



**POLICY SCHEDULE FOR MONEY INSURANCE**

**UIN NUMBER - IRDAN190P0127100001**

<b>Insured's Name</b>	: RADHE RADHE FIBERS		
<b>Insured's Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: PO92193963	<b>Office Code</b>	: AURANGABAD DO-160400 (160400)
<b>Address</b>	: GAT NO.711, 713/2, 713/3, VEERWADA ROAD, CHOPDA, DIST. JALGAON  CHOPADA ,MAHARASHTRA, 425107	<b>Address</b>	: AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
<b>Phone No</b>	:	<b>Phone No</b>	: 02402333572 / 02402333361
<b>E-mail/Fax</b>	: radheradhefiber.1099@rediffmail.com, /	<b>E-mail/Fax</b>	: nia.160400@newindia.co.in / 02402331226
<b>PAN No</b>	:	<b>S.Tax Regn. No</b>	: AAACN4165CST178
<b>GSTIN/UIN</b>	: 27AALFR3854L1ZL / NA	<b>GSTIN</b>	: 27AAACN4165C3ZP
		<b>SAC</b>	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>			
<b>Policy Number</b>	: 16040048220300000121	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 14/03/2023 12:00:01 AM To: 13/03/2024 11:59:59 PM	<b>Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User</b>	: Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757) Jainuine Insurance Brokers Pvt.Ltd. - (SI00028623),
<b>Date of Proposal</b>	: 14-Mar-23	<b>Agent/Bancassurance/S pecified Person</b>	:
<b>Prev. Policy no.</b>	:	<b>Phone No</b>	: 02402350377, 9850049400 / NA
<b>Client Type</b>	: Non-Corporate	<b>E-mail/Fax</b>	: kailash@jainuineinsurance.co.in, / /

<b>Premium(₹)</b>	<b>GST(₹)</b>	<b>Total(₹)</b>	<b>Total (₹ in words)</b>	<b>Receipt No. &amp; Date</b>
38,500	6,930	45,430	RUPEES FORTY-FIVE THOUSAND FOUR HUNDRED THIRTY ONLY	1604008122000001616 4 - 13/03/23

<b>Money in safe (during and after business hours)</b>	: 9900000
<b>Money in Till</b>	: 9900000

<b>Sl. No.</b>	<b>Location &amp; Address</b>
1	Radhe Radhe Fibers, Gut No. 711, 713/2, 713/3, Veerwada Road, Chopada
2	Factory,Banks,Office,Residence of all partner etc.500 Km Radius To & Fro

<b>SECTION - 1</b>				
<b>Sl. No.</b>	<b>Sub Sections</b>	<b>Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts</b>	<b>Single Carrying Limits for - Foreign Currency</b>	<b>Single Carrying Limits for - Any other (Specify)</b>
1.	Section 1 A - Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insureds premises from the time the cash is received at the bank by the insured or the authorized employee/ s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the insured to provide for such cash are covered in transit from the premises to the Bank.	9900000	0	0
2.	Section 1 B - Money (other than described in 1A above) in the personal custody of the insured or the authorized employee/s of the insured whilst in direct transit between the premises and the bank or post office and vice versa	9900000	0	0



3.	Section 1 C - Money ( other than described in 1A and 1B above ) collected by and in the personal custody of the insured or the authorized employee/s of the insured whilst in transit to the premises or hank within a period not exceeding 48 hours from the time of collection and vice versa	9900000	0	0
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Limit over the Policy period (Estimated Annual Turnover)	:	500000000
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<b>Optional Covers</b>	<b>Sum Insured (₹)</b>
SRCC Cover	NOT OPTED
Terrorism	NOT OPTED

<b>Risk Details</b>		
1.	Maximum distance over which money will be conveyed	500
2.	Details of employees handling Money	By owner or authorized employee
3.	How is money carried	IN ANY TYPE OF BAGS, TRUNKS,
4.	Mode of Transport	ANY VEHICLE PUBLIC O
5.	Details of armed guards or any other protection	No Security Guard
6.	Details of money kept outside business hours	Safe Consists of Wooden / Steel Cupboard
7.	Is the safe where money is kept, fixed to the walls or floor	No
8.	By whom are the keys held	NA
9.	Are all the keys removed outside business hours	No

Special Conditions	:	FACTORY,OFFICE,BANKS,ALL RESIDENCE OF ALL PARTNER/PROPRIETOR. ( VICE VERSA WITH IN 500 KM RADIUS )
Excess	:	1000

This Policy shall subject to MONEY INSURANCE policy clauses attached herewith.

**Premium and GST Details**

	Rate of Tax	Amount in INR
Premium		₹ 38,500
SGST	9	3465
CGST	9	3465
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 13th day of March,2023.

For and on behalf of  
The New India Assurance Company Limited

Date of Issue: 13/03/2023

Duly Constituted Attorney(s)

Mudrank \_\_\_\_\_ Dt. \_\_\_\_\_ consolidated Stamp Fees Paid by Pay Order Number \_\_\_\_\_ vide receipt number \_\_\_\_\_ dt. \_\_\_\_\_. Stamp Duty under the Policy is ₹1/-.



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 : 16040022P0023525

<b>IRDA Registration Number: 190</b> <b>NIA PAN NUMBER: AAACN4165C</b>
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