पॉलिसी अनुसूची/ Policy Schedule - Money Inst Policy Number: 321800592210000233	व्यवसाय स्त्रोत /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 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: M/S TARACHAND HARSAY AGRAWAL	ग्राहक आईडी /Customer ID: 9702003813	पैन /PAN:		
पता/ Address: AT VIRWADE TALUKA CHOPDA DIST JALGAON	फोन /Phone:			
, City: JALGAON - DISTRICT OTHERS, District: JALGAON, State: MAHARASHTRA, PIN: 425107. Cell: 9893131223	ई-मेल /E-Mail: slibindore@gmail.com			

पॉलिसी: 07/11/2022 के 12:59 nidnight of <mark>06/11/2023</mark>	से 06/11/2023 की मध	ग्य रात्रि तक प्रभावी /Policy Effecti	ve from 12:59 hours, on 07/11/2022 to		
प्रीमयिम/ Premium	₹ 8,750.00	कवर नोट संख्या और तथि7ि Cover Note Number and Date	लागू नहीं/NA		
CGST	₹ 0.00				
SGST/UTGST	₹ 0.00	. , , , , , , , , , , , , , , , , , , ,			
IGST	₹ 1,575.00	प्रस्ताव संख्या और तथि।/Proposal	8800221107621426 Dt. 07/11/2022		
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00	Number and Date			
निर्प्राप्ति योग्य स्टाम्प इ्यूटी Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तथिि/Receipt Number and Date	321800812210003919 Dt. 07/11/2022		
कुल /Total Amount	₹ 10,325.00	पछिली पॉलिसी संख्या और समाप्ती तथि7 Previous Policy Number and Expiry Date	लागू नहीं/NA		

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	10,00,00,000.00				
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 PLOT NO 4 & 18 AGRASEN NAGAR SHIRPUR ROAD TAL CHOPDA 425107 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					

Note:

परमाण-पतर /Certificate- Money Insurance पॉलिसी संखया/Policy Number: व्यवसाय सृत्रोत /Business Source: 910275 321800592210000233 विक्रिय चैनल विवरण/Sales Channel Details विक्रय चैनल विवरण/ Sales Channel Code: जारीकर्ता कार्यालय/Issuing Office 91027500000001 कार्यालय कोड /Office Code: 321800 नाम/ Name: Jainuine insurance brokers pvt Itd - Indore कारयालय पता /Office Address: DEWAS Contact Number: 9893131223 DIVISION 2-TARANI COLONY, A.B ROAD,, 455001. कस्टमर केयर टॉल फ्री नंबर/Customer State Code: 23, Madhya Pradesh GSTIN: 23AAACN9967E1ZB **Care Toll Free Number:** Contact Number: 7272 250074 1800 345 0330 Mobile Number: 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

जिसकी गवाही में दिनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवत अधिकृत किया जा रहा है उसके हाथ निर्धारित किए 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 पढ़ा जाए तथा कोई भी शब्द या अभवियक्त जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमिता निरस्त हो जाएगी। /IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this O7/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'

इंश्योरेन्सइंडयालिमटिंड

कृते नेशनल इन्श्योरेन्स कंपनी स्टांप इयू**डी**मिटिड/ For and on behalf of National Insurance Stamp Company Limited Duty: (₹ 0.50)

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

Printed on 09/01/2023 by ID: 32180099

TAX INVOICE

Invoice Serial No: 30878O2P00000233 Invoice Date: 07/11/2022

Details of Supplier:

National Insurance Company Limited.,

DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001

23, Madhya Pradesh State: GSTIN No: 23AAACN9967E1ZB

Details Of Receiver: M/S TARACHAND HARSAY AGRAWAL
Address: AT VIRWADE TALUKA CHOPDA DIST JALGAON

City: JALGAON - DISTRICT OTHERS,

District: JALGAON, State: MAHARASHTRA,

PIN: 425107.

Maharashtra Place Of Supply State:

State Code:

27AEAPA1746B1ZA GSTIN No:

सैवा का विदरण/ SAC Code Descripti on of Service		कुल/Total(₹)	छूट/ टैक्स योग्य/ Discou मूल्य/Taxabl nt Value(र)	मूल्य/Taxable	सीजीएसटी CG	ं की राशां/ ST		यूटीजीएसटी/ UTGST	आईजीएस	ਸਟੀ/ IGST	केरला बाढ़ उपकर/Kerala Flood Cess
				Value(<)	दर/Rate	राशा∕ि Amount(₹)	दर/Rate	राशि Amount(₹)	दर/Rate	राशा∕ि Amount(₹)	राशा⁄/Amount(₹)
997139	Other non- life insurance services (excluding reinsuranc e services)	8,750	0%	8,750	0%	0	0%	0	18%	1,575	0
TOTAL		8,750		8,750		0		0		1,575	0

कुल इनवॉयस मूल्य (अंकों में)Total Invoice Value (In figures) :

₹10,325

कुल इनवॉयस मूल्य (शब्दों में)Total Invoice Value (In words) : रूपए/Rupees

Ten Thousand Three Hundred Twenty Five

केवल/Only.

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

E.&.O.E

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

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

