



## POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

## UIN NUMBER - IRDAN190P0098100001

| Insured's Name | :                | TIRUPATI COTEX .  |                        |                  |   |
|----------------|------------------|---|------------------------|------------------|---|
|                | Insureds Details |   | Issuing Office Details |                  |   |
| Customer ID    | :                | POA5379557  | Office Code            |                  | JALNA BRANCH (160501)   |
| Address        | :                | PATWARI HALKA NO 03, INDUSTRIAL<br>AREA GRAM SEMLIYA, TEHSIL.<br>SENDHWA, DIST. BARWANI | Address                | :                | K.K.NIWAS LAKKAD KOT NEAR BUS<br>STAND AURANGABAD ROAD JALNA<br>,431203 |
| Phone No       |                  | SENDHWA (KHARGON) ,MADHYA<br>PRADESH, 451666  | Phone No               |                  | 02482232708 / 02482232709   |
| E-mail/Fax     | <u> </u>         | kailash@jainuineinsurance.co.in, /  | E-mail/Fax             | <del>-  </del> : | nia.160501@newindia.co.in /   |
| PAN No         | <u> </u>         | realization of paintain on tour an occount,   | S.Tax Regn. No         | <u> </u>         | AAACN4165CST178   |
| GSTIN/UIN      | :                | 23ABFPA5034Q1ZR / NA  | GSTIN                  | :                | 27AAACN4165C3ZP   |
|                | :                |   | SAC                    | :                | 997139 (Other non-life insurance services excl RI)                      |

| Policy Details                       |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|
| Policy Number : 16050146230100000056 |   |   |   |   |   |
| Period of Insurance                  | : | From: 16/06/2023 06:22:05 PM To: 15/08/2023 11:59:59 PM | Dev.Off.<br>level/Broker/Corp.<br>Agent/Web<br>Aggregator/CPSC User | : | Jainuine Insurance Brokers Pvt. Ltd (DA3388757)<br>Jainuine Insurance Brokers Pvt.Ltd (SI00028623), |
| Date of Proposal                     | : | 16-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) Details           |               |
|--------------------------------|---------------|
| SI. No. Name of the Financiers |               |
| 1                              | HDFC BANK LTD |

| Premium(₹)       | GST(₹) | Total(₹)                            | Total (₹ in words)                                  | Receipt No. & Date                  |
|------------------|--------|-------------------------------------|---|-------------------------------------|
| 5,625            | 1,013  | 6,639                               | RUPEES SIX THOUSAND SIX<br>HUNDRED THIRTY-NINE ONLY | 1605018123000000234<br>6 - 16/06/23 |
| Location Details |        | AMUNA SPINTECH PR<br>Arwani- 451666 | IVATE LIMITED , GRAM SEMLIYA, TEH                   | SIL SENDHWA, DIST -                 |

# First Loss Percentage : NA

Details of assets covered under the Policy

| Stocks in | n Trade                  |             |
|-----------|--------------------------|-------------|
| SI. No.   | STOCK DETAILS            | Sum Insured |
| 1         | Cotton F.P Bales & Seeds | 3000000     |

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

| Furniture | 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           |  |  |

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Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

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



| Coins / C | Coins / Currency notes        |             |  |  |  |
|-----------|-------------------------------|-------------|--|--|--|
| Sl. No.   | COINS/CURRENCY/CURIOS DETAILS | Sum Insured |  |  |  |
| 1         | NA                            | 0           |  |  |  |

| I | Description of other item |                    |             |  |  |
|---|---------------------------|--------------------|-------------|--|--|
|   | SI. No.                   | OTHER ITEM DETAILS | Sum Insured |  |  |
| Γ | 1                         | NA                 | 0           |  |  |

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

| Special Conditions | : | YAMUNA SPINTECH PRIVATE LIMITED , GRAM SEMLIYA, TEHSIL SENDHWA, DIST -<br>Barwani- 451666 |
|--------------------|---|---|
| Excess             |   | 2000  |

This Policy shall subject to BURGLARY policy clauses attached herewith.

#### **Premium and GST Details**

|         | Rate of Tax | Amount in INR |       |
|---------|-------------|---------------|-------|
| Premium |             | ₹             | 5,625 |
| SGST    | 0           | 0             |       |
| CGST    | 0           | 0             |       |
| IGST    | 18          | 1013          |       |

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)  $\frac{1}{2}$ 

on this 16th day of June, 2023.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 16/06/2023

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 : 16050123P0002604

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C

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