



MACHINERY INSURANCE POLICY

Insured's Name	: ANNAPURNA COTEX PVT LTD		
Insured's Details		Issuing Office Details	
Customer ID	: PO93593416	Office Code	: AURANGABAD DO-160400 (160400)
Address	: GUT.NO: 237/5, PAITHAN ROAD,SHEVGAON, DIST-AHMEDNAGAR AHMEDNAGAR ,MAHARASHTRA, 414503	Address	: AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
Phone No	:	Phone No	: 02402333572 / 02402333361
E-mail/Fax	: annapurnacotex@yahoo.co.in, /	E-mail/Fax	: nia.160400@newindia.co.in / 02402331226
PAN No	:	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: 27AAHCA0876A1ZZ / NA	GSTIN	: 27AAACN4165C3ZP
		SAC	: 997137 (Other property insurance services)

Policy Details			
Policy Number	: 16040044235100000011	Business Source Code	
Period of Insurance	: From:25/07/2023 12:00:01 AM To: 24/07/2024 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent	: Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757) Jainuine Insurance Brokers Pvt.Ltd. - (SI00028623),
Date of Proposal	: 25-Jul-23	Agent/Bancassurance/CPS C User	:
Prev. Policy no.	:	Phone No	: 02402350377, 9850049400 / NA
Client Type	: Non-Corporate	E-mail/Fax	: kailash@jainuineinsurance.co.in, / /

Premium	GST	Total	Receipt No. & Date
6,749	1,214	7,963	16040081230000005092 - 25/07/23

Premises / Work Address (Site of the Property to be Insured)	Risk Address: Annapurna cotex Pvt Ltd Gut.no: 237/5, Paithan road,shevgaon-414502,,NA,MH1591,SHEVGAON,MH,MAHARASHTRA,INDIA,414502
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Total Sum Insured	₹ 900000
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Inventory of the Property Insured						
Sl. No.	Quantity	Description of Machines	Year of Make	Sum Insured (In ₹)	Escalation(%)	Excess(₹)
1	1	Machine Details: SR. NO.11/0 TRANSFORMER 630KVA,11/04 33 KV WITH OIL KIRLOSKAR 630 KVA , 11/04 33 KV WITH OIL YEAR - 2008, Serial No of Machine: SR. NO.11/0, Name of the manufacturer: KIRLOSKAR	2008	900000	NA	9000

Warranted that the machinery described in above schedule of Machinery does not embrace any foundations masonry and brickwork or Oil in transformer and other electrical equipment damage thereto being covered by the Policy only when specifically described in said schedule.

Sl. No.	Add on Covers Opted	Indemnity Limits Opted	Excess
1	THIRD PARTY LIABILITY	NA	Policy Excess
2	EXPRESS FREIGHT (EXCLUDING AIR FREIGHT), HOLIDAY RATES OF WAGES ETC	NA	Policy Excess
3	AIR FREIGHT	NA	5 % of Air Freight
4	ADDITIONAL CUSTOMS DUTY	NA	5 % of Additional duty
5	SURROUNDING PROPERTY	NA	Policy Excess
6	DEBRIS REMOVAL	NA	Policy Excess



ENDORSEMENTS ATTACHED TO & FORMING PART OF THE POLICY		
Sl. No.	Endorsement Number	Endorsement Title

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹ 6,749
SGST	9	607
CGST	9	607
IGST	0	0

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) on this 25th day of July,2023.

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 : 16040023P0007613

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C