

**Policy Number:****32180021231000040**

व्यवसाय स्रोत /Business Source: 910275

विक्रय चैनल वविरण/Sales Channel Code:
91027500000001नाम /Name: JAINUINE INSURANCE
BROKERS PVT LTD - INDORE Contact
Number: 9893131223

सह दलाल कोड / Co Broker Code:

जारीकर्ता कार्यालय/Issuing Office

कार्यालय कोड /Office Code: 321800

कार्यालय पता /Office Address: DEWAS
DIVISION 2-TARANI COLONY, A.B ROAD,,
- 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

Whereas the Assured named in the Schedule hereto have represented to **National Insurance Company LTD** (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

ग्राहक का नाम /Customer Name: M/S KOTECHA TRADING LLP	ग्राहक आईडी /Customer ID: 9702242095	पैन /PAN:
पता/ Address: NEAR GRAMPANCHAYAT 01 JAIN GALLI NANDURGHAT BEED MAHARASHTRA 431126 , City: BEED - DISTRICT OTHERS, District: BEED, State: MAHARASHTRA, PIN: 431126. Cell: 9893131223	फोन /Phone:	ई-मेल /E-Mail: slibindore@gmail.com

पॉलिसी: 21/07/2023 के 19:00 से 20/07/2024 की मध्य रात्रतिक प्रभावी /Policy Effective from 19:00 hours, on 21/07/2023 to
midnight of 20/07/2024

प्रीमियम/ Premium	₹ 20,000.00	कवर नोट संख्या और तिथि/ Cover Note Number and Date	लागू नहीं/NA
CGST	₹ 0.00	प्रस्ताव संख्या और तिथि/Proposal Number and Date	8800230724850135 Dt. 24/07/2023
SGST/UTGST	₹ 0.00		
IGST	₹ 3,600.00		
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00	रसीद संख्या और तिथि/Receipt Number and Date	321800812310001808 Dt. 24/07/2023
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	₹ 0.50	पछिली पॉलिसी संख्या और समाप्ती तिथि/ Previous Policy Number and Expiry Date	लागू नहीं/NA
कुल /Total Amount	₹ 23,601.00		

(Rupees Twenty Three Thousand Six Hundred One Only.)

Open Policy

Limit Per transit	65,00,000.00	Limit per location	1,35,00,000.00			
Voyage From Country	Voyage To Country	Voyage From	Voyage To	Via Port	Via Airport	Status of Insured
India	India	ANYWHERE IN INDIA (ONLY SALES)	ANYWHERE IN INDIA (EXCLUDING SALE SPOT DELIVERY & TRANSIT WITHIN 50 KMs)	NA	NA	Owner
Declaration Frequency	Monthly	Multi transit cover		No		
Mode of Transit	By Road					



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जारीकर्ता कार्यालय/ Issuing Office कार्यालय कोड /Office Code: 321800 कार्यालय पता /Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001. State Code: 23 , Madhya Pradesh GSTIN: 23AAAACN9967E1ZB Contact Number: 7272 250074 Mobile Number:	विक्रय चैनल वविरण/ Sales Channel Code: 91027500000001 नाम /Name: JAINUINE INSURANCE BROKERS PVT LTD - INDORE Contact Number: 9893131223 सह दलाल कोड / Co Broker Code:
	कस्टमर केयर टॉल फ्री नंबर/ Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in

Details of Packaging and Commodity		
Commodity	Packaging	Sum Insured
ALL KIND OF EDIBLE OIL (IN TANKER))	Tankers	INR 5,00,00,000.00
Storage description		
Description of storage	Period /time (In weeks)	
N/A	N/A	
Term Of Cover	As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto	
Clauses / Special Condition/Warranties	As per Annexure I	
Important notice (claim)	As per attached document	

