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| पॉलिसी अनुसूची/ Policy Schedule - Money Insurance | |
| Policy Number: 32180059221000234 | 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 |

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| ग्राहक का नाम /Customer Name: M/S VEERENDRA AGRO FARMER PRODUCER CO | ग्राहक आईडी /Customer ID: 9702228093 | पैन /PAN: |
| पता/ Address: GAT NO 201/1 N H NO 6 JALGAON DHULE DALVEL TH PAROLA DIST JALGAON MH PIN CODE 425113 , City: JALGAON - DISTRICT OTHERS, District: JALGAON, State: MAHARASHTRA, PIN: 425113. Cell: 9893131223 | फोन /Phone: | ई-मेल /E-Mail: slibindore@gmail.com |

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| पॉलिसी: 07/11/2022 के 12:05 से 06/11/2023 की मध्य रात्र तक प्रभावी /Policy Effective from 12:05 hours, on 07/11/2022 to midnight of 06/11/2023 | | | |
| प्रीमियम/ Premium | ₹ 13,750.00 | कवर नोट संख्या और तिथि/ Cover Note Number and Date | लागू नहीं/NA |
| CGST | ₹ 0.00 | प्रस्ताव संख्या और तिथि/Proposal Number and Date | 8800221107621208 Dt. 07/11/2022 |
| SGST/UTGST | ₹ 0.00 | | |
| IGST | ₹ 2,475.00 | | |
| कम:जीएसटी_टैडीएस / Less:GST_TDS | ₹ 0.00 | रसीद संख्या और तिथि/Receipt Number and Date | 321800812210003926 Dt. 09/11/2022 |
| पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty | ₹ 0.00 | पछिली पॉलिसी संख्या और समाप्ती तिथि/ Previous Policy Number and Expiry Date | लागू नहीं/NA |
| कुल /Total Amount | ₹ 16,225.00 | | |
| (Rupees Sixteen Thousand Two Hundred Twenty 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 /RESIDENCE TO BANK/PO,AT VARIOUS DISTRUBUTOR /SHOPKEEPR AND VICEVERSA | 50,00,000.00 | 20,00,00,000.00 |
| Sec I - A (Wages in Transit) | FROM BANK/PO TO INSURED PREMISES AND VICEVERSA | 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 AND RESI PLOT NO6 & 7 AGRASEN NAGAR OLD SHIRPUR ROAD CHOPD DIST JALGAON | 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 |

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| प्रमाण-पत्र /Certificate- Money Insurance | |
| पॉलिसी संख्या/ Policy Number: 32180059221000234 | 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 |

Note:

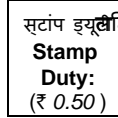
Section IA: Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insured's premises from the time the cash is received at the bank by the Insured or the authorized employee/s of the Insured until delivered at the premises or other place of 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 अधिकृत 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 अभवियक्तजिसिके लएि यह वशिषिट 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 कि प्रीमियम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिसत हो जाएगी। ***IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 09/November/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'***

इंश्योरेन्सइंडियालमिडिड



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

अधिकृत हस्ताक्षरकर्ता/ Authorized
Signatory

TAX INVOICE

Invoice Serial No: 30878O2P00000234

Invoice Date: 09/11/2022

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 : M/S VEERENDRA AGRO FARMER PRODUCER CO

Address : GAT NO 201/1 N H NO 6 JALGAON DHULE DALVEL TH PAROLA DIST JALGAON MH PIN CODE 425113
City : JALGAON - DISTRICT OTHERS,
District: JALGAON,
State: MAHARASHTRA,
PIN: 425113.

Place Of Supply State : Maharashtra
State Code : 27
GSTIN No : 27AAHCV3810B1ZO

| 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) | 13,750 | 0% | 13,750 | 0% | 0 | 0% | 0 | 18% | 2,475 | 0 |
| TOTAL | | 13,750 | | 13,750 | | 0 | | 0 | | 2,475 | 0 |

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :
₹ 16,225

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees
Sixteen Thousand Two Hundred Twenty Five
केवल/Only.

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

E.&O.E

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

अधिकृत हस्ताक्षरकर्ता/ Authorized Signatory

