



POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE

UIN NUMBER - IRDAN190P0077100001

Insured's Name	:	SHRI BALAJI COTTON .				
		Insured's Details	Issuing Office Details			
Customer ID	:	POA0220364	Office Code	:	AURANGABAD DO-160400 (160400)	
Address	:	PATI BOKHRATA ROAD, KHETIA, DIST BARWANI	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005	
		KHETIA ,MADHYA PRADESH, 451881				
Phone No	:		Phone No	:	02402333572 / 02402333361	
E-mail/Fax	:	Sbckhetia@gmail.com, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	23BBGPM2857M1ZC / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details							
Policy Number : 16040036220100000120 Business Source Code							
Period of Insurance	:	From: 30/09/2022 12:39:53 PM To: 30/03/2023 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/Web Aggregator/CPSC User Jainuine Insurance Brokers Pvt. Ltd. (DA3388757) Jainuine Insurance Brokers Pvt. Ltd (SI00028623),				
Date of Proposal	:	30-Sep-22	Agent/Bancassurance/S pecified Person	:			
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA		
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //		

Premium(₹)	GST(₹)	Total (₹)	Total (₹ in words)	Receipt No. & Date
21869	3936	25805	RUPEES TWENTY-FIVE THOUSAND EIGHT HUNDRED FIVE ONLY	1604008122000000746 0 - 03/10/22

Details of Employees with monthly wages upto ₹ 15000:

Categories	Sub Categories	No of Employee	Cash Total Wages	
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Details of Employees with monthly wages above ₹ 15000:

Categories	Sub Categories	Sub Categories			Cash Total e Wages	
Cotton Ginning and pressing Factories a Presses	ond Other Regions	Other Regions			2250000	
Trade Description	Particular of Works	Location Details			luded All Sub - Contractors	
Cotton Ginning & Pressing	Skilled & Unskilled Employees, Commercial travelers :-25	shri balaji cotton, Pati bokhrata road, khetia, dist barwani				

Contractor/Sub-Contractor Details:

Serial No	Name of Contractor	Description	Categorie	No. of Wo	kers	Amount Wages
				Skilled Unskill	d Others	

VAIDESMARAN Date: 2022.10.03
Policy No.: 16040036220100000120Document generated by 40781 at 03/10/2022 15:27:43 Hours.

15:27:46-13 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.

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



Extensions under the Policy Cover

Extensions under the Folicy Cover					
Name of the Extension		Sub Limit of the Extension	Deductibles of the Extension		
Medical Extension		₹200000	NA		
Special Conditions					
	NA				
		·			
Special Exclusions					
Special Excess/Deductible N		·			
The Policy shall be subject to EMPLOY	EES C	COMPENSATION INSURANCE F	Policy clauses attached herewith.		
Clauses		Description			

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹ 21869.00
SGST	0	0
CGST	0	0
IGST	18	3936

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 03rd day of October,2022.

For and on behalf of

		The New India Assurance Company Limited
Date of Issue	: 03/10/2022	
		Duly Constituted Attorney(s)
Stamp Duty ເ	ınder the Policy is	₹
Mudrank	Dt	consolidated Stamp Fees Paid by Pay Order Numbervide receipt
number	dt	

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 : 16040022P0010842

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C