



POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE

UIN NUMBER - IRDAN190P0077100001

Insured's Name	: RADHIKA OIL INDUSTRIES					
Insured's Details		Issuing Office Details				
Customer ID	:	POA0274869	Office Code		AURANGABAD DO-160400 (160400)	
Address	:	PLOT NO 1. GAT NO 351, SHAHADA- DONDAICHA ROAD, SHAHADA DIST NANDURBAR SHAHADE ,MAHARASHTRA, 425409	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005	
Phone No	:		Phone No	:	02402333572 / 02402333361	
E-mail/Fax	:	radhikacotton@yahoo.co.in, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27AAJFR4547C1Z6 / NA	GSTIN	:	27AAACN4165C3ZP	
			SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details							
Policy Number	:	16040036220100000124	Business Source Code				
Period of Insurance	:	From: 01/10/2022 05:23:43 PM To: 30/09/2023 11:59:59 PM	Dev.Off Sevel./Broker/Corp. September 2 Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),				
Date of Proposal	:	01-Oct-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
40499	7290	47789	RUPEES FORTY-SEVEN THOUSAND SEVEN HUNDRED EIGHTY-NINE ONLY	1604008122000000750 4 - 03/10/22

Details of Employees with monthly wages upto ₹ 15000:

Categories	Sub Categories	No of	Cash Total
		Employee	Wages

Details of Employees with monthly wages above ₹ 15000:

Categories	Sub Categories	No of Employe		Cash Total Wages	
Oil Companies, importing in bulk for reta Distribution	il Other Regions	8	1500000		
Trade Description	Particular of Works	Location D	etails	Included All Sub Contractors	
Oil Mill Unit	Skilled & Unskilled Employees, Commercial travelers :-8	RADHIKA INDUSTR PLOT NO 1. GA SHAHADA-DOI ROAD,SHAHA NANDURI	IES, T NO 351, NDAICHA DA DIST		

Contractor/Sub-Contractor Details:

Serial No	Name of Contractor	Description	Categorie	No. of Workers	Amount Wages	
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THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



			S	killed Unskilled Others
Extensions under the Policy Cove	r	·		
Name of the Extension		Sub Limit of the Extension		Deductibles of the Extension
Medical Extension		₹100000		NA
Special Conditions				
•				
	NA			
Consider Frankraiana	N/A			
Special Exclusions	NA NA			
Special Excess/Deductible The Policy shall be subject to EMI		COMPENSATION INCLIDANCE	Policy class	ess attached horowith
Clauses	LUTEES C		escription	ses attached herewith.
Premium and GST Details			escription	
Tremain and 651 becaus		Rate of Ta	эx	Amount in INR
Premium				₹ 40499.00
SGST		9		3645
CGST		9		3645
IGST		0		0
set his (their) hand(s) on this 03r	d day of O	ctóber,2022.		ehalf of the Insurers has (have) hereunder For and on behalf of
			Th	e New India Assurance Company Limited
Date of Issue: 03/10/2022				
				Duly Constituted Attorney(s)
Stamp Duty under the Policy is ₹ MudrankDt numberdt	consolic	dated Stamp Fees Paid by Pay	/ Order Nu	mbervide receipt
2017-18 onwards	is more th	ugh our aggregate turnoven nan the aggregate turnoven epare an invoice in terms o	r notified ι	receding financial year from Inder sub-rule (4) of rule 48, Isions of the said sub-rule.

IRDA Registration Number: 190

Tax Invoice No : 16040022P0010889

NIA PAN NUMBER: AAACN4165C