



The New India Assurance Co.Ltd.

BRANCH AURANGABAD AUTO TIE-UP (160401)

Tel. No.: 02402485446/02402484415/

Email: nia.160401@newindia.co.in/nodal.MAHARASHTRA@newindia.co.in

Bundled Motor Policy for Two Wheeler - Enhanced Covers IRDAN190RP0022V02201819

Policy Number: 16040131220900002016

Vehicle: BAJAJ/CHETAK

Period of Cover

From: OD Cover 28/12/2022 01:32:04 PM

To: 27/12/2023 11:59:59 PM

TP Cover 28/12/2022 01:32:04 PM to 27/12/2027 11:59:59 PM

Insured Details

PANKAJ SUBHASHCHANDRA SURANA

To: 10/12, GURUDEV APARTMENT, MANJIT NAGAR, JALNA ROAD, AURANGABAD., ,
,AURANGABAD ,MAHARASHTRA, 431001

For Insurance Renewals contact

JAINUINE INSURANCE BROKERS PVT. LTD.

Tel. No.: 02402350377 / / 9850049400

Email: kailash@jainuineinsurance.co.in /

For Claims contact our OFFICE

JEEVAN SUMAN LIC BLDG., PL.NO.3N-5, CIDCO, JALGAON RD.,AURANGABAD-431003.

Tel. No.: 2402482715

Email: CH1602@newindia.co.in

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 : 16040122P0004761

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE
Bundled Motor Policy for Two Wheeler - Enhanced Covers

UIN Number - IRDAN190RP0022V02201819

Policy Number :16040131220900002016

POLICY ISSUING OFFICE: BRANCH AURANGABAD AUTO TIE-UP (160401), THE NEW INDIA ASSURANCE CO. LTD. , AUTO TIE-UP CITY BRANCH (160401) , "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD , MAHARASHTRA , 431003. PHONE NUMBER:02402485446 / 02402484415 FAX NUMBER:NA / NA Email:nia.160401@newindia.co.in	BUSINESS CHANNEL/CPSC User: NAME: Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757), PHONE NUMBER:02402350377 / / 9850049400 LAND/FAX NUMBER:/ EMAIL:kailash@jainuineinsurance.co.in /	CLAIM CONTACT: AURANGABAD (160002) ADDRESS: JEEVAN SUMAN LIC BLDG., PL.NO.3N-5, CIDCO, JALGAON RD., , AURANGABAD-431003. , , MAHARASHTRA , 431003. PHONE NUMBER: 2402482715 / 2402480715 MOBILE NUMBER: Email: CH1602@newindia.co.in
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INSURED DETAILS

Insured Name	PANKAJ SUBHASHCHANDRA SURANA	Customer ID	POA2189526 (PAN No :AUUPS8522R)
Insured Address	10/12, GURUDEV APARTMENT, MANJIT NAGAR, JALNA ROAD, AURANGABAD.,., AURANGABAD ,MAHARASHTRA, 431001	Contact Number	/ / XXXXXX0868
		Email	preeti.industries@yahoo.com
		GSTIN	NA

POLICY DETAILS

Period of cover	OD Cover 28/12/2022 01:32:04 PM to 27/12/2023 11:59:59 PM TP Cover 28/12/2022 01:32:04 PM to 27/12/2027 11:59:59 PM	Receipt Number	10000089221200700474 - 28/12/22
Previous Insurer	Not applicable	Previous Policy Number	NM

VEHICLE DETAILS

Registration Number	New Vehicle	Chassis no./Engine Number	123456/123123
Make / Model	BAJAJ/CHETAK	Variant:	URBANE
Year of manufacture	2022	Type of body / Type of Fuel	Metal/BATTERY
Colour	BLACK	Cubic capacity(cc) /Wattage(kW):	4.08kW
Seating capacity including Driver	2	Name of registration authority	
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none

INSURED DECLARED VALUE (in Rs)

Year	Duration	Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
First Year	28/12/2022 to 27/12/2023	146962	0	0	0	0	146962

Cover Description	Cover Opted	Cover Description	Cover Opted	Cover Description	Cover Opted
Consumable Items Cover	No	Engine Protection Cover	No	Nil Depreciation Cover	Yes
Return to Invoice Cover	No	Road Tax	No	No Claim Bonus Protection Cover	No
Roadside Assistance Cover	No				

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium (+)Premium for nil depreciation cover	616 176.35	Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000)(28/12/2022 to 27/12/2027)	655 1300
Calculated OD Premium	793	Calculated TP Premium	915
Total OD Premium	793	Total TP Premium	4573
Net Premium in Rs			5366



GST in Rs	966
Total Payable in Rs	6332
Total Payable in Rs(in words):	RUPEES SIX THOUSAND THREE HUNDRED THIRTY-TWO ONLY
GSTIN(Issuing Office)	27AAACN4165C3ZP
SAC	997134 (Motor vehicle insurance services)
Limitation as to use:The Policy covers use of the vehicle for any purpose other than: a)Hire or Reward b)Carriage of goods (other than samples or personal luggage) c)Organized racing d)Pace making e)Speed testing f) Reliability Trials g)Any purpose in connection with Motor Trade	
Limits of Liability:Limit of the amount the Company's Liability Under Section II 1(i) in respect of any one accident: as per the Motor Vehicles Act, 1988. Limit of the amount of the Company's Liability Under Section II 1(ii) in respect of any one claim or series of claims arising out of one event: Up to Rs. 1,00,000	
For individual covers (OD) in RS:146962	Compulsory excess in Rs:100
Imposed excess in Rs:0	Voluntary excess in Rs:0
Persons or classes of persons entitled to drive:Any person including the insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's License may also drive the vehicle and that such a person satisfies the requirement of Rule 3 of the Central Motor Vehicles Rules, 1989.	

