



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.

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| Policy No | 2455/00022602/000/00 |
| Name of the Assured / Insured | SANJAY COTTONSEED INDUSTRIES |
| Address of the Assured | PLOT NO A 9/5, ADDITIONAL MIDC AREA, AURANGABAD ROAD JALNA H.O JALNA MAHARASHTRA PIN - 431203 |
| Aadhar No.: | - |
| PAN No.: | AAKFS9622G |
| Period of Insurance | From 00:01 hrs on 23/09/2022 To 23:59 hrs on 22/09/2023 |
| Transit Details | Anywhere in the India to Anywhere in India |
| Sum Insured (Cargo) | INR 14,700,000.00 |
| Limit Per Sending | INR 3,430,000.00 |
| Limit Per Location | INR 14,700,000.00 |
| Subject Matter Insured | All types of Vegetable Oil |
| 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 |

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| Net Premium | 3,675.00 |
| CGST (9%) | NA |
| SGST (9%) | NA |
| IGST (0%) | NA |
| Stamp Duty | - |
| Gross Premium | 3,675.00 |

Coinsurance

| Name of the Company | Share% |
|---|---------------------------------------|
| The New India Assurance Company Ltd. | 51%(Policy No: 16040121220200000024) |
| Cholamandalam MS General Insurance Company Ltd. | 49% |

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| Condition, Clauses and Warranties | As per Annexure Attached |
|-----------------------------------|--------------------------|

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| Intermediary Name: JAINUINE INSURANCE BROKERS PRIVATE LIMITED | Contact No: 8149178773 |
| 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.

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| Place : CHENNAI | For Cholamandalam MS General Insurance Company Ltd. |
| Date of Issue : 30/09/2022 | Authorised Signatory |

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| Service Tax Registration No.: AABCC6633KST001 | PAN: AABCC6633K |
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| Policy Issuing Office : AURANGABAD BRANCH OFFICE |
| Agent / broker : 201208127508 |
| Client Code : 1016038665140001 |

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| Amount : Nil |
| Receipt No : Nil |
| Date : Nil |

ANNEXURE TO SCHEDULE

OTHER TERMS AND CONDITIONS

All Clauses, Warranties, Exclusions, Excess and Other Terms and Conditions As per Leader Policy No: 16040121220200000024

SURVEY AGENT

Inland

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

SETTLING AGENT

Inland

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 :30/09/2022

Authorised Signatory

For Cholamandalam MS General Insurance Company Ltd.

CHOLAMANDALAM MS