पॉलिसी अनुसूची/ Policy Schedule - National Bharat Sookshma Udyam Suraksha						
Policy Number: 321800112110000328	व्यवसाय स्त्रोत / Business Source: 910275					
	<u>विक्रय चैनल वविरण/</u> <u>Sales Channel Details</u> कोड/ Code: 91027500000001					
जारीकर्ता कार्यालय/ Issuing Office कार्यालय कोड/ Office Code: 321800 कार्यालय पता/ Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001. State Code: 23, Madhya Pradesh	नाम/Name: Jainuine insurance brokers pvt ltd - Indore Contact Number: 9893131223 सह दलाल कोड / Co Broker Code:					
GSTIN: 23AAACN9967E1ZB Contact Number: 7272 250074 Mobile Number:	कस्टमर केयर टॉल फ्री नंबर/Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in					

ग्राहक का नाम /Customer Name: M/S KAKKAD UDYOG	ग्राहक आईडी /Customer ID: 9701945647	पैन /PAN:		
पता/ Address: D-64 MIDC AREA JALGAON M H	फोन /Phone:			
, City: JALGAON, District: JALGAON, State: MAHARASHTRA, PIN: 425001. Cell: 9893131223	ई-मेल /E-Mail: slibindore@gmail.com			

idnight of 27/12/2022					
प्रीमयिम/ Premium	₹ 13,442.00	कवर नोट संख्या और तथि 7 Cover Note Number and Date	लागू नहीं/NA		
CGST	₹ 0.00				
SGST/UTGST	₹ 0.00		8800211223088882 Dt. 23/12/2021		
IGST	₹ 2,420.00				
केरला बाढ़ उपकर/Kerala Flood Cess	₹ 0.00	प्रस्ताव संख्या और तथि/ Proposal Number and Date			
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00				
नर्प्राप्ति योग्य स्टाम्प ड्यूटी Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तथिि Receipt Number and Date	321800812110005723 Dt. 23/12/2021		
कुल /Total Amount	₹ 15,862.00	पछिली पॉलिसी संख्या और समाप्ती तथि7 Previous Policy Number and Expiry Date	लागू नहीं/NA		

Occupancy Code: 2098	Occupancy Details: Grain/seeds disintegrating/crushing/ Decorticating factories/ Dal mills.
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Total Location Sum Insured	₹ 94,00,000.00
Total Location Sum Insured	₹ 94,00,000.00

LocationAddress:
1)D-64, MIDC AREA JALGAON MH,,Jalgaon - District Others,Jalgaon,Maharashtra,425101.

SL. No	Coverage	Coverage Description	Sum Insured			
1	Basic Cover(Excluding EQ and STFI)	ON BUILDING SI 2000000/- P & M SI 2000000/- FFF-200000/- ELECT INST SI 200000/-STOCK OF GRAINS,SEEDS AND OTHER SI 5000000/- AS PER PROPOSAL FORM THE STOCK HELD IN TRUST ALSO COVERED	` 94,00,000.00			
	अधिकि /Excess: Compulsory Ex	cess: ₹ 10,000.00, TEN THOUSAND.				
	Additional Information: NA					
2	STFI	ON BUILDING SI 2000000/- P & M SI 2000000/- FFF-200000/- ELECT INST SI 200000/-STOCK OF GRAINS,SEEDS AND OTHER SI 5000000/- AS PER PROPOSAL FORM THE STOCK HELD IN TRUST ALSO COVERED	` 94,00,000.00			
	अधिकि/Excess: Compulsory Excess: ₹ 10,000.00, TEN THOUSAND.					
3	Earthquake	ON BUILDING SI 2000000/- P & M SI 2000000/- FFF-200000/- ELECT INST SI 200000/-STOCK OF GRAINS,SEEDS AND OTHER SI 5000000/- AS PER PROPOSAL FORM THE STOCK	` 94,00,000.00			

