



The New India Assurance Co.Ltd.

BALANAGAR DO (613800)
Tel. No.: 04029556483/04029557483/
Email: nia.613800@newindia.co.in/

Private Car Package Policy IRDAN190RP0042V01100001

Policy Number: 61380031220100001132
Vehicle: TOYOTA/ETIOS

Period of Cover

From: 01/07/2022 07:00:01 PM
To: 30/06/2023 11:59:59 PM

Insured Details

CHINRANJEEV SINGH SALUJA SINGH
To: C-27, VIKRAMPURI CLY,B/H RATNADEEP SUPER MARKET,
KARKHANA, HYDERABAD, Rangareddi , TELANGANA, 500009

For Insurance Renewals contact

JAINUINE INSURANCE BROKERS PVT. LTD.
Tel. No.: 02402350377 / / 9850049400
Email: kailash@jainuineinsurance.co.in /

For Claims contact our OFFICE

BALANAGAR DO 613800
AL-AMEEN PLAZA, PLOT NO. 21, D.NO. 6-3-134/1, II FLOOR, BALANAGAR X ROADS,
BALANAGAR,,,500037
Tel. No.: 04029556483
Email: nia.613800@newindia.co.in

Tax Invoice No : 61380022E0002558

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C



[B]

POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE
Private Car Package Policy
UIN Number - IRDAN190RP0042V01100001

Policy Number :61380031220100001132

POLICY ISSUING OFFICE: BALANAGAR DO (613800), AL-AMEEN PLAZA, PLOT NO. 21, D.NO. 6-3- 134/1, II FLOOR, BALANAGAR X ROADS, BALANAGAR , , , TELANGANA , 500037. PHONE NUMBER:04029556483 / 04029557483 FAX NUMBER:NA / NA Email:nia.613800@newindia.co.in	BUSINESS CHANNEL/CPSC User: NAME: Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757), PHONE NUMBER:02402350377 / / 9850049400 LAND/FAX NUMBER:/ EMAIL:kailash@jainuineinsurance.co.in /	CLAIM CONTACT: CLAIMS HUB (610001) ADDRESS: HYDERABAD CLAIMS HUB , , , TELANGANA , 500003. PHONE NUMBER: 04027155114 / MOBILE NUMBER: Email: ch61@newindia.co.in
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INSURED DETAILS

Insured Name	CHINRANJEEV SINGH SALUJA SINGH	Customer ID	PO89867968 (PAN No :NA)
Insured Address	C-27, VIKRAMPURI CLY,B/H RATNADEEP SUPER MARKET, KARKHANA, HYDERABAD, Rangareddi ,TELANGANA, 500009	Contact Number	/ /
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	01/07/2022 07:00:01 PM to 30/06/2023 11:59:59 PM	Receipt Number	61380081220000001784 - 04/07/22
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	61380031210100000133

VEHICLE DETAILS

Registration Number	AP-10-BA-2068	Chassis no./Engine Number	MBJB2ZBTX00028380811/ 2NRV034834
Make / Model	TOYOTA/ETIOS	Variant:	TOYOTA ETIOS G BSIV
Year of manufacture	2011	Type of body / Type of Fuel	Sedan/Petrol
Colour	CELESTIAL BLACK	Cubic capacity(cc) /Wattage(kW):	1496cc
Seating capacity including Driver	5	Name of registration authority	Hyderabad Central 2
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none

INSURED DECLARED VALUE (in Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
35000	0	0	0	0	35000

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium	309	Basic TP Premium	3416
(+)Additional Loading on OD Premium	-9	(+)Legal Liability Premium for Paid Driver(0)	50
Calculated OD Premium	300	Calculated TP Premium	3466
Total OD Premium	300	Total TP Premium	3466
Net Premium in Rs			3766
GST in Rs			678
Total Payable in Rs			4444
Total Payable in Rs(In words):	RUPEES FOUR THOUSAND FOUR HUNDRED FORTY-FOUR ONLY		

Policy No. : 61380031220100001132 Document generated by 38449 at 2022/07/04 13:23:47.

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>.



GSTIN(Issuing Office)	36AAACN4165C3ZQ
SAC	997134 (Motor vehicle insurance services)
Limitation as to use:The Policy covers use of the vehicle for any purpose other than: a)Hire or Reward b)Carriage of goods (other than samples or personal luggage) c)Organized racing d)Pace making e)Speed testing f) Reliability Trials g)Any purpose in connection with Motor Trade	
Limits of Liability:Limit of the amount the Company's Liability Under Section II 1(i) in respect of any one accident: as per the Motor Vehicles Act, 1988. Limit of the amount of the Company's Liability Under Section II 1(ii) in respect of any one claim or series of claims arising out of one event: Up to Rs. 7,50,000	
For individual covers (OD) in RS:35000	Compulsory excess in Rs:1000
Imposed excess in Rs:0	Voluntary excess in Rs:0
Persons or classes of persons entitled to drive:Any person including the insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's License may also drive the vehicle and that such a person satisfies the requirement of Rule 3 of the Central Motor Vehicles Rules, 1989.	

