Signature Not Verified





POLICY SCHEDULE FOR MONEY INSURANCE

UIN NUMBER - IRDAN190P0127100001

Insured's Name	:	M/S. INDIRA EXIM PVT LTD.	·			
Insured's Details			Issuing Office Details			
Customer ID		PO88974838 Office Code		:	AURANGABAD DO-160400 (160400)	
Address	:	"GAT NO, 53, NEELAPUR ROAD, AT- WANI, DIST- YAVATMAL 445304".	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005	
		WANI ,MAHARASHTRA, 445304				
Phone No			Phone No	:	02402333572 / 02402333361	
E-mail/Fax	:	icp_wani@yahoo.in, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226	
PAN No			S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN		27AADCI2511G1ZZ / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details					
Policy Number	:	16040048220300000086	Business Source Code		
Period of Insurance	:	From: 23/12/2022 05:49:44 PM To: 22/12/2023 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User		Jainuine Insurance Brokers Pvt. Ltd. (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),
Date of Proposal	:	23-Dec-22	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA
Client Type	T:	Non-Corporate	E-mail/Fax	T:	kailash@jainuineinsurance.co.in, //

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
17600	3168	20768	RUPEES TWENTY THOUSAND SEVEN HUNDRED SIXTY-EIGHT ONLY	1604008122000001171 2 - 23/12/22

Money in safe (during and after business hours)		:	9900000		
Money in Till		••	9900000		
Sl. No.	Location & Address				
1	Indira Exim Pvt Ltd. Gat no, 53, Neelapur Road, At- Wani, Dist- Yavatmal				
2	FACTORY, BANKS, OFFICE, RESIDENCE OF ALL PARTNER.				

SECTION - 1							
SI. No.	Sub Sections	Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts	Single Carrying Limits for - Foreign Currency				
1.	Section 1 A - Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insureds 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.	9900000	0	0			
2.	Section 1 B - Money (other than described in 1A 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	9900000	0	0			

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



3.	Section 1 C - Money (other and 1B above) collected by custody of the insured or the employee/s of the insured premises or hank within a page 48 hours from the time of oversa	whilst in transit to the period not exceeding	9900000	0	0			
Limit o	over the Policy period ated Annual Turnover)	: 200000000						
Ontion	and Covers		Sum Insured	/ 				
SRCC	nal Covers		NOT OPTED	I (x)				
Terror			NOT OPTED					
TCITOI			INOT OF TED					
Risk D	etails							
1.	Maximum distance over wh		yed	50				
2.	Details of employees hand	ing Money		BY OWNER OR AUTHORIZED EMPLOYEE"				
3.	How is money carried			ANY; TYPES BAGS,TRUNKS,SUITCAS				
4.	Mode of Transport			BY PUB/PVT VEH,WALK				
5.	Details of armed guards or			NC				
6.	Details of money kept outs			SAFE CONSIST OF WOODEN & STEEL CUPBOARD				
7.	Is the safe where money is		or floor	No				
8.	By whom are the keys held			NA				
9.	Are all the keys removed o	utside business hours		No)			
Specia	l Conditions	: Section 1 A ₹ 99,0 Section 1 B ₹ 99,00, Section 1 C ₹ 99,00,	,000/- (99 Lakhs)				
		Section 2 ₹ 99,00,0	00/- (99 Lakhs)					
Exces	5	: 1000						
This P	olicy shall subject to MONEY II	NSURANCE policy clauses	s attached here	with.				
Premiu	m and GST Details		Rate of Tax	Amount in INR				
Premiu	m		Nate of Tax	₹ 17600.00				
SGST			9	1584				
CGST			9	1584				
IGST			0	0				
In witr set his	ness whereof the undersigned s (their) hand(s) on this 23rd d	being duly authorised by ay of December,2022.	y the Insurers ar	nd on behalf of the Insurers	s has (have) hereunder			
Date o	of Issue: 23/12/2022			For and on The New India Assuran				
				Duly Constitute	ed Attorney(s)			
	nkDt erdt Sta			der Number	vide receipt			

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



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: 16040022P0017285

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C