पॉलिसी अनुसूची/ Policy Schedule - National Bharat Sookshma Udyam Suraksha



Policy Number: 321800112310000106	व्यवसाय स्त्रोत / Business Source: 910275
	विक्रय चैनल विवरण/
	Sales Channel Details
	कोड/ Code: 91027500000001
जारीकर्ता कार्यालय/Issuing Office	नाम/ Name: JAINUINE INSURANCE
कार्यालय कोड/ Office Code: 321800	BROKERS PVT LTD - INDORE
कार्यालय पता/ Office Address: DEWAS	Contact Number: 9893131223
DIVISION 2-TARANI COLONY, A.B ROAD,, -	सह दलाल कोड / Co Broker Code:
State Code: 23 , Madhya Pradesh	
GSTIN : 23AAACN9967E1ZB	
Contact Number: 7272 250074	कस्टमर केयर टॉल फ्री नंबर/Customer
Mobile Number:	Care Toll Free Number:
	1800 345 0330
	ईमेल/
	email:customer.support@nic.co.in

ग्राहक का नाम /Customer Name: M/S SHUBH ENTERPRISES	ग्राहक आईडी /Customer ID: 9702176611	पैन /PAN:	
SHIVANE PUNE 411023 (M H), City: PUNE, District: PUNE, State:	फोन /Phone:		
	ई-मेल /E-Mail: slibindore@gmail.c	om	

		कवर नोट संख्या और तथि / Cover	0		
प्रीमयिम/ Premium	₹ 11,538.00	Note Number and Date	लागू नहीं/NA		
CGST	₹ 0.00				
SGST/UTGST	₹ 0.00		8800220615973176 Dt. 16/06/2023		
IGST	₹ 2,077.00	प्रस्ताव संख्या और तथिरि Proposal			
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00	Number and Date			
नर्पराप्ति योग्य स्टाम्प इ्यूटी Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तथिि Receipt Number and Date	321800812310001195 Dt. 19/06/2023		
कुल /Total Amount	₹ 13,621.00	पछिली पॉलिसी संख्या और समाप्ती तथि7 Previous Policy Number and Expiry Date	321800112210000096 and Dt.14/06/2023		

Occupancy Code: 4001	Occupancy Details: Storage of Non-hazar hazardous go Category I, II, III, Coir waste, Coir fibre a (Materials stored in Godowns and Silos)	oods of
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Total Location Sum Insured	₹ 70.00.000.00

LocationAddress:
1)DANGAT PATIL NAGAR SR NO 83 MILKAT NO 1456 SHIVANE PUNE 411023 MH,,Pune,Pune,Maharashtra,411023.

SL. No	Coverage	Sum Insured				
1	Basic Cover(Excluding EQ and STFI) ON STOCK OF FMCG PRODUCTS PACKING MATERIAL & SUCH OTHER GOODS SI 60 LAC, FURNITURE & FIXTURE ELE FITTING SI 10LAC		` 70,00,000.00			
•	अधिकि/Excess: Compulsory Ex	अधिकि/Excess: Compulsory Excess: ₹ 10,000.00, TEN THOUSAND ONLY.				
	Additional Information: NA					
2	STFI	ON STOCK OF FMCG PRODUCTS PACKING MATERIAL & SUCH OTHER GOODS SI 60 LAC,FURNITURE & FIXTURE ELE FITTING SI 10LAC	` 70,00,000.00			
_	अधिकि/Excess: Compulsory Excess: ₹ 10,000.00, TEN THOUSAND ONLY.					
	Additional Information: NA					
3	Earthquake	ON STOCK OF FMCG PRODUCTS PACKING MATERIAL & SUCH OTHER GOODS SI 60 LAC, FURNITURE & FIXTURE	` 70,00,000.00			

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Policy Number: 321800112310000106 व्यवसाय स्त्रोत / Business Source: 910275 विकरय चैनल विवरण/ Sales Channel Details कोड/ Code: 91027500000001 नाम/Name: JAINUINE INSURANCE जारीकर्ता कार्यालय/Issuing Office BROKERS PVT LTD - INDORE कार्यालय कोड/ Office Code: 321800 Contact Number: 9893131223 कारयालय पता/ Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD.. -सह दलाल कोड / Co Broker Code: 455001. State Code: 23, Madhya Pradesh GSTIN: 23AAACN9967E1ZB कस्टमर केयर टॉल फ्री नंबर/Customer Contact Number: 7272 250074 Mobile Number: **Care Toll Free Number:** 1800 345 0330 ईमेल/ email:customer.support@nic.co.in **ELE FITTING SI 10LAC** अधकि**/Excess:** Compulsory Excess: ₹ 10,000.00, TEN THOUSAND ONLY. Additional Information: NA ON STOCK OF FMCG PRODUCTS PACKING MATERIAL & SUCH OTHER GOODS SI 60 LAC, FURNITURE & FIXTURE ` 70 00 000 00 Terrorism **ELE FITTING SI 10LAC**

