



POLICY SCHEDULE FOR MONEY INSURANCE

UIN NUMBER - IRDAN190P0127100001

| Insured's Name | : | DURGESH IMPEX PVT LTD | | | |
|----------------|------------------|---------------------------------------------------------------------------------------------------------------|----------------|---|------------------------------------------------------------------|
| | nsured's Details | Issuing Office Details | | | |
| Customer ID | : | PO92245613 | Office Code | : | AURANGABAD DO-160400 (160400) |
| Address | : | GAT NO 67 AT (BHOD KURD) ,TALUKA DHARANGAON ,DIST JALGAON DHARANGAON(JALGAON) ,MAHARASHTRA, 425105 | Address | : | AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005 |
| Phone No | : | | Phone No | : | 02402333572 / 02402333361 |
| E-mail/Fax | : | jalgaon@durgeshimpex.in, / | E-mail/Fax | : | nia.160400@newindia.co.in / 02402331226 |
| PAN No | : | | S.Tax Regn. No | : | AAACN4165CST178 |
| GSTIN/UIN | : | 27AACCD1075D1Z2 / NA | GSTIN | : | 27AAACN4165C3ZP |
| | : | | SAC | : | 997139 (Other non-life insurance services excl RI) |

| | | | Policy | Details | | | | | |
|---------------------|------------------------|------------------------------------------|----------|---------------------------------------------------------------------|-----|--------------------------------------|------------------------------------|--|--|
| Policy Number | : | 1604004823030000 | 00011 | Business Source Code | | | | | |
| Period of Insurance | : | From: 10/04/2023 0 09/04/2024 11:59:5 | | Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User | : | (DA3388757) | e Insurance Brokers Pvt.Ltd | | |
| Date of Proposal | : | 10-Apr-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(₹) | Premium(₹) GST(₹) Tota | | Total(₹) | Total (₹ in v | NOI | ords) Receipt No. & Dat | | | |
| 35,000 | 35,000 6,300 | | 41,300 | RUPEES FORTY-ON THREE HUNDF | | | 160400812300000030 8 - 10/04/23 | | |

| Money in business | n safe (during and after hours) | : | 500000 |
|-------------------|-------------------------------------------------------------------------------------|-----|---------------------------------------------------------------------|
| Money in | Till | : | 500000 |
| SI. No. | Location & Address | | Location & Address |
| 1 | Durgesh Impex Pvt Ltd, Gat No 67 at (Bhod Kurd) , Taluka Dharangaon, Dist Jalgaon | | |
| 2 | Bank, ALL FACTORIE | ES, | OFFICES, RESIDENCE OF ALL DIRECTOR/ PARTNER / PROPRIETOR vice versa |

| SECTIO | SECTION - 1 | | | | | | | | |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------------|--|--|--|--|--|
| SI. No. | Sub Sections | Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts | Single Carrying Limits for - Foreign Currency | Single Carrying Limits for - Any other (Specify) | | | | | |
| 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. | 1000000 | 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 | 10000000 | 0 | 0 | | | | | |

Policy No. : 16040048230300000011Document generated by 40781 at 10/04/2023 17:33:55 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. 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 Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website

http://newindia.co.in.



| 3. Section 1 C - Money (other than and 1B above) collected by and custody of the insured or the au employee/s of the insured whils premises or hank within a perio 48 hours from the time of collect versa | the personal rized transit to the ot exceeding | 0 | 0 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---|---|
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---|---|

| Limit over the Policy period (Estimated Annual Turnover) | : | 50000000 | |
|-------------------------------------------------------------|---|----------|-----------------|
| Optional Covers | | | Sum Insured (₹) |
| | | | |

| SRCC Cover | NOT OPTED |
|------------|-----------|
| Terrorism | NOT OPTED |
| | |

| 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 | BY OWNER OR AUTHORIZED EMPLOYE |
| 9. | Are all the keys removed outside business hours | No |

| Special Conditions | | Cash Will Be Carried By The Owner And Any Authorized Employees Within 500 KMS Radius To Insured Premises, Banks, ALL FACTORIES, OFFICES, RESIDENCE OF ALL DIRECTOR/ PARTNER / PROPRIETOR vice versa. |
|--------------------|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Excess | : | 0 |

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

Premium and GST Details

| | Rate of Tax | Amount in INR |
|---------|-------------|---------------|
| Premium | | ₹ 35,000 |
| SGST | 9 | 3150 |
| CGST | 9 | 3150 |
| 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 10th day of April,2023.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 10/04/2023

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/-.

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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 : 16040023P0000417

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C