



MARINE CARGO OPEN 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	:	YOGESHWARI TRADING COMPANY .				
Customer ID	:	PO91962915	Office Code	:	BRANCH AURANGABAD AUTO TIE- UP (160401)	
Address	:	PROP:ARCHNA ASARAM KULKARNI ADD.KOLHER ROAD TQ.GEORAI DIST.BEED GEVARAI ,MAHARASHTRA, 431127	Address	:	THE NEW INDIA ASSURANCE CO. LTD. AUTO TIE-UP CITY BRANCH (160401) "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD,431003	
Phone No	:		Phone No	:	02402485446 / 02402484415	
E-mail/Fax	:	gbkasat2003@yahoo.co.in, /	E-mail/Fax	:	nia.160401@newindia.co.in/	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27JQLPK5287D1ZB / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997135 (Marine, aviation and other transport insurance srvc)	

Policy Details			Business Source Code			
Policy Number	:	16040121220200000069	Dev.Off. level/Broker/Web Aggregator		: Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),	
Period of Insurance	:	From: 18/10/2022 12:07:19 PM To: 17/10/2023 11:59:59 PM	Agent/Bancassurance/Spe cified Person/CPSC User	:		
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA	
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //	

Co-Insurance Details			
	0		

Incoming/Outgoing	Company	Office Code	% of Share	Share
OUT	CHOLAMANDALAM MS GENERAL INSURANCE CO. LTD.	210301_PUNE BRANCH - 1	49	4410
OUT	NEW INDIA ASSURANCE CO. LTD.	BRANCH AURANGABAD AUTO TIE-UP	51	4590

	Premium D	Details			
Premium	GST	Stamp Duty	Total Premium(₹)	Rupees (in words)	Receipt No and Date
9000	1620	1	10621	RUPEES TEN THOUSAND SIX HUNDRED TWENTY- ONE ONLY	16040181220000002105 - 18/10/22

Journey Details		
Journey From	Journey To	Transport Mode
From Anywhere in India To	Anywhere in India (Exclude dispatches of within Maharashtra)	Rail/Road
Total Sum Insured (₹)	: Risk 1 :: 30000000	
Basis of valuation + % Extra for Cargo Sum Insured	: Risk 1 :: CIF + 10	
Commodity description	: Risk 1 :: Cotton Seed Wash Oil, All type	s of vegetable Oil

Policy No. : 1604012122020000069Document generated by 31229 at 18/10/2022 15:56:52 Hours. 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. 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 redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in.



Excess	: Excess Applicable on - Claim Amount, Excess(%) Claim Amount
Risk Covered	: Risk 1 :: ITC-A, SRCC,
Days of Storage	: Risk 1 :: NA
Place of Storage	: Risk 1 :: NA
Transit By	: Risk 1 :: Air,Rail/Road
Limit per location (₹)	: Risk 1 :: 3000000
Limit per Registered Post (₹)	: Risk 1 :: 0
Limit per any one Aircraft (₹)	: Risk 1 :: 0
Limit per any one Vessel (₹)	: Risk 1 :: 0
Single Carrying Limit (₹)	: Risk 1 :: 6000000
Packaging description	: Risk 1 :: standard and customary

Terms of Insurance

Subject to Open Policy Clause and the following clauses written and attached hereunder, current on date of sailing or dispatch and/or otherwise stated. This Insurance is subject to Important notice, conditions and warranties attached herewith. Also this contract is subject to such regulations as in force at the time of risk on each dispatch/shipment attaches hereunder.

The Declaration should be furnished, in case of imports within 15 days from the date of the shipment or immidiately on reciept of shipping documents or before arrival of ship, whichever is earlier, and in case of exports immidiately on shipment.

This insurance is to remain in force for a period of 12 months i.e. from 18/10/2022 12:07:19 PM to 17/10/2023 11:59:59 PM unless the Sum Insured is previously exhausted by declaration/certificates.

Inland Transit (Rail or Road) Clause – A (2010)
 Subject to Duty Insurance Clause
 Subject to Increase Value Clause

- Strikes Riots And Civil Commotions Clause (Inland Transit Not In Conjunction With Ocean Going Voyage)
 Machinery Subject to Clause : Institute Replacement Clause -01.01.34
- 6) Subject To Sellers Interest Clause

7) Limit Per Location Clause: Not withstanding anything to the contrary contained in this contract, underwriters liability in respect of any one accident or series of accidents arising from the same event in any one location shall not exceed the Limit Per Location amount stated in the policy/open cover

- B) Communicable Disease Exclusion Clause (Cargo) JC2020-011
 9) Institute Radioactive Contamination Exclusion Clause (1.10.1990)
- 10) Institute Radioactive Contamination Chemical, Biological Biochemical and Electromagnetic Weapons Excl. Clause
- 10/11/2003 CL 370
- 11) Termination of Transit Clause JC2009/056 01/01/2009 12) Subject to Important Notice Clause
- 13) Subject to Sanctions, Limitation & Exclusion Clause JC 2010/014(11.08.2010) 14) Subject to Private Carriers Warranty
- Subject to closed vehicle Warranty 15)
- Cargo Termination of Transit (Storage) Clause
 Special Condition: All risk + SRCC+ ITC A + Invoice + 10 %.
- Coverage for Loading and Unloading

Each and every consignment should be declared through email on monthly basis into excel sheet format. In respect of spot sales, only those

Survey & Claim Settlement By

In Case of IMPORTS/DOMESTICS :

Survey : In the event of loss or damage which may result in a claim under this Insurance immediate notice must be given to the Policy Issuing Office or nearest Branch/Divisional Office.

Nearest New India Assurance Company's Office or The Policy Issuing Office

Claims Payable By:

Policy Issuing Office		
	Rate of Tax	Amount in INR
Taxable Value		₹9001
SGST	9	810
CGST	9	810
IGST	0	0

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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 18th day of October,2022

For and on behalf of The New India Assurance Company Limited

Duly Constituted Attorney(s)

To intimate a Marine Cargo Claim, please visit the url https://newindia.co.in/portal/intimateClaim

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 : 16040122P0003119

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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