Clauses As per Annexure	:1
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अधिक/Excess: 1% of the claim amount for each and every claim subject to Minimum of INR 25,000 and Maximum of INR

टिष्पणयां/ Remarks: NBSUS POLICY COVERING BASIC COVER + EQ + STFI + TERRORISM

ALL TYPE OF STOCK OF FMCG PRODUCT PACKING MATERIALS & SUCH OTHER GOODS PERTAINING TO INSURED TRADE WHILST STORED &/OR LYING ANY WHERE IN GODOWN PREMISES STOCK HELD IN TRUAST ALSO COVERED FURNITURE FIXTURE ELECTRIACLA FITTING COMPUTER ETC

i) no kutcha construction

4

ii) no coverage for stocks in open

1,000,000

Additional Information: NA

- iii) no basement exposure
- iv) Value at risk on inception of policy not to exceed 05 Cr.

ALL OTHER CLAUSES, EXCESS, WARRENTIES AS PER NBSUS POLICY

जिसकी गवाही में दिनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवत अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुस्ची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट https://nationalinsurance.nic.co.in पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्त जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुस्ची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दिया जाता है कि प्रोमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमिकता निरस्त हो जाएगी। /IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 19/June/2023. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website https://nationalinsurance.nic.co.in shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'

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Policy Number: 321800112310000106	व्यवसाय स्त्रोत / Business Source: 910275		
	<u>विक्रय चैनल विविरण/</u> <u>Sales Channel Details</u> कोड/ Code: 9102750000001		
जारीकर्ता कार्यालय/ Issuing Office कार्यालय कोड/ Office Code: 321800 कार्यालय पता/ Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, -	नाम/Name: JAINUINE INSURANCE BROKERS PVT LTD - INDORE Contact Number: 9893131223 सह दलाल कोड / Co Broker Code:		
455001. State Code: 23, Madhya Pradesh GSTIN: 23AAACN9967E1ZB Contact Number: 7272 250074 Mobile Number:	कस्टमर केयर टॉल फ्री नंबर/Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in		

कृते नेशनल इन्श्योरेन्स कंपनी

स्टांप इ्यू**ली** Stamp Duty: (₹ 1.00)

स्टांप इयू**खे**मिटिड/ For and on behalf of National Insurance Stamp Company Limited

> अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

इंश्योरेन्सइंडयालमिटिड

TAX INVOICE

Invoice Serial No: 30878F3PE0000106 Invoice Date: 19/06/2023

Details of Supplier:

National Insurance Company Limited.,

DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001

23, Madhya Pradesh State: GSTIN No: 23AAACN9967E1ZB

Details Of Receiver: M/S SHUBH ENTERPRISES

Address: DANGAT PATIL NAGAR SR NO 83 MILKAT NO 1456 SHIVANE PUNE 411023 (M H)

City: PUNE, District: PUNE.

State: MAHARASHTRA,

PIN: 411023.

Place Of Supply State : Maharashtra

State Code: 27

GSTIN No: 27ADOFS8755R2ZO

सैक कोड/ SAC Code	सेवा का वविरण/ कुल/Total(Descripti on of Service	Q(C) , ,	टैक्स योग्य/ मूल्य/Taxable	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/I GST		केरला बाढ़ उपकर/Kerala Flood Cess	
			Value(₹)	दर/Rate	राशा∕ि Amount(₹)	दर/Rate	राशि Amount(₹)	दर/Rate	राशा∕ि Amount(₹)	राशा/Amount(₹)	
997139	Other non- life insurance services (excluding reinsuranc e services)	11,538	0%	11,538	0%	0	0%	0	18%	2,077	0
TOTAL		11,538		11,538		0		0		2,077	0

कुल इनवॉयस मूल्य (अंकों में)Total Invoice Value (In figures) :

क्ल इनवॉयस मूल्य (शब्दों में)Total Invoice Value (In words) : रूपए/Rupees

Thirteen Thousand Six Hundred Twenty One

केवल/Only.

रविर्स चार्ज के अधीन टैक्स की राशा/ Amount of Tax Subject to Reverse Charge : No

E.&.O.E

कृते नेशनल इन्श्योरेन्स कंपनी लमिटिड/ For and on behalf of National Insurance Company Limited

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