PA cover for Owner Driver

Name of Nominee	Age of Nominee	Relationship with the Insured	Name of the Appointee (if Nominee is a minor)	Relationship to the Nominee
NA	NA	NA	NA	NA

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
none	0	NA	NA

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 5366.00
SGST	9	483
CGST	9	483
IGST	0	0

In witness where of this policy has been signed at BRANCH AURANGABAD AUTO TIE-UP on this 28/12/2022 WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, conditions and exceptions applicable to Package/Liability policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 22.

Important notice:

The insured is not indemnified, if, the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicles Act, 1988 is recoverable from the insured: see clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 1lakh or a claim for refund of premium exceeding Rs 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company website.

I/We hereby certify that the policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of Chapter X and XI of M.V. Act, 1988.

The policy is subject to TWEC endorsement attached.

Date of Issue: 28/12/2022

For and on behalf of The New India Assurance Company Limited

(MR. MANISH SAKHARAM ZADODE)
[BRANCH MANAGER]



Duly Constituted Attorney(s)

BUNDLED MOTOR POLICY FOR TWO WHEELERS - ENHANCED COVERS
(Endorsement Wording for Add on cover - Nil Depreciation)
UIN Number - IRDAN190RP0022V02201819/A0031V01201819

THE FOLLOWING ENDORSEMENT IS TO BE ATTACHED TO THE BUNDLED MOTOR POLICY FOR TWO WHEELERS WHEN THE ENHANCED COVER IS PROVIDED WITH ADD ON COVER NIL DEPRECIATION FOR BRAND NEW VEHICLE

BUNDLED MOTOR POLICY FOR TWO WHEELERS ENHANCED COVER ENDORSEMENT ATTACHED TO AND FORMING PART OF POLICY NO. 16040131220900002016 Additional Premium: Rs. 176.3544

Notwithstanding anything contained to the contrary in the within mentioned policy it is hereby declared and agreed that subject to the insured having paid the Additional premium as applicable the cover under Section 1 of the within mentioned policy is hereby extended to the effect that in the event of any partial loss claim admissible under this policy, no depreciation shall be deducted for the replaced parts payable under the claim.

Subject to the condition that the above said coverage shall be applicable only for the first two partial loss claims admitted and payable under the policy relating to accidents during Own Damage policy period.

Further No claim shall be payable :

- 1.For any extra fittings and/ or any internal improvements in the vehicle other than provided by the manufacturer in the vehicle originally.
- 2.In relation to any accident occurring in any geographical area outside India.
- 3.If the vehicle is in excluded category;
 - a) Sports model Two wheeler
 - b) Racer model Two wheeler
- 4.After the first two admissible claims under the Enhanced Cover during the Own Damage Policy Period.

All other terms and conditions of the within mentioned policy shall remain unaltered.

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 : 16040122P0004761

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C



COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office : BRANCH AURANGABAD AUTO TIE-UP (160401)
Address : THE NEW INDIA ASSURANCE CO. LTD.
AUTO TIE-UP CITY BRANCH (160401)
"JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD,431003
AURANGABAD(MA)
Insured Pan Number : AUUPS8522R
Phone : 02402485446
Email : nia.160401@newindia.co.in
Fax :
Collection Number : 10000089221200700474
Collection Date : 28/12/2022
Business Source Code : DA3388757
PAN No of Payer : AUUPS8522R

Received with thanks from PANKAJ SUBHASHCHANDRA SURANA.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount ₹	A/C Code	Sub A/C Code
16040131220900002016	Bank-100000	6332.00	9100.100000	BA00013647-100000-9100

Total = ₹ 6332.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
EPG Credit Advice	6332.00	YSBI164 251 7673	N.A.	N.A.	N.A.	1604012210029197	N.A.

Total = ₹ 6332.00

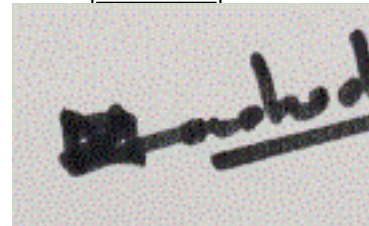
Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
5366.00	966.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NA	JAINUINE INSURANCE BROKERS PVT. LTD.	31

For The New India Assurance Company Limited
Revenue Stamp



Date of Issue: 28/12/2022



(MR. MANISH
SAKHARAM ZADODE)
[BRANCH MANAGER]

Cashier's Initial

Authorized Signatory

Note -

- Please note the Policy Number, Collection Number and date in all future correspondence. .
- NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.



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.

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IMT.22. COMPULSORY DEDUCTIBLE

(Applicable to Private Cars, three wheelers rated as private cars, all motorized two wheelers, taxis, private car type vehicle plying for public/private hire, private type taxi let out on private hire)

Notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insured shall bear under Section 1 of the policy in respect of each and every event (including event giving rise to a total loss/constructive total loss) the first ₹ 100 (or any less expenditure which may be incurred) of any expenditure for which provision has been made under this policy and/or of any expenditure by the insurer in the exercise of his discretion under Condition no 3 of this policy.

If the expenditure incurred by the insurer shall include any amount for which the insured is responsible hereunder such amount shall be repaid by the insured to the insurer forthwith.

For the purpose of this Endorsement the expression "event" shall mean an event or series of events arising out of one cause in connection with the vehicle insured in respect of which indemnity is provided under this policy.

Subject otherwise to the terms conditions limitations and exceptions of this Policy.

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.

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