



# BHARAT GRIHA RAKSHA POLICY UIN-IRDAN190RP0024V01202223

1. Insured's Details :							
Insured Name	:	UMESH O. AGRAWAL & ANITADEVI K. AGRAWAL .	E-mail Id/Fax	:	1		
Customer ID	:	POA3508914	PAN No.	:	ACOPA8377J		
Address	:	H.NO. 4662/11, ROOPAM HALL, SHIVAJI STATUE, MADHUBAN HOTEL, JALNA . JALNA .MAHARASHTRA, 431203	GSTIN/UIN.	:	NA / NA		
Phone No.	:			:			

2. Issuing Office Details :								
Office Name	-	BRANCH AURANGABAD AUTO TIE-UP (160401)	E-mail Id/Fax	:	nia.160401@newindia.co.in /			
Office Code	:	160401	S.Tax Regn. No.	:	AAACN4165CST178			
Address	-	THE NEW INDIA ASSURANCE CO. LTD. AUTO TIE-UP CITY BRANCH (160401) "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD,431003 MAHARASHTRA, 431003.	GSTIN	:	27AAACN4165C3ZP			
Phone No.	:	02402485446 / 02402484415	SAC	:	997137 (Other property insurance services)			

3. Policy Details :		
Policy Number	:	16040111228600000315
Period of Insurance	:	From: 24/02/2023 07:52:08 PM To: 23/02/2024 11:59:59 PM
Date of Proposal	:	24-Feb-23
Prev. Policy no.	:	NA
Client Type	:	Non-Corporate
Business Source Code	:	
Dev.Off level./Broker	:	Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),
Agent/Bancassurance/SPECIFIED PERSON	:	
Phone No.	:	02402350377, 9850049400 / NA
E-mail Id/Fax	:	kailash@jainuineinsurance.co.in, / /

# 4 Collection Particulars :

Premium	:	170	Total (₹)	:	202	
GST	:	32	Receipt No. & Date	:	16040181220000003927 - 24/02/23	

### 5 Policy Level Covers :

Description of Property	:	As per Block Details			
Location Address with Pin Code	:	As per Block Details			
Risk Description	:	As per Block Details			
Risk Code	:	1001(Dwelling: Individual)			
Sum Insured	:	₹ 500,000			

#### Block Details : 6.

Policy No. : 16040111228600000315Document generated by 31229 at 24/02/2023 21:07:40 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on https://www.newindia.co.in/portal/policyFeedbackGen. For redressal of your grievance, if any,you may approach any one of the following offices - 1. Policy issuing office 2. Regional office 3. Head office.In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ornbudsman. For details of our office addresses and addresses of office of Insurance Ornbudsman, please visit our website http://newindia.co.in.



Ris k SI No	Location Address with Pin Code	Carpet Area of the structure(sq m)	Rate of Cost of Construction(₹ /sq.m)	Building SI	SI of Addl. Structure	Details of Addl. Structure	F.F.F.(Home Furnishing) SI
1	H.NO. 4662/11, ROOPAM HALL, SHIVAJI STATUE, MADHUBAN HOTEL, JALNA ., 431203	500	1,000	5,00,000	0	NA	0
Ris k SI No	Location Address with Pin Code	Electrical/Elect ronic Sum Insured	Others General Contents Sum Insured	Total Sum Insured	Type of Construction- Walls	Type of Construction- Floor	Type of Construction- Roof

#### 7. Additional Covers:

## 7(a) Inbuilt Cover:

Cover for Loss of Rent

Risk Serial Number	Sum Insured for No. of Months	No. of Months
1	0	NA

Cover for Rent for Alternative Accommodation

Risk Serial Number	Sum Insured for No. of Months	No. of Months
1	0	NA

# 7(b) Optional Covers: i)Valuable Contents:

	.,			
SI No	ltem Name	Sum Insured	Valuation Certificate Attached	Valuation agency
			Total Sum Insured	5.00.000

ii)PA cover				
Name of Policy Holder	Age	Sum Insured	Nominee Name	Relationship
NA	0	0	NA	NA
Name of your Spouse	Age	Sum Insured	Nominee Name	Relationship
NA	0	0	NA	NA

(7c) Add-on Covers

SI. No.	Add-on Covers	SI/Maximum limit of Indemnity	Availed/Not Availed
1	Removal of Debris (In Excess of 2% and maximum up to 5% of claim amount)	In Excess of 2% and Maximum up to 5% of the claim amount	Not Availed
2	Architects, Surveyors and Consulting Engineers Fees (In excess of 5% & maximum up to 10% of claim amount)	In Excess of 5% & Maximum up to 10% of the claim amount	Not Availed
3	Reimbursement of Food Expense	Maximum 3 days up to ₹15000/-	Not Availed

8. Sum I	8. Sum Insured Summary :							
SI. No.	Asset Description		Sum Insured (₹)					
1.	Home building Sum Insured	:	5,00,000					
2.	SI of additional structure	:	0					
3.	Furniture, Fixtures and Fittings(Home Furnishings)Sum Insured	:						
4.	Electrical/Electronic Sum Insured	:	0					
5.	Other General Contents SI	:	0					
6.	Other property specifically required to be covered	:	0					

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Total Su	:		:	5,00,000			
9. Terrorism/EQ/	STFI :						
Terrorism Covered	: Yes	Earthquake Covered	:	Yes	STFI Covered		Yes
10. Hypothecati	10. Hypothecation Details :						
SI.No.	Name of the Financiers						
1 U.B.I BR JALNA							
11. Coinsurance	e Details :						

Company

Office Code

% Share

**Premium Share** 

## 12. Subjectivities :

SI.No.

1

The insurance under this policy is subject to

Coinsurance Type

NOT OPTED

Special Conditions		: ON RESIDENTIAL PROPERTY				
Warr anty Num ber	Secti on Code	Occu panc y Code	Warranty Title	Wordings		
W1	Ι	NA	Warranty for FEA Installations	Warranted that Fire extinguishing Appliances (FEA) installations are maintained in efficient working conditions and Annual Maintenance Contract (AMC) with external agency is in force. For industries / establishments having full fledged Fire & safety and / or Maintenance department with well drawn out and documented maintenance standards, AMC with external agency is not mandatory.		
Special Exclusion		:	NA			
cláim amount		<ul> <li>(2) Agreed Bank Clause</li> <li>(3) Architect, surveyor, consulting engineer fees: Reasonable fees up to 5% of the</li> </ul>				
Risk Covered : As per Risk covered attached		As per Risk covered attached				
Fire Products-Exclusions :		:	As per Exclusions attached			

# 13. Terrorism Deductibles:-

I.J. TEHOHSHI Deuu							
Nature of Risk	Deductibles (as a % of claim/loss amount)	Minimum Limit	Maximum Limit	1			
Shops & Residential Risk	1 % of claim amount	₹ 10,000/-	₹ 5,00,000/- (Rupees 5 Lacs)				

## 14. Premium Details :

Premium Head		Premium Amount (₹)
Net Premium under the policy	:	170
GST	:	32
Total premium including GST	:	202
Total premium including GST(In words)	:	RUPEES TWO HUNDRED TWO ONLY

Premium and GST Details		
	Rate of Tax	Amount in INR
Premium		₹ 170
SGST	9	16
CGST	9	16
IGST	0	0

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In witness whereof the undersigned being duly authorized by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 24th day of February,2023.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 24/02/2023

Duly Constituted Attorney(s)

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 : 16040122P0006243

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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