PA cover for Owner Driver

Name of Nominee	Age of Nominee	Relationship with the Insured	Name of the Appointee (if Nominee is a minor)	Relationship to the Nominee
none	0	none	none	none

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
none	0	NA	NA

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 3766.00
SGST	9	339
CGST	9	339
IGST	0	0

In witness where of this policy has been signed at BALANAGAR DO on this 04/07/2022 WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, conditions and exceptions applicable to Package/Liability policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 22.

Important notice:

The insured is not indemnified, if, the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicles Act, 1988 is recoverable from the insured: see clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 1lakh or a claim for refund of premium exceeding Rs 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company website.

I/We hereby certify that the policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of Chapter X and XI of M.V. Act, 1988.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 04/07/2022

Duly Constituted Attorney(s)

Tax Invoice No : 61380022E0002558



IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C



ADJUSTMENT VOUCHER

Issuing Office : BALANAGAR DO (613800)
Address : AL-AMEEN PLAZA, PLOT NO. 21, D.NO. 6-3-134/1, II FLOOR, BALANAGAR X ROADS, BALANAGAR
,500037
Rangareddi
Insured Pan Number :
Phone : 04029556483
Email : nia.613800@newindia.co.in
Fax :
Collection Number : 61380081220000001784
Collection Date : 04/07/2022
Business Source Code : DA3388757
PAN No of Payer :

Received with thanks from SALUJA SUNALI.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount ₹	A/C Code	Sub A/C Code
61380031220100001132	Scroll-613800	4444.00	5081.613800	

Total = ₹ 7331.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Scroll	4444.00	672219	01-JUL-22	HDFC	HYD	6138002210004994	0.00

Total = ₹ 7331.00

Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
3766.00	678.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NA	JAINUINE INSURANCE BROKERS PVT. LTD.	31

For The New India Assurance Company Limited



Date of Issue: 04/07/2022

Cashier's Initial

Authorized Signatory

Note -

- 1.Please note the Policy Number, Collection Number and date in all future correspondence. .
- 2.NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

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IMT.22. COMPULSORY DEDUCTIBLE

(Applicable to Private Cars, three wheelers rated as private cars, all motorized two wheelers, taxis, private car type vehicle plying for public/private hire, private type taxi let out on private hire)

Notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insured shall bear under Section 1 of the policy in respect of each and every event (including event giving rise to a total loss/constructive total loss) the first ₹ 1000 (or any less expenditure which may be incurred) of any expenditure for which provision has been made under this policy and/or of any expenditure by the insurer in the exercise of his discretion under Condition no 3 of this policy.

If the expenditure incurred by the insurer shall include any amount for which the insured is responsible hereunder such amount shall be repaid by the insured to the insurer forthwith.

For the purpose of this Endorsement the expression "event" shall mean an event or series of events arising out of one cause in connection with the vehicle insured in respect of which indemnity is provided under this policy.

Subject otherwise to the terms conditions limitations and exceptions of this Policy.

IMT. 28. LEGAL LIABILITY TO PAID DRIVER AND/OR CONDUCTOR AND/OR CLEANER EMPLOYED IN CONNECTION WITH THE OPERATION OF INSURED VEHICLE (For all Classes of vehicles.)

In consideration of an additional premium of ₹ 50/- notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insurer shall indemnify the insured against the insured's legal liability under the Workmen's Compensation Act,1923, the Fatal Accidents Act, 1855 or at Common Law and subsequent amendments of these Acts prior to the date of this Endorsement in respect of personal injury to any paid driver and/or conductor and/or cleaner whilst engaged in the service of the insured in such occupation in connection with the vehicle insured herein and will in addition be responsible for all costs and expenses incurred with its written consent.

Provided always that

(1) this Endorsement does not indemnify the insured in respect of any liability in cases where the insured holds or subsequently effects with any insurer or group of insurers a Policy of Insurance in respect of liability as herein defined for insured's general employees;

(2) the insured shall take reasonable precautions to prevent accidents and shall comply with all statutory obligations;

(3)the insured shall keep record of the name of each paid driver conductor cleaner or persons employed in loading and/or unloading and the amount of wages and salaries and other earnings paid to such employees and shall at all times allow the insurer to inspect such records on demand.

(4) in the event of the Policy being cancelled at the request of the insured no refund of the premium paid in respect of this Endorsement will be allowed.

Subject otherwise to the terms conditions limitations and exceptions of the Policy except so far as necessary to meet the requirements of the Motor Vehicles Act, 1988.

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