



# MARINE CARGO SPECIFIC VOYAGE 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.

**Insured Details Issuing Office Details Insured Name** : NAHAR CORPORATION **Customer ID** POA3048384 Office Code BRANCH AURANGABAD AUTO TIE-UP (160401) H.O. - 29, 30, RAJ COMPLEX, CHAWANI, INDORE - 452001 Address Address THE NEW INDIA ASSURANCE CO. AUTO TIE-UP CITY BRANCH (160401 JEEVAN SUMAN" BUILDING, PLOT INDORE, MADHYA PRADESH, 452001 NO. 3, N-5, CIDCO, AURANGABAD,431003 Phone No Phone No XXXXXX9450 02402485446 / 02402484415 E-mail/Fax E-mail/Fax naharcorporation7@gmail.com, / nia.160401@newindia.co.in/

AAACN4165CST178 **PAN No** S.Tax Regn. No **GSTIN/UIN** 23AULPN4327J1ZH / NA **GSTIN** 27AAACN4165C3ZP SAC 997135 (Marine, aviation and other transport insurance srvc) **Business Source Code Policy Details** 

Policy Number	••		Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User	:	Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),
Date of Issue	:	03/02/2023 07:09:31 PM	Agent/Bancassurance/Spe cified Person	:	
Date of Proposal	••	03-Feb-23	Phone No	:	02402350377, 9850049400 / NA
Client Type	••	Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //

# **Premium Details**

AULPN4327J

Premium	GST	Stamp Duty	Total (₹)	Rupees (in words)	Receipt No. & Date
1884	339	1	2224	RUPEES TWO THOUSAND TWO HUNDRED TWENTY- FOUR ONLY	100000892202000 71676 - 03/02/23

Journey Details

Journey From	Journey To	Transport Mode
Daryapur TO	Dewas, Madhya Pradesh	Road

: 3140000 Cargo Sum Insured (₹) Duty Sum Insured (₹) : 0 Increased Value Sum Insured (₹)

: eWay Bill No661520525244 03 02 2023 Date : 03/ Lorry Receipt(LR) Number

Date: 03/02/2023

Marks and nos VEHICLE NO. MH 31 CB 7411

INVOICE NO NC 22 23 136 L R NO 187

Basis of valuation + % Extra for

Commodity

: CF + 10

**Transit Type** Consignment Invoice No & Date : Road : LR NO 187 NC 22 23 136 & 03-Feb-2023

Commodity description : COTTON FP BALLS Packaging description : Standard and Customary

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



: ITC-A Risk Covered SRCC

Excess .5 % of Claim

Terms of Insurance-

As per following clauses written hereunder, current on date of sailing or dispatch and/or otherwise stated. This Insurance is subject to Important notice, conditions and warranties attached. Also this contract is subject to such regulations as in force at the time the risk hereunder.

- 1) Inland Transit (Rail or Road) Clause A
  2) Institute Strikes Clauses (Cargo) 1/1/82 CL 256
  3) Institute Strikes Clauses (Air Cargo) 1/1/82 CL 260
  4) Strikes Riots And Civil Commotions Clause (Inland Transit Not In Conjunction With Ocean Going Voyage)
  5) Communicable Disease Exclusion Clause (Cargo) JC2020-011
  6) Institute Radioactive Contamination Exclusion Clause (1.10.1990)
  7) Institute Radioactive Contamination Chamical Richards and Floatromagnetic Wassess First

- 7) Institute Radioactive Contamination Chemical, Biological Biochemical and Electromagnetic Weapons Excl. Clause 10/11/2003 CL 370
- 8) Termination of Transit Clause JC2009/056 01/01/2009
- 9) Subject to Important Notice Clause
  10) Subject to Sanctions, Limitation & Exclusion Clause JC 2010/014(11.08.2010)
  11) Subject to Private Carriers Warranty
  12) Subject to closed vehicle Warranty
  13) Control Tomain of Tomain (Storage) Clause

- 13) Cargo Termination of Transit (Storage) Clause
  14) Special Condition: All Risk+ ITC- A, SRCC, Invoice + 10 % Coverage for Loading and Unloading.Excess Clause: 0.50% of the consignment value or ₹ 500 whichever is higher.

# Survey & Claim Settlement

In the event of loss or damage which may result in a claim under this Insurance immediate notice must be given to Nearest New India Assurance Company's Office or The Policy Issuing Office without which no claim or loss will be paid.

In the event of loss or damage which may result in a claim under this insurance immediate notice must be given to Policy Issuing Office

# **Premium and GST Details**

	Rate of Tax	Amount in INR
Taxable Value		1885
SGST	0	0
CGST	0	0
IGST	18	339

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 03rd day of February,2023

To view the certificate details please visit

For and on behalf of The New India Assurance Company Limited



(MR. MANISH SAKHARAM ZADODE) [BRANCH MANAGER]

Duly Constituted Attorney(s)

# 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: 16040122P0005732

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C