



Issuing Office Details

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.

ANAND OIL INDUSTRIES **Insured Name Customer ID** POA1881522 Office Code BRANCH AURANGABAD AUTO TIE-UP (160401) GUT NO.178, PIMPELNER AREA SINDKHEDRAJA ROAD NEAR Address Address THE NEW INDIA ASSURANCE CO. **BULDHANA URBAN BANK** AUTO TIE-UP CITY BRANCH (160401 WAREHOUSE DEULGAON RAJA JEEVAN SUMAN" BUILDING, PLOT 443204 NO. 3, N-5, CIDCO, AURANGABAD,431003 DEOLGAON RAJA, MAHARASHTRA,

443204 02402485446 / 02402484415 Phone No Phone No E-mail/Fax asdongaonkar@gmail.com, / E-mail/Fax nia.160401@newindia.co.in/ **PAN No** S.Tax Regn. No AAACN4165CST178 **GSTIN/UIN** 27AENPD0789E1ZF / NA **GSTIN** 27AAACN4165C3ZP SAC 997135 (Marine, aviation and other transport insurance srvc)

Policy Details Business Source Code 16040121220200000232 Dev.Off. level/Broker/Web Policy Number Jainuine Insurance Brokers Pvt. Ltd. -(DA3388757) Aggregator Jainuine Insurance Brokers Pvt.Ltd. -(SI00028623), Agent/Bancassurance/Spe cified Person/CPSC User From: 12/12/2022 05:25:18 PM To: Period of Insurance 11/12/2023 11:59:59 PM 02402350377, 9850049400 / NA Prev. Policy no. Phone No Client Type : Corporate E-mail/Fax kailash@jainuineinsurance.co.in, //

Co-Insurance Details

Insured Details

| Incoming/Outgoing | Company | Office Code | % of Share | Share | | | |
|-------------------|---|----------------------------------|------------|-------|--|--|--|
| OUT | CHOLAMANDALAM MS GENERAL INSURANCE CO. LTD. | 210301_PUNE BRANCH - 1 | 49 | 1470 | | | |
| OUT | NEW INDIA ASSURANCE CO. LTD. | BRANCH AURANGABAD AUTO TIE-UP | 51 | 1530 | | | |

Premium Details

| - | 1 Totalian Potalia | | | | | |
|---|--------------------|-----|---------------|------------------|---|---------------------------------|
| | Premium | GST | Stamp Duty | Total Premium(₹) | Rupees (in words) | Receipt No and Date |
| | 3000 | 540 | 1 | 3541 | RUPEES THREE THOUSAND FIVE HUNDRED FORTY- ONE ONLY | 16040181220000002847 - 12/12/22 |

Iourney Details

| journey 5 cums | | | | |
|----------------------|--------------------|----------------|--|--|
| Journey From | Journey To | Transport Mode | | |
| Anywhere in India To | Anywhere in India. | Rail/Road | | |

Total Sum Insured (₹) : Risk 1 :: 10000000 Basis of valuation + % Extra for Cargo : Risk 1 :: CIF + 10 Sum Insured

Commodity description : Risk 1 :: All types of Vegetable Oil and Cotton Seed Wash Oil

Packaging description : Risk 1 :: STANDARD AND CUSTOMARY

Policy No.: 16040121220200000232Document generated by 31229 at 12/12/2022 17:36:28 Hours.

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

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



Single Carrying Limit (₹) : Risk 1 :: 4500000

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 :: 10000000 **Transit By** : Risk 1 :: Rail/Road : Risk 1 :: NA Place of Storage

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

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

: Risk 1 :: NA

Terms of Insurance

Days of Storage

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 12/12/2022 05:25:18 PM to 11/12/2023 11:59:59 PM unless the Sum Insured is previously exhausted by declaration/certificates.

- 1) Inland Transit (Rail or Road) Clause A 2) Subject to Duty Insurance Clause
- 3) Subject to Increase Value Clause
- Strikes Riots And Civil Commotions Clause (Inland Transit Not In Conjunction With Ocean Going Voyage)
 Machinery Subject to Clause: Institute Replacement Clause -01.01.34
 Subject To Sellers Interest Clause

- 6) Subject To Sellers Interest Clause
 7) 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.
- 8) Communicable Disease Exclusion Clause (Cargo) JC2020-011
- 9) Institute Radioactive Contamination Exclusion Clause (1.10.1990)
- 10) Institute Radioactive Contamination Chemical, Biological Biochemical and Electromagnetic Weapons Excl. Clause 10/11/2003 CL 370
- 11) Termination of Transit Clause JC2009/056 01/01/2009
- 12) Subject to Important Notice Clause
 13) Subject to Sanctions, Limitation & Exclusion Clause JC 2010/014(11.08.2010)
 14) Subject to Private Carriers Warranty
- 15) Subject to closed vehicle Warranty
- 16) Cargo Termination of Transit (Storage) Clause 17) Special Condition: All risk SRCC ITC A Invoice 10 Coverage for Loading and Unloading Each and every consignment should be declared through email on a Monthly Basis.In respect of spot sales only those consignments are required to be declared

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 INR |
|---------------|-------------|---------------|
| Taxable Value | | ₹3001 |
| SGST | 9 | 270 |
| CGST | 9 | 270 |
| 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 12th day of December,2022

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



For and on behalf of The New India Assurance Company Limited

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: 16040122P0004379

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C