

पॉलिसी अनुसूची/ Policy Schedule - Money Insurance	
Policy Number: 321800592210000212	व्यवसाय स्रोत /Business Source: 910275
जारीकर्ता कार्यालय/Issuing Office कार्यालय कोड /Office Code: 321800 कार्यालय पता /Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001. State Code: 23 , Madhya Pradesh GSTIN: 23AAACN9967E1ZB Contact Number: 7272 250074 Mobile Number:	विक्रय चैनल वविरण/Sales Channel Code: 91027500000001 नाम /Name: Jainuine insurance brokers pvt Ltd - Indore Contact Number: 9893131223 सह दलाल कोड / Co Broker Code:
	कस्टमर केयर टॉल फ्री नंबर/Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in



ग्राहक का नाम /Customer Name: MA KALKA POLISHER & CLEANERS	ग्राहक आईडी /Customer ID: 9701958598	पैन /PAN:
पता/ Address: PLOTNO.25 & 33 CHOPDA GRAMIN ADHIKRUT SAHAKARI VASAHATA LTD. CHOPA DISTT. JALGAON(M.S.), City: JALGAON - DISTRICT OTHERS, District: JALGAON, State: MAHARASHTRA, PIN: 425107. Cell: 9893131223	फोन /Phone:	
	ई-मेल /E-Mail: slibindore@gmail.com	

पॉलिसी: 20/10/2022 के 00:00 से 19/10/2023 की मध्य रात्र तक प्रभावी /Policy Effective from 00:00 hours, on 20/10/2022 to midnight of 19/10/2023

प्रीमियम/ Premium	₹ 3,250.00	कवर नोट संख्या और तिथि/ Cover Note Number and Date	लागू नहीं/NA
CGST	₹ 0.00	प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800221019542969 Dt. 19/10/2022
SGST/UTGST	₹ 0.00		
IGST	₹ 585.00		
कम:जीएसटी_टैडीएस / Less:GST_TDS	₹ 0.00	रसीद संख्या और तिथि/Receipt Number and Date	321800812210003598 Dt. 19/10/2022
पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	₹ 0.00	पछिली पॉलिसी संख्या और समाप्ति तिथि/ Previous Policy Number and Expiry Date	लागू नहीं/NA
कुल /Total Amount	₹ 3,835.00		

(Rupees Three Thousand Eight Hundred Thirty Five Only.)

Money in Transit

Section I	Description	Limit of liability for Any one Loss(₹)	Estimated Annual Carrying Amount(₹)
Sec I - B (Money in Transit)	MONEY TRANSIT FOR INSURED PREMISES TO BANK/PO,AT VARIOUS DISTRUBUTOR /SHOPKEEPR AND VICEVERSA	50,00,000.00	3,00,00,000.00
Sec I - A (Wages in Transit)	FROM BANK/PO TO INSURED PREMISES	5,00,000.00	50,00,000.00

Money in Safe / Counter

Section II	Description	Identification Number	Sum Insured(₹)
Safe Details	INSURED PREMISES SHOP PREMISES & RESI PLOT NO 32 GAJANAND NAGAR CHOPDA DIST JALGAON MS	N/A	50,00,000.00

Additional Covers

Assault Risks (No. of person)	NA	Riot and Strike Extension	No
Assault Risk Sum insured per person(₹)	NA	Terrorism	No
		Infidelity risk	No

Note:

प्रमाण-पत्र /Certificate- Money Insurance	
पॉलिसी संख्या/ Policy Number: 321800592210000212	व्यवसाय स्रोत /Business Source: 910275
जारीकर्ता कार्यालय/ Issuing Office कार्यालय कोड /Office Code: 321800 कार्यालय पता /Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001. State Code: 23 , Madhya Pradesh GSTIN: 23AAACN9967E1ZB Contact Number: 7272 250074 Mobile Number:	विक्रय चैनल विवरण/ Sales Channel Details विक्रय चैनल विवरण/ Sales Channel Code: 91027500000001 नाम/ Name: Jainuine insurance brokers pvt ltd - Indore Contact Number: 9893131223
	कस्टमर केयर टॉल फ्री नंबर/ Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in



Section IA: Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insured's premises from the time the cash is received at the bank by the Insured or the authorized employee/s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such Cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the Insured to provide for such cash are covered in transit from the Premises to the Bank

Section IB: Money (other than described in IA above) in the personal custody of the Insured or the authorized employee/s of the Insured whilst in direct transit between the premises and the bank or post office and vice versa

Section II: Cash (other than described in section IA above) whilst on the premises during business hours or whilst secured in locked safe or locked strong room on the Insured's premises out of business hours against the risk of burglary, housebreaking and hold-up

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकित कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट <https://nationalinsurance.nic.co.in> पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्ति जसिके लएि यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है कऱि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकति नरिसूत हो जाएगी। **IN WITNESS WHEREOF**, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this **19/October/2022**. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website <https://nationalinsurance.nic.co.in> shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that **IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

कृते नेशनल इन्श्योरेन्स कंपनी
लमिटिड/ **For and on behalf of National Insurance
Company Limited**

इंश्योरेन्सइंडियालमिटिड

स्टांप ड्यूटी
**Stamp
Duty:**
(₹ 0.50)

धृतिमान बर्दान / DHRITIMAN BARDHAN
मुख्य प्रबंधक/Chief Manager
नेशनल इन्श्योरेन्स कंपनी लिमिटेड
National Insurance Co. Ltd.
प्रधान कार्यालय/Head Office
3, मीडिलेन स्ट्रीट, कोलकाता-700 071
3, Middleton Street, Kolkata-700 071

अधकित हस्ताक्षरकर्ता/ **Authorized
Signatory**

TAX INVOICE

Invoice Serial No: 30878O2P00000212

Invoice Date: 19/10/2022

Details of Supplier:

National Insurance Company Limited.,
DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001
State : 23 , Madhya Pradesh
GSTIN No : 23AAACN9967E1ZB

Details Of Receiver : MA KALKA POLISHER & CLEANERS

Address : PLOTNO.25 & 33 CHOPDA GRAMIN ADHIKRUT SAHAKARI VASAHATA LTD. CHOPA DISTT. JALGAON(M.S.)
City : JALGAON - DISTRICT OTHERS,
District: JALGAON,
State: MAHARASHTRA,
PIN: 425107.

Place Of Supply State : Maharashtra
State Code : 27
GSTIN No : 27ABBFM3270C1ZN

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non-life insurance services (excluding reinsurance services)	3,250	0%	3,250	0%	0	0%	0	18%	585	0
TOTAL		3,250		3,250		0		0		585	0

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :
₹ 3,835

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees
Three Thousand Eight Hundred Thirty Five
केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

कृते नेशनल इन्श्योरेंस कंपनी लिमिटेड/ For
and on behalf of National Insurance Company Limited


धृतिमान बर्दान / DHRITAMAN BARDHAN
मुख्य प्रबन्धक/Chief Manager
नेशनल इन्श्योरेंस कंपनी लि.
National Insurance Co. Ltd.
प्रधान कार्यालय / Head Office
3, मिडिल्टन स्ट्रीट, कोलकाता-700 071
3, Middleton Street, Kolkata-700 071

अधिकृत हस्ताक्षरकर्ता/ Authorized Signatory

