



MARINE CARGO SPECIFIC VOYAGE POLICY

Preamble

WHEREAS the ASSURED named in the schedule hereto have represented to THE NEW INDIA ASSURANCE COMPANY LIMITED (hereinafter called company) that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated, THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clauses, Endorsement, Conditions and Warranties contained herein/in the schedule.

Insured Details		Issuing Office Details	
Insured Name	: VIJENDRA COTTON CORPORATION	Office Code	: BRANCH AURANGABAD AUTO TIE-UP (160401)
Customer ID	: POA0306942	Address	: THE NEW INDIA ASSURANCE CO. LTD. AUTO TIE-UP CITY BRANCH (160401) "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD,431003
Address	: C/O. ANKIT COTTON, AT/ PT. BANBURD, PACHORA, DIST- JALGAON.424201 PACHORA ,MAHARASHTRA, 424201	Phone No	: 02402485446 / 02402484415
Phone No	: XXXXXX9450	E-mail/Fax	: nia.160401@newindia.co.in/
E-mail/Fax	: devthakare@rediffmail.com, /	S.Tax Regn. No	: AAACN4165CST178
PAN No	:	GSTIN	: 27AAACN4165C3ZP
GSTIN/UIN	: 27AGAPA4942K1ZJ / NA	SAC	: 997135 (Marine,aviation and other transport insurance srv)

Policy Details		Business Source Code	
Policy Number	: 16040121220100000003	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User	: Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757) Jainuine Insurance Brokers Pvt.Ltd. - (SI00028623),
Date of Issue	: 04/10/2022 06:21:06 PM	Agent/Bancassurance/Specialized Person	:
Date of Proposal	: 04-Oct-22	Phone No	: 02402350377, 9850049400 / NA
Client Type	: Corporate	E-mail/Fax	: kailash@jainuineinsurance.co.in, //

Premium Details					
Premium	GST	Stamp Duty	Total (₹)	Rupees (in words)	Receipt No. & Date
3364	606	1	3971	RUPEES THREE THOUSAND NINE HUNDRED SEVENTY-ONE ONLY	100000892210000 35345 - 04/10/22

Journey Details		
Journey From	Journey To	Transport Mode
GOHARGANJ, Madhya Pradesh	Dorli, YAVATMAL Maharashtra	Rail/Road

Cargo Sum Insured (₹) : 5175000
Lorry Receipt(LR) Number : 1675
 Date : 04/10/2022
Basis of valuation + % Extra for Commodity : C + 10
Transit Type : Road
Commodity description : Cotton FP Bales
Packaging description : STANDARD AND CUSTOMERY
Risk Covered : ITC-A
 SRCC

Excess	: .5 % of Claim Subject to minimum of ₹500
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Terms of Insurance-

As per following clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated. This Insurance is subject to Important notice, conditions and warranties attached. Also this contract is subject to such regulations as in force at the time the risk hereunder.

- 1) Inland Transit (Rail or Road) Clause – A (2010)
- 2) Strikes Riots And Civil Commotions Clause (Inland Transit Not In Conjunction With Ocean Going Voyage)
- 3) Communicable Disease Exclusion Clause (Cargo) JC2020-011
- 4) Institute Radioactive Contamination Exclusion Clause (1.10.1990)
- 5) Institute Radioactive Contamination Chemical, Biological Biochemical and Electromagnetic Weapons Excl. Clause 10/11/2003 CL 370
- 6) Termination of Transit Clause JC2009/056 01/01/2009
- 7) Subject to Important Notice Clause
- 8) Subject to Sanctions, Limitation & Exclusion Clause JC 2010/014(11.08.2010)
- 9) Subject to Private Carriers Warranty
- 10) Subject to closed vehicle Warranty
- 11) Cargo Termination of Transit (Storage) Clause
- 12) Special Condition: Truck No. RJ-09-GB-7521

Invoice No. VCC/CB/19/22-23

Date- 4/10/2022.

Invoice Amount ₹ 47,04,201/-

LR/ Bilty No. 1675

Date- 4/10/2022.

Survey & Claim Settlement

In the event of loss or damage which may result in a claim under this Insurance immediate notice must be given to Nearest New India Assurance Company's Office or The Policy Issuing Office without which no claim or loss will be paid.

Claim Payable By:

In the event of loss or damage which may result in a claim under this insurance immediate notice must be given to Policy Issuing Office

Premium and GST Details

	Rate of Tax	Amount in INR
Taxable Value		3365
SGST	9	303
CGST	9	303
IGST	0	0

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 04th day of October,2022

To view the certificate details please visit
[:https://online.newindia.co.in/authenticatecertificate.](https://online.newindia.co.in/authenticatecertificate)

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 04/10/2022

(MR. MANISH SAKHARAM ZADODE)
[BRANCH MANAGER]

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 : 16040122P0002851

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C
