



## POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

## UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	NIKHIL TRADERS			
	I	nsureds Details		lss	uing Office Details
Customer ID	:	PO92303822	Office Code	:	JALNA BRANCH (160501)
Address	:	AT POST C/O BHARAT AGRO INDUTRIES PLOT NO.A 74/75 MIDC KHAMGAON DIST.BULDANA	Address	:	K.K.NIWAS LAKKAD KOT NEAR BUS STAND AURANGABAD ROAD JALNA ,431203
		KHAMGAON ,MAHARASHTRA, 444303			
Phone No	:	XXXXXX6720, XXXXX9587	Phone No	:	02482232708 / 02482232709
E-mail/Fax	:	amitcotfiber@gmail.com, santosh.gurbani@yahoo.com /	E-mail/Fax	:	nia.160501@newindia.co.in /
PAN No	:	ADNPC0619B	S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27ADNPC0619B1Z3 / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

		Pol	icy Details		
Policy Number	:	16050146230100000044	<b>Business Source Code</b>		
Period of Insurance	:	From: 01/06/2023 02:15:00 PM To: 31/05/2024 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	:	01-Jun-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	s) Details	
SI. No.			Name of the Financiers	
1			ICICI BANK LTD	
Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date

Premium(<)	GST(K)	l otal(<)	l otal (< in words)	Receipt No. & Date
15,000	2,700	17,700	RUPEES SEVENTEEN THOUSAND SEVEN HUNDRED ONLY	1605018123000000184 8 - 01/06/23
Location Details		Bhawaal Spinners Pvt adalur cross,Beside sb	Ltd, i bank,Raichur, Karnataka 584101	

First Loss Percentage

Details of assets covered under the Policy

: NA

Stocks in	n Trade	
SI. No.	STOCK DETAILS	Sum Insured
1	Cotton, F.P Bales	3000000

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

Furniture	/ Fixture / Fittings	
SI. No.	FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured
1	NA	0
Office Equ	Jipments	
CL No.		Curre In europeid

SI. NO.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	NA	0

Policy No. : 16050146230100000044Document generated by 36776 at 01/06/2023 15:30:44 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

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http://newindia.co.in.



SI. No.	COINS/CURRE	NCY/CURIOS DETAILS		Sum Insured
1		NA		0
Description of oth	er item			
SI. No.	OTHER	ITEM DETAILS		Sum Insured
1		NA		0
Add	on Covers		Sum Insur	ed (₹)
Other Extension			NOT OPT	ED
Theft Extension			NOT OPT	ED
Ferrorism			NOT OPT	
Special Condition	s	: Godown Stock:- On Stock of Cotton,F.P Bales		
<b>Excess</b> This Policy shall s	ubject to BURGLARY	: 1000 policy clauses attached herewit	۱.	
	-	: 1000	ו.	
This Policy shall s	-	: 1000		Int in INR
This Policy shall s Premium and GST D Premium	-	: 1000 policy clauses attached herewit		<b>int in INR</b> 15,000
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Date of Issue: 01/06/2023

Duly Constituted Attorney(s)

\_Dt.\_\_\_\_ Mudrank\_\_\_\_\_ 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 : 16050123P0002020

**IRDA Registration Number: 190** NIA PAN NUMBER: AAACN4165C

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