



POLICY SCHEDULE FOR SHOPKEEPERS INSURANCE

| Insured's Name | : | A I TYRE PROPR. ASHFAQ AZMAT SHA | IKH | | | |
|--------------------------------------|---------------------------------|----------------------------------|---|--|--|--|
| | Insured's Details | | Issuing Office Details | | | |
| Customer ID : POA3326571 Office Code | | Office Code | : | BRANCH AURANGABAD AUTO TIE-UP (160401) | | |
| Address | SHOP NO. A-3, AURANGABAD-431001 | | THE NEW INDIA ASSURANCE CO. LTD. AUTO TIE-UP CITY BRANCH (160401) "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD,431003 AURANGABAD | | | |
| Phone No | : | | Phone No | : | 02402485446 / 02402484415 | |
| E-mail/Fax | : | shaikhashfaq0131@gmail.com, / | E-mail/Fax | : | nia.160401@newindia.co.in / | |
| PAN No | : | | S.Tax Regn. No | : | AAACN4165CST178 | |
| GSTIN/UIN : 27BMNPS6644G | | 27BMNPS6644G1ZG / NA | GSTIN | : | 27AAACN4165C3ZP | |
| | : | | SAC | : | 997139 (Other non-life insurance services excl RI) | |

| Policy Details | | | | | | | |
|---|---|---|---|---|---|--|--|
| Policy Number : 16040148220600000153 Business Source Code | | | | | | | |
| Period of Insurance | : | From: 16/02/2023 05:27:37 PM To: 15/02/2024 11:59:59 PM | Dev.Off. level/Broker/Corp. Agent/IMF/Web Aggregator/CPSC User | : | Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623), | | |
| Date of Proposal | : | 16-Feb-23 | Agent/Bancassurance/S pecified Person | : | | | |
| Prev. Policy no. | : | | Phone No | : | 02402350377, 9850049400 / NA | | |
| Client Type | : | Non-Corporate | E-mail/Fax | : | kailash@jainuineinsurance.co.in, // | | |

| Premium(₹) | GST(₹) | | Total (₹) | Total (₹ in words) | Receipt No. & Date |
|--------------------------|--------|-------|---|--|-------------------------------------|
| 6,938 | 1,248 | 8,186 | | RUPEES EIGHT THOUSAND ONE HUNDRED EIGHTY-SIX ONLY | 1604018122000000379 6 - 16/02/23 |
| Shop Address | | | A I TYRE Propr. Ash Azad Chowk, Prem | nfaq Azmat Shaikh n Complex, Shop No. A-3, | Aurangabad-431001 |
| Nature of Business trade | | | TYRE | · | |

| | Section wise Pr | emium Details: | | |
|---------|---|----------------|------------|---|
| Section | Decription Cover | Sum Insured | Premium(₹) | Excess |
| 1A | Fire and allied perils-Building of Class A construction only | NOT OPTED | NOT OPTED | 5 % of Claim Amount subject to a minimum of ₹ 10000 |
| 1B | Fire and allied perils-Contents Excluding Money and valuables | 3000000 | 1950 | 5 % of Claim Amount subject to a minimum of ₹ 10000 |
| 2 | Burglary and House breaking | 3000000 | 2250 | NIL |
| 3A | Section 3A(Money in transit) | 50000 | 225 | NIL |
| 3B | Section 3B(Money in till or counter during business hours | 50000 | 225 | NIL |
| 3C | Money in locked safe in office outside business hours | 50000 | 225 | NIL |
| 4 | Pedal Cycle | NOT OPTED | NOT OPTED | NIL |
| 5 | Plate Glass | NOT OPTED | NOT OPTED | 1% of Claim Amount. |
| 6 | Neon and Glow sign | 2000 | 17 | NIL |
| 7 | Baggage Insurance | NOT OPTED | NOT OPTED | NIL |



