



**POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE**

**UIN NUMBER - IRDAN190P0098100001**

<b>Insured's Name</b>	: KAILASH TRADING COMPANY .		
<b>Insureds Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: POA0066521	<b>Office Code</b>	: JALGAON (160700)
<b>Address</b>	: CTS NO. 26/ 81, 26/ 82, 26/ 79, BAZAR PETH, AMALNER  AMALNER (JALGAON), MAHARASHTRA, 425401	<b>Address</b>	: MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH, 425001
<b>Phone No</b>	:	<b>Phone No</b>	: 02572236189 / 02572232179
<b>E-mail/Fax</b>	: kailash@jainuineinsurance.co.in, /	<b>E-mail/Fax</b>	: nia.160700@newindia.co.in / 2572236189
<b>PAN No</b>	:	<b>S.Tax Regn. No</b>	: AAACN4165CST178
<b>GSTIN/UIN</b>	: 27AGQPB2505D1ZU / NA	<b>GSTIN</b>	: 27AAACN4165C3ZP
		<b>SAC</b>	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>			
<b>Policy Number</b>	: 16070046220100000077	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 30/09/2022 12:00:01 AM To: 29/09/2023 11:59:59 PM	<b>Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User</b>	: Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757) Jainuine Insurance Brokers Pvt.Ltd. - (SI00028623),
<b>Date of Proposal</b>	: 30-Sep-22	<b>Agent/Bancassurance/S pecified Person</b>	:
<b>Prev. Policy no.</b>	:	<b>Phone No</b>	: 02402350377, 9850049400 / NA
<b>Client Type</b>	: Non-Corporate	<b>E-mail/Fax</b>	: kailash@jainuineinsurance.co.in, / /

<b>Premium(₹)</b>	<b>GST(₹)</b>	<b>Total(₹)</b>	<b>Total (₹ in words)</b>	<b>Receipt No. &amp; Date</b>
1500	270	1770	RUPEES ONE THOUSAND SEVEN HUNDRED SEVENTY ONLY	1607008122000000237 5 - 29/09/22
<b>Location Details</b>		: CTS No. 26/ 81, 26/ 82, 26/ 79, Bazar Peth, Amalner- 425401		

<b>First Loss Percentage</b>	: NA
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**Details of assets covered under the Policy**

<b>Stocks in Trade</b>		
Sl. No.	STOCK DETAILS	Sum Insured
1	On Stocks Of Kirana, Cosmetics, Oils, Foodgrains, Dryfruits	10000000
2	Computers	100000
3	Weighing Machines 3 Nos	100000

<b>Goods held in Trust / Commision</b>		
Sl. No.	GOODS HELD DETAILS	Sum Insured
1	NA	0

<b>Furniture / Fixture / Fittings</b>		
Sl. No.	FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured
1	NA	0

<b>Office Equipments</b>		
Sl. No.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	NA	0

<b>Coins / Currency notes</b>		
Sl. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured

Policy No. : 16070046220100000077 Document generated by 33037 at 29/09/2022 15:58:35 Hours.

Regd. & Head Office: New India Assurance Bldg., 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/policyFeedbackGen>.

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 redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



1	NA	0
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Description of other item		
Sl. No.	OTHER ITEM DETAILS	Sum Insured
1	NA	0

Add on Covers	Sum Insured (₹)
Other Extension	NOT OPTED
Theft Extension	NOT OPTED
Terrorism	NOT OPTED

<b>Special Conditions</b>	:	On Stocks Of All Types Of Kirana, Cosmetics, Oils, Foodgrains, Dryfruits, Paper Dish, Bowls, Tobacco, Cigarettes, Sugar And Such Other Goods : ₹ 1,00,00,000/- Computers- ₹ 1,00,000/- Weighing Machines 3 Nos. ₹ 1,00,000/-
<b>Excess</b>	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

**Premium and GST Details**

	Rate of Tax	Amount in INR
Premium		₹ 1500.00
SGST	9	135
CGST	9	135
IGST	0	0

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s)  
on this 29th day of September,2022.

For and on behalf of  
The New India Assurance Company Limited

Date of Issue: 29/09/2022

Duly Constituted Attorney(s)

Mudrank \_\_\_\_\_ Dt. \_\_\_\_\_ consolidated Stamp Fees Paid by Pay Order Number \_\_\_\_\_ vide receipt number \_\_\_\_\_ dt. \_\_\_\_\_. Stamp Duty under the Policy is ₹1/-.

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 : 16070022P0004057

<p><b>IRDA Registration Number: 190</b> <b>NIA PAN NUMBER: AAACN4165C</b></p>
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