



POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE

UIN NUMBER - IRDAN190P0077100001

Insured's Name	:	: SUYASH TEXTILES .					
Insured's Details			Issuing Office Details				
Customer ID	:	PO83930308	Office Code	:	AURANGABAD DO-160400 (160400)		
Address	:	TAL- NAVAPUR, DIST- NANDURBAR NAVAPUR ,MAHARASHTRA, 425418	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005		
Phone No	:		Phone No	:	02402333572 / 02402333361		
E-mail/Fax	:	yogesh281@yahoo.co.in, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226		
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178		
GSTIN/UIN	:	NA / NA	GSTIN	:	27AAACN4165C3ZP		
	:		SAC	:	997139 (Other non-life insurance services excl RI)		

Policy Details							
Policy Number	:	16040036220100000135	000135 Business Source Code				
Period of Insurance	:	From: 14/10/2022 12:00:01 AM 13/10/2023 11:59:59 PM	To: Dev.Off level./Broker/ Agent/Web Aggregator/O	•	:	(DA3388757)	urance Brokers Pvt. Ltd ance Brokers Pvt.Ltd
Date of Proposal	:	14-Oct-22	Agent/Banca pecified Pers		:		
Prev. Policy no.	:		Phone No	Phone No		02402350377	9850049400 / NA
Client Type	:	Non-Corporate E-mail/Fax			:	kailash@jainu	ineinsurance.co.in, / /
Dromium(₹)		CCT(7)	Total (F)	Tatal	/=	in words)	Bacaint No. & Data

Premium(₹)	GST(₹)	Total (₹)	Total (₹ in words)	Receipt No. & Date
3841	692	4533	RUPEES FOUR THOUSAND FIVE HUNDRED THIRTY- THREE ONLY	1604008122000000818 6 - 17/10/22

Details of Employees with monthly wages upto ₹ 15000:

Categories	Sub Categories	No of Employee	Cash Total Wages

Details of Employees with monthly wages above ₹ 15000:

Categories	Sub Categories	No of Employe	Cash Total Wages	
Weaving and Printing of Cloth by Hand Power	Weaving and Printing of Cloth by	6	612000	
Trade Description	Particular of Works	Location Details		ded All Sub - ontractors
(power loom)	Skilled & Unskilled Employees, Male and female Commercial travelers-6	Suyash Text Navapur, Dist- I	iles,Tal- Nandurbar	

Contractor/Sub-Contractor Details:

Serial No	Name of Contractor	Description	Categorie	No. of Workers		Amount Wages
				Skilled Unski	led Others	



Policy No. : 16040036220100000135Document generated by 40781 at 17/10/2022 13:28:53 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

 $\label{eq:constraint} Give \ your \ valuable \ feedback \ on \ https://www.newindia.co.in/portal/policyFeedbackGen.$



Extensions under the Policy Cove	r		
Name of the Extension		Sub Limit of the Extension	Deductibles of the Extension
Medical Extension		₹200000	NA
Special Conditions			
	NA		
Special Exclusions	NA		
Special Excess/Deductible	NA		
The Policy shall be subject to EMF	LOYEES (COMPENSATION INSURANCE Policy	clauses attached herewith.
Clauses		Descri	otion
Premium and GST Details			
		Rate of Tax	Amount in INR
Premium			₹ 3841.00
SGST		9	346
CGST		9	346
IGST		0	0
In witness whereof the undersign set his (their) hand(s) on this 17th	ed being (n day of C	duly authorised by the Insurers an October,2022.	d on behalf of the Insurers has (have) hereunder For and on behalf of
			The New India Assurance Company Limited
Date of Issue: 17/10/2022			
			Duly Constituted Attorney(s)
Stamp Duty under the Policy is ₹			
MudrankDt	consoli	dated Stamp Fees Paid by Pay Ord	er Numbervide receipt
number dt			
numberdt			

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 : 16040022P0011962

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C