| 8 | Personal Accident | NOT OPTED | NOT OPTED | NIL |
|-----|--------------------------------|-----------|-----------|---|
| 9 | Fidelity Guarantee | NOT OPTED | NOT OPTED | NIL |
| 10A | Public Liability Insurance | 15000 | 5.25 | NIL |
| 10B | Workmens Compensation | NOT OPTED | NOT OPTED | NIL |
| 11 | Electronic Equipment Insurance | NOT OPTED | NOT OPTED | The first 5% of Claim Amount subject to minimum of ₹2500 in respect of each and every loss. |
| 12 | Business Interruption | NOT OPTED | NOT OPTED | 7 Days of Gross Profit. |

| Details under: Sec1B Fire and allied perils-Contents- Excluding Money and valuables | | | | | | | |
|---|--|---|---------|--|--|--|--|
| SI No: Item Description Sum Insured | | | | | | | |
| 1 | Stock in Trade including Goods Held in Trust | STOCK OF TYRES MRF/TVS/APOLLO MICHELIN & BRIDGESTONE | 2500000 | | | | |
| 2 | Furniture, Fixtures and Fittings | FURNITURE FITTING AND FIXTURE | 500000 | | | | |

| Details under: Sec2 Burglary and Housebreaking | | | | | | | |
|--|---|---|---------|--|--|--|--|
| SI No: Item Description Sum Insured | | | | | | | |
| 1 | 1 Furniture, Fixtures and Fittings | FURNITURE FITTING AND FIXTURE | 500000 | | | | |
| 2 | 2 Stock in Trade including Goods Held in Trust | STOCK OF TYRES MRF/TVS/APOLLO MICHELIN & BRIDGESTONE | 2500000 | | | | |

| Details under: Sec3 (Money Insurance) Cash in transit | | | | | | |
|---|---------------------------------|---|-------|--|--|--|
| SI No: | o: Item Description Sum Insured | | | | | |
| 1 | Section 3A | Money in Transit | 50000 | | | |
| 2 | Section 3B | Money in till or counter during business hours) | 50000 | | | |
| 3 | Section 3C | Money in locked safe in office outside business hours | 50000 | | | |

| | Details under: Sec6 Neon Sign | | | | | | |
|-------|--|------|------|--|--|--|--|
| SI No | SI No Make and Name of Manufacturer Year of Manufacture for Neon and Details1 for Neon and Glow sign Sum Insured | | | | | | |
| 1 | NEON GLOW SIGN | 2020 | 2000 | | | | |

| Details under: Sec10A Public Liability | | | | |
|--|--------|--|--|--|
| | Amount | | | |
| Limit of Liability | 15000 | | | |

| Addon Covers | | | Sum Insured (₹) |
|--------------------|---|----------------------------------|-----------------|
| Special Conditions | : | AS PER SHOPKEEPERS POLICY CLAUSE | |
| Excess | : | 0 | |

The Policy shall be subject to SHOPKEEPERS INSURANCE policy clauses attached herewith.

Premium and GST Details

 Premium
 Rate of Tax
 Amount in INR

 SGST
 9
 624

Policy No.: 16040148220600000153Document generated by 31229 at 16/02/2023 18:32:48 Hours.

Regd. & Head Office: New India Assurance Bidg., 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/nortal/nolicy/FeedbackGen.

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



| CGST | | | 9 | 624 | |
|-------------------------|---|---|-------------------|--|---|
| IGST | | | 0 | 0 | |
| In witness set his (the | whereof the undersi eir) hand(s) on this 1 | gned being duly authorised 6th day of February,2023. | l by the Insurers | and on behalf of the I | nsurers has (have) hereunder |
| | | | | | and on behalf of Assurance Company Limited |
| Date of Iss | ue: 16/02/2023 | | | Duly Cor | nstituted Attorney(s) |
| Mudrank number | | consolidated Stamp Fe | ees Paid by Pay (| Order Number | vide receipt |
| | 2017-18 onward | are that though our aggre Is is more than the aggre Juired to prepare an invoi Tax Invoice N | gate turnover i | notified under sub-ru the provisions of the | ıle (4) of rule 48, |
| | | IRDA Registrat | ion Number: 19 | 90 | |

NIA PAN NUMBER: AAACN4165C