



## POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

## UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	SHRI SAISHYAM COTSPIN			
Insureds Details			Issuing Office Details		
Customer ID	:	POA4250744	Office Code		JALGAON (160700)
Address	:	SURVEY NO. 19/4A & 19/5, MOUJE JOGBAN, BEHIND SHYAM WEIGH BRIDGE, OFF HIWARKHED ROAD, AKOT-, DIST. AKOLA- AKOT, MAHARASHTRA, 444101	Address	:	MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001
Phone No	:	XXXXXX6719	Phone No	:	02572236189 / 02572232179
E-mail/Fax	:	naser@jainuineinsurance.co.in, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189
PAN No	:	BESPB4950F	S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27ABWFS3819E1ZP / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details					
Policy Number	:	16070046230100000084	Business Source Code		
Period of Insurance	:	From: 31/05/2023 03:11:20 PM To: 30/05/2024 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	:	31-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 AMRAVATI			

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
8,000	1,440	9,440	RUPEES NINE THOUSAND FOUR HUNDRED FORTY ONLY	1607008123000000148 0 - 31/05/23
Location Details	: Sy No.19/4A & 19/5,Mouje Jogban, Behind Shyam Weigh Bridge,Off Hiwarkhed Road,Akot-,Akola-444101			

#### First Loss Percentage : NA

### Details of assets covered under the Policy

Stocks in Trade					
Sl. No.	STOCK DETAILS	Sum Insured			
1	Cotton F.P Bales & seeds	2000000			

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

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

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

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



			AROM ASSURANCE			
Coins / Curre	ncy notes					
SI. No.	COINS/CURR	ENCY	/CURIOS DETAILS	Sum Insured		
1		N.	A		0	
Description o	of other item					
Sl. No.		R ITE	M DETAILS		Sum Insured	
1		N.	A	0		
	Add on Covers			Sum Insu	red (₹)	
Other Extens	ion			NOT OF		
Theft Extensi	ion			NOT OF	TED	
Terrorism				NOT OF	TED	
Special Cond	itions	: 9	SHRI SAISHYAM COTSPIN			
·		Su	  Survey No. 19/4A & 19/5, Mouje Jogban, Behind Shyam Weigh Bridge, Off Hiwarkhed  Road, Akot-, Dist. Akola-44410			
Excess			1000			
This Policy sh	nall subject to BURGLARY	' polic	cy clauses attached herewith.			
Premium and 0	SST Details					
rieiliuili aliu C	331 Details		Rate of Tax	Amo	ount in INR	
Premium			1122 21 1221	₹	8,000	
SGST			9	720		
CGST			9	720		
IGST			0	0		
In witness wh set his (their)	nereof the undersigned b ) hand(s)	eing	duly authorised by the Insurers a	nd on beha	If of the Insurers has (have) hereunde	
on this 31st o	day of May,2023.					
					For and on behalf of	
				The Ne	ew India Assurance Company Limited	
				1110 110	maia /issurance company Emilica	
Date of Issue	e: 31/05/2023					
					Duly Constituted Attorney(s)	
Mudrank	Dt. co	nsoli	dated Stamp Fees Paid by Pay Or	der Numbe	er vide receipt	
number			ty under the Policy is ₹1/			
	<u> </u>					

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 : 16070023P0002502

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C