

The New India Assurance Co.Ltd.

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

Private Car Liability Policy IRDAN190RP0001V01200203

Policy Number: 61380031220200002040 Vehicle: MARUTI/800

Period of Cover

From: 16/09/2022 04:32:33 PM To: 15/09/2023 11:59:59 PM

Insured Details

H PRAMILA DACYL To: C/O H KAMESH, FNO 214, HNO 2-2-1149/2,,THILAK NAGAR, NEW MUSHEERABAD,HYDERABAD - 500020,Hyderabad ,TELANGANA, 500020

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

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 : 61380022P0004507

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C





POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE Private Car Liability Policy

UIN Number - IRDAN190RP0001V01200203

Policy Number :61380031220200002040		
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

INSURED DETAILS			
Insured Name	H PRAMILA DACYL	Customer ID	PO99879112 (PAN No :NA)
Insured Address	C/O H KAMESH, FNO 214, HNO 2-2-1149/2,,THILAK NAGAR, NEW MUSHEERABAD,HYDERABAD - 500020, Hyderabad ,TELANGANA, 500020	Contact Number	/ / XXXXX4498
		Email	vardhan@jainuineinsuranc e.in
		GSTIN	NA

POLICY DETAILS

Period of cover	16/09/2022 04:32:33 PM to 15/09/2023 11:59:59 PM		10000089220900444819 - 16/09/22
Previous Insurer	Not available	Previous Policy Number	

VEHICLE DETAILS

Registration Number	AP-29-F-0728	Chassis no./Engine Number	SB30BIN2419767/F8BIN28 21204
Make / Model	MARUTI/800	Variant:	MARUTI 800 MPI
Year of manufacture	2004	Type of body / Type of Fuel	Saloon/Petrol
Colour	SILKY SILVER	Cubic capacity(cc) /Wattage(kW):	796сс
Seating capacity including Driver	5	Name of registration authority	Rangareddy East
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	1	Automobile Association membership	none
FASTag ID:			

INSURED DECLARED VALUE (in Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
0	0	N/A	N/A	N/A	0

SCHEDULE OF PREMIUM

Own Damage		Liability	_
Basic OD Premium	0	Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000) (+)Legal Liability Premium for Paid Driver(0)	2094 275 50
Calculated OD Premium	0	Calculated TP Premium	2419
Total OD Premium	0	Total TP Premium	2419
Net Premium in Rs			2419

Policy No. : 61380031220200002040Document generated by QR_RENEWAL at 2022/09/16 16:32:50. tead Office: New India Assurance Bidg., 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/policy/feedbackGen. e of the following offices- 1. Policy issuing office 2. Regional office 3. Head office.In case, you are not satisfied with our own grievance red and the following offices- 1. Policy issuing office 2. Regional office 3. Head office.In case, you are not satisfied with our own grievance red and the following offices- 1. Policy issuing office 2. Regional office of Insurance Ombudsman, please visit our website http://newindia.co.in. For redressal of your grievance, if any, you may approach any one of the follo sal mechanism; you may also apt



GST in Rs								436
Total Payable in Rs								2855
Total Payable in Rs(in words):	RUPEES TWO THOUSA	ND EIGHT HL	JNDRED FIFTY-	FIVE ONL	Y			
GSTIN(Issuing Office)			36AAACN4165	5C3ZQ				
SAC			997134 (Moto	or vehicle	insuran	ce servic	es)	
Limitation as to use:The policy co	vers use for any purpose	other than: a)Hire or rewar	d b)Orgar	nized ra	cing, OR	c)Speed te	esting
Limits of Liability:Limit of the amo Act, 1988. Limit of the amount of event: Up to Rs. 7,50,000	ount the Company's Liabil the Company's Liability U	ity Under Sec Inder Sectior	ction II 1(i) in re 1 II 1(ii) in respe	espect of ect of any	any one one cla	e acciden im or ser	t: as per t ies of clai	the Motor Vehicles ms arising out of on
For individual covers (OD) in RS:0			Compulsory e	xcess in R	s:NA			
Imposed excess in Rs:0			Voluntary exc	ess in Rs:()			
Persons or classes of persons enti- license at the time of the acciden effective Learner's License may al Rules, 1989.	t and is not disqualified fr	om holdina c	or obtaining su	ch a licen	se. Prov	ided also	that the	person holding an
PA cover for Owner Driver								

Name of Nominee	Age of Nominee			Relationship to the Nominee
NA	NA	NA	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 2419.00
SGST	9	218
CGST	9	218
IGST	0	0

In witness where of this policy has been signed at BALANAGAR DO on this 16/09/2022WARRANTED 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 1 lakh 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: 16/09/2022



(MUTHUKRISHNAN GANAPATHY) [SrDivisional Manager]

Policy No. : 61380031220200002040Document generated by QR_RENEWAL at 2022/09/16 16:32:50. lead Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on https://w

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Duly Constituted Attorney(s)

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 : 61380022P0004507

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

Policy No. : 61380031220200002040Document generated by QR_RENEWAL at 2022/09/16 16:32:50. Regd. & Head Office: New India Assurance Bidg., 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/policy/FeedbackGen. 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 red approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in. sal mechanism; you may als





COLLECTION RECEIPT CUM 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, BALANAGAF	२
	500037 Rangareddi	
Insured Pan Number		
Phone	4029556483	
Email	ia.613800@newindia.co.in	
Fax		
Collection Number	0000089220900444819	
Collection Date	6/09/2022	
Business Source Code	DA3388757	
PAN No of Payer		

Received with thanks from H PRAMILA DACYL.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code
61380031220200002040	Bank-100000	2855.00	9100.100000	BA00013647-100000-9100

Total = ₹ 2855.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
EPG Credit Advice	2855.00	YAX6141 609 0386	N.A.	N.A.	N.A.	6138002210007991	N.A.

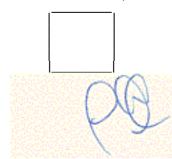
Total = ₹ 2855.00

Date of Issue: 16/09/2022

Utilization details of the Collected Amount :

Premium		GST		Stamp Duty	Excess Amount
2419.00		436.00		0.00	0
SI no.	Agency Code		Agency Name		Department Code
1	NA				31

For The New India Assurance Company Limited Revenue Stamp



(MUTHUKRISHNAN GANAPATHY) [SrDivisional Manager]

Cashier's Initial

Authorized Signatory

Note -

Please note the Policy Number, Collection Number and date in all future correspondence.
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.

Policy No. : 61380031220200002040Document generated by QR_RENEWAL at 16/09/2022 16:32:36 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.



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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

 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.

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.

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