



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	VAIBHAV COTGIN PVT LTD	·		·		
Insureds Details		Issuing Office Details				
Customer ID	:	POA4920322	Office Code		: JALGAON (160700)	
Address	:	GAT NO,1-1A & 1-2A, VILLAGE PARVAMBHA (WANSADI) ,TAL KORPANA , DIST CHANDRAPUR CHANDRAPUR ,MAHARASHTRA, 441212	Address	:	MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001	
Phone No	:		Phone No	:	02572236189 / 02572232179	
E-mail/Fax	:	vaibhavcottex@rediffmail.com, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27AAFCV4584N1ZK / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details						
Policy Number : 16070046230100000045			Business Source Code	Business Source Code		
Period of Insurance	:	From: 04/05/2023 06:15:21 PM To: 03/08/2023 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User	:	Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),	
Date of Proposal	:	04-May-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, //	

Financier(s) Details		
SI. No. Name of the Financiers		
1	STATE BANK OF INDIA SME BR YAVATMAL	

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
7,500	1,350	8,851	RUPEES EIGHT THOUSAND EIGHT HUNDRED FIFTY-ONE ONLY	1607008123000000084 4 - 04/05/23
Location Details	: Vaibhav Cotgin Pvt ltd,Gat No,1-1A & 1-2A, Village parvambha,Tal Korpana , Dist Chandrapur 441212			

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in Trade						
SI. No.	SI. No. STOCK DETAILS Sum Insured					
1	Godown Stock:-	3000000				
Cotton Bales,Seeds,Cake, Hulls, etc						

Goods held in Trust / Commision				
SI. No.	GOODS HELD DETAILS Sum Insured			
1	NA	0		

Furniture / Fixture / Fittings				
SI. No.	No. FURNITURE/FIXTURE/FITTINGS DETAILS Sum Insured			
1	NA	0		

Office Ed	Office Equipments			
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured		

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1		NA		0		
Coins / C	Currency notes					
Sl. No.		RENCY/CURIOS DE	TAILS	Sum Insured		
1	•	NA		0		
Dagarint	lan of other ltone					
Sl. No.	ion of other item	IER ITEM DETAILS		Sum Insured		
1	OIF	NA		0		
-		100		<u> </u>		
	Add on Covers		Sum Insured (₹)			
Other Ex			NOT OPTED			
Theft Ext				NOT OPTED		
Terrorisr	n			NOT OPTED		
Special (Conditions	: Vaibhav Co	tgin Pvt ltd,			
		Gat No.1-1A	& 1-2A. Village parvamb	ha (Wansadi) ,Tal Korpana , Dist Chandrapur		
		441212		(
Excess		: 1000				
This Poli	cy shall subject to BURGLA	RY policy clauses a	ttached herewith.			
Premium	and GST Details					
			Rate of Tax	Amount in INR		
Premium				₹ 7,500		
SGST CGST			9 9	675 675		
IGST			0	0		
	b.aa.f +b.aa.d.aa.i.aa.a	ومطاهده والداد مستمال				
set his (t	ss whereof the undersigned their) hand(s)	being duly author	ised by the insurers and	on behalf of the Insurers has (have) hereunde		
	4th day of May,2023.					
				For and on behalf of		
				The New India Assurance Company Limited		
Date of I	ssue: 04/05/2023					
				Duly Constituted Attorney(s)		
				Duly constituted Attorney(3)		
				er Numbervide receipt		
number_	dt Sta	amp Duty under th	e Policy is ₹1/			
	We hereby declare	hat though our a	ggregate turnover in a	ny preceding financial year from		

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: 16070023P0001384

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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