



POLICY SCHEDULE FOR PACKAGE INSURANCE POLICY UIN NUMBER - IRDAN190P0187V01100001

Insured's Name	:	: BEED URBAN MULTI STATE CO-OPP. CREDIT SOCIETY LTD.				
Insured's Details			Issuing Office Details			
Customer ID	:	PO43270361	Office Code	:	JALNA BRANCH (160501)	
Address		RATANLAL COMPLEX, ADALAT ROAD, GANGAKHED. DIST PARBHANI	Address	:	K.K.NIWAS LAKKAD KOT NEAR BUS STAND AURANGABAD ROAD JALNA ,431203	
		PARBHANI ,MAHARASHTRA, 431402				
Phone No	:	XXXXXX9450	Phone No	:	02482232708 / 02482232709	
E-mail/Fax	:	Sham@jainuineinsurance.co.in, /	E-mail/Fax	:	nia.160501@newindia.co.in /	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	NA / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

•	16050146232400000005	Bu	Business Source Code			
:	From:31/07/2023 08:57:15 PM To: 30/07/2024 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),		
:	31-Jul-23	Agent/Bancassurance/Spe cified Person	:			
:	16040146222400000007	Phone No	:	02402350377, 9850049400 / NA		
:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, / /		
-		: 31-Jul-23	30/07/2024 11:59:59 PM Agent/Web Aggregator/CPSC User : 31-Jul-23 Agent/Bancassurance/Spe cified Person : 1604014622240000007 Phone No	30/07/2024 11:59:59 PM Agent/Web Aggregator/CPSC User : 31-Jul-23 Agent/Bancassurance/Spe cified Person : 16040146222400000007 Phone No		

Premium(₹)	GST(₹)	Total(RS)	Total Rupees (In Words)	Receipt No. & Date
16,523	2,974	19,497	RUPEES NINETEEN THOUSAND FOUR HUNDRED NINETY- SEVEN ONLY	16050181230000003881 - 31/07/23

	Risk Details					
Risk No.	Section	Description Of Property	Sum Insured	Location Details	Excess	
1	Section I (Fire)	MONEY i.e. CURRENCY NOTES,	1000000	BEED URBAN MULTI STATE CO- OPP CREDIT SOCIETY LTD. RatanlalComplex, Adalat Road,Gangakhed Dist Parbhani	10000	
1	Section I (Fire)	OFFICE F.F.F. INCLUDING COMPUTERS, CCTV, ALARM ETC.	1500000	BEED URBAN MULTI STATE CO- OPP CREDIT SOCIETY LTD. RatanlalComplex, Adalat Road,Gangakhed Dist Parbhani	10000	
1	Section I (Fire)	GOLD AND SILVER INCLUDING ORNAMENTS	5000000	BEED URBAN MULTI STATE CO- OPP CREDIT SOCIETY LTD. RatanlalComplex, Adalat Road,Gangakhed Dist Parbhani	10000	

Policy No. : 1605014623240000005Document generated by 36776 at 31/07/2023 21:08:21 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. For redressal of your grievance, if any,you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in.



2	Section III (Burglary)	MONEY i.e. CURRENCY NOTES	1000000	BEED URBAN MULTI STATE CO- OPP CREDIT SOCIETY LTD. RatanlalComplex, Adalat Road,Gangakhed DistParbhani	1000
2	Section III (Burglary)	GOLD AND SILVER INCLUDING ORNAMENTS	5000000	BEED URBAN MULTI STATE CO- OPP CREDIT SOCIETY LTD. RatanlalComplex, Adalat Road,Gangakhed DistParbhani	1000
3	Section IV (Money)	ON MONEY i.e. CURRENCY NOTES AND COINS	4000000	WITHIN 5 KM'S RADIOUS FROM GANGAKHED OFFICE. SINGLE CARRYING LIMIT UNDER SECTION I A,B & CRS.25 LAC	1000

Risk No.	Special Conditions	Special Excess	
1	RISK AS PER SFSP POLICY WITH ADD ON RISK OF EQ A ND STFI.	10000	
2	AS PER BURGLARY INSURANCE POLICY CLAUSE.	1000	
3	(1) AS PER MONEY INSURANCE CLAUSE. (2) SINGLE CARR YING LIMIT RS. 25 LACS (3) S.R.C.C. RISK IS ALSO COVERD.	1000	

This Policy shall subject to PACKAGE INSURANCE policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹ 16,523	
SGST	9	1487	
CGST	9	1487	
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 31st day of July,2023.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 31/07/2023

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/-.

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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 : 16050123E0004387

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C