पॉलिसी अनुसूची/ Policy Schedule - National	Bharat Sookshm	a Udyam Suraksha			
Policy Number: 32180011211000032	8 व्यवसाय स्	त्रोत / Business Source: 910275			
	Sales Cha	ल <u>वविरण/</u> Innel Details : 91027500000001			
जारीकर्ता कार्यालय/Issuing Office		नाम/Name: Jainuine insurance brokers pvt			
कार् यालय कोड/ Office Code: 321800	Itd - Indore	e umber: 9893131223			
कार्यालय पता/ Office Address: DEWAS		JIIIDE1. 9093131223			
DIVISION 2-TARANI COLONY, A.B ROAD, 455001.	^{, -} सह दलाल	कोड / Co Broker Code:			
State Code: 23 , Madhya Pradesh GSTIN: 23AAACN9967E1ZB Contact Number: 7272 250074 Mobile Number:	Care Toll	नेयर टॉल फ्री नंबर/Customer I Free Number: 1800 345 0330			
	email:cu	stomer.support@nic.co.in HELD IN TRUST ALSO COVERED			
अधिकि /Excess: Compulsory	l Excess: ₹ 10 000				
Additional Information: NA	<u> </u>				
Terrorism 4	ELECT INS	G SI 2000000/- P & M SI 2000000/- FFI T SI 200000/-STOCK OF GRAINS,SEE 00000/- AS PER PROPOSAL FORM TI HELD IN TRUST ALSO COVERED	DS AND	` 94,00,000.00	
সংঘ কি/Excess: 5% of the claim amount for each and every claim subject to Minimum of INR 100,000 and Maximum of IN					
25,00,000 Additional Information: NA					
Clauses		As	per Annexu	re I	

	FINANCIER DETAILS						
Sr.No	Sr.No Type of Finance Name of Financier Address						
1	Hypothecation	HDFC BANK LTD	JALGAON				

टप्पिणयों/ Remarks: BASIC COVER, STFI, EQ, TERRORISM

ON BUILDING SI 2000000/- P & M SI 2000000/- FFF-200000/-ELECT INST SI 200000/-STOCK OF GRAINS, SEEDS AND OTHER SI 5000000/- AS PER PROPOSAL FORM THE STOCK HELD IN TRUST ALSO COVERED AGREED BANK CLAUSE

जिसकी गवाही में दिन/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवत अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुस्ची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट https://nationalinsurance.nic.co.in पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्त जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमिकता निरस्त हो जाएगी। /IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 23/December/2021. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website https://nationalinsurance.nic.co.in shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'

(₹ 1.00

इंश्योरेन्सइंडयालमिटिंड

कृते नेशनल इन्श्योरेन्स कंपनी स्टांप इयू**ढे**मिटिड/ For and on behalf of National Insurance Stamp Company Limited Duty:

> अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

Printed on 12/01/2022 by ID: 42608

TAX INVOICE

Invoice Serial No: 30878F1P00000328 Invoice Date: 23/12/2021

Details of Supplier:

National Insurance Company Limited.,

DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001

23, Madhya Pradesh State: GSTIN No: 23AAACN9967E1ZB

Details Of Receiver: M/S KAKKAD UDYOG Address: D-64 MIDC AREA JALGAON M H

JALGAON, City: District: JALGAON, State: MAHARASHTRA, PIN: 425001.

Maharashtra

Place Of Supply State : State Code : 27 GSTIN No: NA

सैक कोड/ SAC Code	सेवा का वविरण/ Descripti	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable	सीजीएसटी की राशि एसजीएसटी/यूटीजीएसटी/ CGST SGST/UTGST	आईजीएसटी/I GST		केरला बाढ़ उपकर/Kerala Flood Cess			
	on of Service		in in	Value(₹)	दर/Rate	राशा∕ि Amount(₹)	दर/Rate	राशि Amount(₹)	दर/Rate	राशा∕ि Amount(₹)	राशा⁄िAmount(₹)
997139	Other non- life insurance services (excluding reinsuranc e services)	13,442	0%	13,442	0%	0	0%	0	18%	2,420	0
TOTAL		13,442		13,442		0		0		2,420	0

कुल इनवॉयस मूल्य (अंकों में)Total Invoice Value (In figures) :

₹ 15,862

क्ल इनवॉयस मूल्य (शब्दों में)Total Invoice Value (In words) : रूपए/Rupees

Fifteen Thousand Eight Hundred Sixty Two

केवल/Only.

रविर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

कृते नेशनल इन्श्योरेन्स कंपनी लमिटिड/ For and on behalf of National Insurance Company Limited

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

