

Policy Schedule

CHOLA MS BHARAT SOOKSHMA UDYAM SURAKSHA POLICY [UIN:IRDAN123RP0016V02202021]

| Policy No. | | | | 2162/0075528 | 2162/00755284/000/00 | | | |
|---|---------|---|--------------|--|---|--------------|------------|--|
| GST Invoice No.:2162007552840000 GSTIN: 27AABCC6633K1ZJ PAN: AABCC6633K SAC Code: 997137 | | | | ADDRESS: AUR Shop No- 4, Plo Opp. LMS Jewe KRANTI CHOW | CHOLAMANDALAM MS GENERAL INSURANCE COMPANY Ltd. ADDRESS: AURANGABAD BRANCH OFFICE Shop No- 4, Plot No- 33, Rokdiya Hanuman Colony, Opp. LMS Jeweller Jalna road, Aurangabad - 431005 KRANTI CHOWK S.O CITY: AURANGABAD STATE: MAHARASHTRA | | | |
| | | | | | SAC Description: Other property insurance services | | | |
| 1. INSURANCE DETAILS | | | | Dollay igo | | | | |
| Insured Name: SANJAY KRISHI KENDRA | | | | | Policy issue date: 02/09/2022 | | | |
| Communication Address: SHOP - C. S NO. 5538/1, NATIONAL HIGHWAY NO. 6, NEAR BORI COLONY PAROLA 0 PAROLA S.O JALGAON MAHARASHTRA PIN - 425111 GST No.: 27AASPP8084D1Z4 | | | | | Period of Insurance: From 00:01 on 02/09/2022 To 23:59 on 01/09/2023 | | | |
| Email.: skk292711@gmail.com | | | | | Phone No.8055565559 | | | |
| PAN No.:- | | | | | Aadhar No.:0 | | | |
| Financier Interest | | | | 1. CENTRAL B | 1. CENTRAL BANK OF INDIA, Paropa | | | |
| | | | | <u> </u> | | | | |
| 2. CO-INSURANCE DETAILS | | | | | | | | |
| Nil | 1 | | | | Manual States | | | |
| Intermediary Name/Code/Co No. | ontact | JAINUINE INSURANCE LIMITED/20014921015 | | E | Payment Amt | | 13045 | |
| Receipt No 10507 | 739749 | | Client Code | 10155131289 | /// Son. 190. ES 1 |) | 02/09/2022 | |
| | | | | | | | | |
| 3.DETAILS OF SUM INSURED & | Ł PREM | IUM | | E CONTRACTOR OF THE PARTY OF TH | Nation 1 | | | |
| | | | Sum Insu | Sum Insured (Rs) | | Premium (Rs) | | |
| Sum Insured & Premium excl. | Terrori | sm | 16,500,000.0 | 16,500,000.00 | | 8,580.00 | | |
| Terrorism | | | 16,500,000.0 | 16,500,000,00 | | 2,475.00 | | |
| CGST (9%) | | | (man) | | | | 995.00 | |
| SGST (9%) | | | | | | 995.00 | | |
| IGST (18%) | | 150 | | Pound of State of Sta | | | 0.00 | |
| Kerala Cess (1%) | | 5 600 1/1 | | 0.00 | | | | |
| Total | | | 16500000 | l i | | | | |
| Consolidated Stamp Duty Paid Vide G.O. Rt No.381 Commercial Taxes and Registration | | | | tration (j1) Depart | ment, Tamil Nadu dated 30/08 | /2022. | | |
| 4.CONDITIONS | | | | | | | | |
| 4.CONDITIONS | | | | | | | | |
| NIL | | | | | | | | |
| | | | | | | | | |
| 5.WARRANTIES | | | | | | | | |
| | | | | | | | | |
| NIL | | | | | | | | |
| | | | | | | | | |
| 6.CLAUSES | | | | | | | | |
| NIL | | | | | | | | |
| | | | | | | | | |
| 7.BASIS OF DECLARATION/VALUATION | | | | | | | | |
| Nil | | | | | | | | |
| | | | | | | | | |

8.DETAILS OF PROPERTY INSURED & LOCATION OF RISK COVERED

SI. No. : 1

Location Address: SHOP - C. S NO. 5538/1, NATIONAL HIGHWAY NO. 6, NEAR BORI COLONY PAROLA, PAROLA S.O., JALGAON, MAHARASHTRA, PIN-425111

Age of Building : <5 years

No of Floors: Ground Floor

Construction Type : Pucca

Occupancy: Shops dealing in hazardous goods

| DESCRIPTION | Sum Insured (in Rs.) |
|------------------------|----------------------|
| | |
| Building | 55,00,000.00 |
| Furniture And Fixtures | 10,00,000.00 |
| Stocks | 1,00,00,000.00 |

| Total Sum Insured(Rs) | 1,65,00,000.00 |
|---|--|
| Inbuilt Addon cover | Sum Insured (in Rs.) |
| Specific Contents Coverage | |
| Money | 50000 |
| Deeds, manuscripts and business books, plans, drawings, securities etc- | 50000 |
| Computer programmes, information limited to cost of material and clerical labour | 500000 |
| Personal effects of employees, Directors and visitors upto `15,000 (Rupees Fifteen Thousand) per person for a maximum of 20 persons during the policy period. | 300000 |
| Additions, Alterations, Extensions | Upto 15% of SI of that item(except stocks) |
| Temporary Removal of Stocks | Upto 10% of Stock SI |
| Start up Expenses | Upto Rs.1 lac |
| Professional Fees - towards architect, surveyor, consulting engineer fees | Upto 5% of Claim amount |
| Clearance and removal of Debris clause | Upto 2% of Claim amount |
| Costs compelled by Municipal Regulations | Upto Policy sum insured |
| Waiver of Underinsurance | Upto 15% |
| Stocks on Floater basis | No |

Excess:

| Location Details | Sum Insured | Excess Type | Excess |
|------------------|-------------|-------------|--|
| | 16500000 | Terrorism | 1% of the claim amount for each and every claim subject to Minimum of INR 25000 and Maximum of INR 1000000 |
| | 16500000 | Normal | Rs.5,000/- for each and every claim |

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.

Authorised Signatory

Date: 05/09/2022

Regd.&Head Office:Dare House, 2nd Floor, No.2, N.S.C Bose Road, Chennai-600 001, India CIN: U66030TN2001PLC047977 | IRDAI Reg. No. 123