



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	LAXMINARAYAN FIBER PVT LTD				
Insureds Details			Issuing Office Details			
Customer ID	:	POA5770386	Office Code		: DO II AURANGABAD (160500)	
Address	:	GUT NO.275 & 276,HELESWADI, AT MANTHA DIST JALNA "- MANTHA ,MAHARASHTRA, 431504	Address	:	LIC BUILDING PLOT NO 3 JEEVAN SUMAN N 5 CIDCO JALGAON ROAD AURANGABAD ,431003	
Phone No	:		Phone No	:	02402482688 / 02402480985	
E-mail/Fax	:	laxminarayanfiber@gmail.com, /	E-mail/Fax	:	nia.160500@newindia.co.in / 02402486895	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27AACCL2664G1ZJ / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details					
Policy Number : 16050046230100000088		16050046230100000088	Business Source Code		
Period of Insurance	:	From: 19/06/2023 07:38:42 PM To: 18/09/2023 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	:	19-Jun-23	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA
Client Type	- :	Non-Corporate	E-mail/Fax	Ι:	kailash@jainuineinsurance.co.in, //

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

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
5,000	900	5,901	RUPEES FIVE THOUSAND NINE HUNDRED ONE ONLY	1605008123000000155 0 - 19/06/23
Location Details	ocation Details : Inthe godown of Bhushan Agro Industries Opp BPCL Petro Pump Mantha Jalna HighwayA/P Kendhali,Mantha			antha

: NA First Loss Percentage

Details of assets covered under the Policy

Stocks in Trade				
SI. No.	STOCK DETAILS	Sum Insured		
1	On stock of cotton F P Bales, Cotton Seeds, &	2000000		
	Cotton seed Oil Cake, soyabean etc whilst stored &/or			
	lying in Godown / & or Warehouse.			

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

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

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

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



1	N	IA	0	
Coins /	Currency notes			
SI. No.	_	//CURIOS DETAILS	Sum Insured	
1	N	Α	0	
Descrip	tion of other item			
SI. No.	OTHER ITE	M DETAILS	Sum Insured	
1	N	A	0	
	Add on Covers		Sum Insured (₹)	
Other E	xtension		NOT OPTED	
Theft Ex	ktension		NOT OPTED	
Terroris	m		NOT OPTED	
Special	Conditions :	AS PER POLICY		
Excess		0		
This Pol	icy shall subject to BURGLARY poli	cy clauses attached herewith.		
Premium SGST CGST IGST In witnesset his (Rate of Tax 9 9 0 duly authorised by the Insurers	Amount in INR ₹ 5,000 450 450 0 and on behalf of the Insurers has (have) hereunder	
Date of	Issue: 19/06/2023		For and on behalf of The New India Assurance Company Limited	
			Duly Constituted Attorney(s)	
Mudran number	kDtconsol ·dt Stamp Du	idated Stamp Fees Paid by Pay C uty under the Policy is ₹1/	order Numbervide receipt	

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 : 16050023P0003081

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C