



ADDITIONAL ENDORSMENT DOCUMENTS FIRE

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Insured Name	:	SHRI SAISHYAM COTSPIN		Insurer Office Code	:	JALNA BRANCH (160501)
Address	:	SURVEY NO. 19/4A & 19/5, MOUJE JOGBAN, BEHIND SHYAM WEIGH BRIDGE, OFF HIWARKHED ROAD, AKOT-, DIST. AKOLA AKOT ,MAHARASHTRA, 444101		Address	:	K.K.NIWAS LAKKAD KOT NEAR BUS STAND AURANGABAD ROAD JALNA ,431203
Telephone	:	//XXXXXX6719		Telephone	:	02482232708 / 02482232709
Fax	:			Fax	:	
Email	:			Email	:	nia.160501@newindia.co.in
Insured Pan Number	<u>:</u>	DTJPB9465H				
GSTIN	<u>:</u>	27ABWFS3819E1ZP		GSTIN	<u>:</u>	27AAACN4165C3ZP
UIN	:	NA		SAC	:	997137 (Other property insurance services)
Endorsement attached to forming part of Policy Number						16050111238700000044
Department :Fire				Cover :STANDARDF	Policy	
Period of Insurance: From :21/04/2023 06:08:27 PM To : 20/07/2023			Endorsement No:		10	6050111238783000001
			Effective Date		0:	3 May 2023
			Date Signed		0:	3/05/2023
			Additional Premium ₹		IN	NR 2,940.00
			Refund Premium ₹		N	/A

It is hereby understood and agreed that the endorsement on policy 16050111238700000044 will be in effect from 03 May 2023

Reason	lenhancement in sum insured done by 50 lacs
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Sum Insured ₹16,000,000.00

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: 16050123E0000950

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C