



#### 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

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Insured Name		: SHREEJEE COTEX					
Customer ID	:	PO85897285	Office Code	:	BRANCH AURANGABAD AUTO TIE- UP (160401)		
Address	ress : A/P. SAWALDA, TQ. SHAHADA-425409- DIST. NANDURBAR ( M.S ). SHAHADE ,MAHARASHTRA, 425409		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	:	jsk.rajeshkediya@gmail.com, kailash@jainuineinsurance.co.in/	E-mail/Fax	:	nia.160401@newindia.co.in/		
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178		
GSTIN/UIN	:	27ACOFS1278G1ZQ / NA	GSTIN	:	27AAACN4165C3ZP		
	:		SAC	:	997135 (Marine, aviation and other transport insurance srvc)		

**Business Source Code Policy Details Policy Number** 16040121220200000121 Dev.Off. level/Broker/Web Jainuine Insurance Brokers Pvt. Ltd. -(DA3388757) Jainuine Insurance Brokers Pvt.Ltd. -Aggregator (SI00028623) Agent/Bancassurance/Spe cified Person/CPSC User Period of Insurance From: 09/11/2022 03:00:29 PM To: 08/11/2023 11:59:59 PM Prev. Policy no. Phone No 02402350377, 9850049400 / NA Client Type Non-Corporate E-mail/Fax kailash@jainuineinsurance.co.in,

Co-Insurance Details

	incurance Detaile			
Incoming/Outgoing	Company	Office Code	% of Share	Share
OUT	CHOLAMANDALAM MS GENERAL INSURANCE CO. LTD.	210301_PUNE BRANCH - 1	49	9800
OUT	NEW INDIA ASSURANCE CO. LTD.	BRANCH AURANGABAD AUTO TIE-UP	51	10200

### **Premium Details**

Premium	GST	Stamp Duty	Total Premium(₹)	Rupees (in words)	Receipt No and Date
20000	3600	1	23601	RUPEES TWENTY- THREE THOUSAND SIX HUNDRED ONE ONLY	16040181220000002370 - 09/11/22

Journey Details

Journey From	Journey To	Transport Mode	
Anywhere in India To	Anywhere in India.	Rail/Road	

Total Sum Insured (₹) : Risk 1 :: 100000000

Basis of valuation + % Extra for Cargo : Risk 1 :: CIF + 10

Sum Insured

Commodity description : Risk 1 :: Cotton seed oil cake

Packaging description : Risk 1 :: Standard and Customery

Policy No. : 16040121220200000121Document generated by 38569 at 09/11/2022 15:08:16 Hours.

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

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.

#### THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



: Risk 1 :: 6000000 Single Carrying Limit (₹)

Limit per any one Vessel (₹) : Risk 1 :: 0 Limit per any one Aircraft (₹) : Risk 1 :: 0 Limit per Registered Post (₹) : Risk 1 :: 0

Limit per location (₹) : Risk 1 :: 50000000 **Transit By** : Risk 1 :: Rail/Road Place of Storage : Risk 1 :: NA **Days of Storage** : Risk 1 :: NA

**Risk Covered** : Risk 1 :: ITC-A, SRCC,

: Excess Applicable on - Claim Amount, Excess(%) Claim Amount - .5% Excess

## 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 09/11/2022 03:00:29 PM to 08/11/2023 11:59:59 PM unless the Sum Insured is previously exhausted by declaration/certificates.

- 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) 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.
- 4) Communicable Disease Exclusion Clause (Cargo) JC2020-011 5) Institute Radioactive Contamination Exclusion Clause (1.10.1990)
- 6) Institute Radioactive Contamination Chemical, Biological Biochemical and Electromagnetic Weapons Excl. Clause 10/11/2003 CL 370
- 7) Termination of Transit Clause JC2009/056 01/01/2009 8) Subject to Important Notice Clause
- 9) Subject to Sanctions, Limitation & Exclusion Clause JC 2010/014(11.08.2010) 10) Subject to Private Carriers Warranty 11) Subject to closed vehicle Warranty

- 12) Cargo Termination of Transit (Storage) Clause
- 13) Special Condition: Coverage for Loading and Unloading, "FOR" SALES TO BE COVERED. Each and every consignment should be declared through email on a Monthly Basis excel sheet format.only Spot Sale consignments are required to be declared which are having

## 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 INK
Taxable Value		₹20001
SGST	9	1800
CGST	9	1800
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 09th day of November,2022

> For and on behalf of The New India Assurance Company Limited

# THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



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 : 16040122P0003601

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C