



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	TIRUPATI FIBERS			·
		Insureds Details		lss	uing Office Details
Customer ID	:	POA4919372	Office Code	:	JALGAON (160700)
Address	:	GUT.NO: 130/1-B, SILLOD ROAD, BHOKARDAN	Address	:	MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001
		BHOKARDAN ,MAHARASHTRA, 431114			
Phone No	:		Phone No	:	02572236189 / 02572232179
E-mail/Fax	:	annapurnacotex@yahoo.co.in, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27AADFT1155A1ZO / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details					
Policy Number : 16070046230100000065 Business Source Code					
Period of Insurance	:	From: 16/05/2023 04:33:39 PM To: 15/07/2023 11:59:59 PM	Dev.Off. Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Agent/Web Aggregator/CPSC User (SI00028623),		
Date of Proposal	:	16-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	S.B.I BR SILLOD

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
3,750	676	4,427	RUPEES FOUR THOUSAND FOUR HUNDRED TWENTY-SEVEN ONLY	1607008123000000113 1 - 16/05/23
Location Details		: Tirupati fibers, Gut.no: 130/1-B, Sillod Road, Bhokardan- 431114		

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in	n Trade	
SI. No.	STOCK DETAILS	Sum Insured
1	F.P Bales, Seeds, Cake etc	2000000

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

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

Office Ed	Office Equipments		
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured	
1	NA	0	

Coins / C	Currency notes	
SI. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured

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



CI N	OTHER ITEM RETAILS		
Description of other item			
1	NA NA	0	

Descript	Description of other item		
SI. No.	OTHER ITEM DETAILS	Sum Insured	
1	NA	0	

Add on Covers	Sum Insured (₹)
Other Extension	NOT OPTED
Theft Extension	NOT OPTED
Terrorism	NOT OPTED

Special Conditions	:	NA
Excess	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹	3,750
SGST	9	338	
CGST	9	338	
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 16th day of May,2023.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 16/05/2023

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 : 16070023P0001890

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C