Survey and claim settlement			
Survey Agent Details			
Jurisdiction of Claim settling agencies/Region of the world	Mail ID	Telephone No	Fax No
India	Contact nearest Division/Branch office of National Insurance Company .		
Canada,USA,North America,South America and Polynesia up to the east of International Date line.	eimc@eimc.com	+1 201 963 3355	+1 201 963 4015
For far East and Australia & Asia	james.lynch@eimc.com	+1 201 942 1204	+1 201 963 4015
All other Region except above	info@wkwebster.com and/or dlim@wkwebster.com	00 65 85224379 /020 83007744	00 65 62250428 / 020 83091266
	info@wkwebster.com and/or kwright@wkwebster.com	00 44 77 15003651 / 020 83007744	020 83091266

टिप्पणियां/ **Remarks:** BASIS OF VALUATION:- COST INSURANCE AND FREIGHT + 10%
 ALL RISK + SRCC
 COVERAGE FOR LOADING & UNLOADING
 EXCLUDING SALE SPOT DELIVERY & TRANSIT WITHIN 50 KMs
 EXCESS CLAUSE:- 0.50% OF THE CONSIGNMENT VALUE OR RS. 5000/- WHICHEVER IS HIGHER
 ALL OTHER CLAUSES, WARRENTIES, EXCESS AS PER MCOP POLICY
 . Warranted that unexplained losses (loss of moisture, evaporation, ordinary leakage, etc.) are excluded from the scope of coverage.
 Warranted Shortage from sound packages is excluded.
 Warranted that losses due to adulteration, contamination and deterioration of quality is excluded from the scope of coverage.
 Warranted that losses due to dampness of atmosphere, rot, dry rot, mould, fungus, infestation, or mildew is excluded from the scope of coverage.
 Warranted that all goods must be suitably packed and/or protected as befits the type of goods and the transit to be undertaken.

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जारीकर्ता कार्यालय/**Issuing Office**

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कार्यालय पता /Office Address: DEWAS
DIVISION 2-TARANI COLONY, A.B ROAD,,
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Care Toll Free Number:**
1800 345 0330

ईमेल/

email:customer.support@nic.co.in

WARRANTED CARGO CONVEYANCE TO BE FIT AND SUITABLE FOR THE INTENDED CARGO AND THE INTENDED JOURNEY.

WARRANTED THAT GOODS ARE TRANSPORTED IN CLOSED WAGONS AND/OPR TRUCKS TO BECOVERED WITH TARPULIN OR ANY OTHER WATERPROOF MATERIAL TO AVOID INGRESS OF WATER.

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधिकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, 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 पढा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दयिा जाता है कि प्रीमियम चेक के अस्वीकृतिके मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिस्त हो जाएगी। **/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 24/July/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'**

इंश्योरेन्सइंडयिलमिटिड

स्टॉप इयुलमिटिड/
**Stamp
Duty:**
(₹ 0.50)

कृते नेशनल इंश्योरेन्स कंपनी
For and on behalf of National Insurance
Company Limited

अधिकृत हस्तात्क्षरकर्ता/ **Authorized
Signatory**

TAX INVOICE

Invoice Serial No: 30878C3PE0000040

Invoice Date: 24/07/2023

Details of Supplier:

National Insurance Company Limited.,
DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001
State : 23 , Madhya Pradesh
GSTIN No : 23AAACN9967E1ZB

Details Of Receiver : M/S KOTECHEA TRADING LLP

Address : NEAR GRAMPANCHAYAT 01 JAIN GALLI NANDURGHAT BEED MAHARASHTRA 431126
City : BEED - DISTRICT OTHERS,
District: BEED,
State: MAHARASHTRA,
PIN: 431126.
Place Of Supply State : Maharashtra
State Code : 27
GSTIN No : 27AARFK4942Q2ZC

सैक कोड/ SAC Code	सेवा का विवरण/ Descripti on of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997135	Marine, aviation, and other transport insurance services	20,000	0%	20,000	0%	0	0%	0	18%	3,600	0
TOTAL		20,000		20,000		0		0		3,600	0

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :
₹ 23,601

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees
Twenty Three Thousand Six Hundred One
केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

कृते नेशनल इन्श्योरेंस कंपनी लिमिटेड/ For
and on behalf of National Insurance Company Limited

अधिकृत हस्ताक्षरकर्ता/ Authorized Signatory

