	Is the safe where money is		floor		0		
8.	By whom are the keys held	<u> </u>	11001	BY OWNER OR AUTHORIZED EMPLOYE			
9.	Are all the keys removed of			No			
Specia	l Conditions	: Cash Will Be Carried Radius To Insured Pr DIRECTOR/ PARTNER	emises, Banks,	r And Any Authorized Em ALL FACTORIES, OFFICE OR vice versa.	ployees Within 500 KMS S, RESIDENCE OF ALL		
	olicy shall subject to MONEY I	1-1-	attached herev	vith.			
Premiu	m and GST Details		Rate of Tax	Amount in INR			
Premiu	m		Nate of Tax	₹ 35000.00			
SGST			9	3150			
CGST			9	3150			
IGST			0	0			
In witr set his	ness whereof the undersigned (their) hand(s) on this 10th (l being duly authorised by day of October,2022.	the Insurers ar	nd on behalf of the Insure	rs has (have) hereunder		
5.					n behalf of nce Company Limited		
Date o	f Issue: 10/10/2022			Duly Constitut	ed Attorney(s)		
	nkDt erdt Sta			der Number	_vide receipt		

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We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Tax Invoice No: 16040022P0011388

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C