



## POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

#### UIN NUMBER - IRDAN190P0098100001

| Insured's Name   | : | RIDDHI SIDDHI COTEX PVT LTD                               |                        |   |   |
|------------------|---|---|------------------------|---|---|
| Insureds Details |   | Insureds Details  | Issuing Office Details |   | uing Office Details   |
| Customer ID      | : | PO97787986  | Office Code            | : | DO II AURANGABAD (160500)   |
| Address          | : | GUT NO.236,237, TALNI DEVI ROAD,<br>SHEVGAON, AHEMADNAGAR | Address                | : | LIC BUILDING PLOT NO 3 JEEVAN<br>SUMAN N 5 CIDCO JALGAON ROAD<br>AURANGABAD |
|                  |   | SHEVGAON ,MAHARASHTRA, 414502                             |                        |   | ,431003   |
| Phone No         | : |   | Phone No               | : | 02402482688 / 02402480985   |
| E-mail/Fax       | : | riddhisiddhi232@gmail.com, /                              | E-mail/Fax             | : | nia.160500@newindia.co.in / 02402486895                                     |
| PAN No           | : |   | S.Tax Regn. No         | : | AAACN4165CST178   |
| GSTIN/UIN        | : | 27AAECR0237R1ZZ / NA                                      | GSTIN                  | : | 27AAACN4165C3ZP   |
|                  | : |   | SAC                    | : | 997139 (Other non-life insurance services excl RI)                          |

| Policy Details  |    |   |   |    |   |
|---|----|---|---|----|---|
| Policy Number : 16050046230100000182 Business Source Code |    |   |   |    |   |
| Period of Insurance                                       | :  | From: 09/10/2023 12:00:01 AM To: 08/11/2023 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  | :  | 09-Oct-23   | Agent/Bancassurance/S pecified Person                               | :  |   |
| Prev. Policy no.  | :  |   | Phone No  | :  | 02402350377, 9850049400 / NA  |
| Client Type   | T: | Non-Corporate   | E-mail/Fax  | T: | kailash@jainuineinsurance.co.in, //   |

| Financier(s) Details |                        |
|----------------------|------------------------|
| SI. No.              | Name of the Financiers |
| 1                    | AXIS BANK LTD .        |

| Premium(₹)       | GST(₹)   | Total(₹) | Total (₹ in words)                         | Receipt No. & Date                  |
|------------------|--|----------|--|-------------------------------------|
| 625              | 112  | 738      | RUPEES SEVEN HUNDRED THIRTY-<br>EIGHT ONLY | 1605008123000000393<br>1 - 06/10/23 |
| Location Details | : AAKASH WAREHOUSE GODOWN NO.2,GUT NO. 345/1 A,VILLAGE RAJALWADI,TALUKA. SILLOD,DIST.AURANGABAD-431112 |          |  |                                     |

: NA First Loss Percentage

## Details of assets covered under the Policy

| Stocks in Trade |                 |             |
|-----------------|-----------------|-------------|
| Sl. No.         | STOCK DETAILS   | Sum Insured |
| 1               | Cotton FP Bales | 10000000    |

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

| Furniture / Fixture / Fittings |  |   |  |
|--------------------------------|--|---|--|
| SI. No.                        | No. FURNITURE/FIXTURE/FITTINGS DETAILS Sum Insured |   |  |
| 1                              | NA   | 0 |  |

| Office Equipments |                                      |   |  |
|-------------------|--------------------------------------|---|--|
| SI. No.           | OFFICE EQUIPMENT DETAILS Sum Insured |   |  |
| 1                 | NA                                   | 0 |  |

| Coins / C | Currency notes                |             |
|-----------|-------------------------------|-------------|
| SI. No.   | COINS/CURRENCY/CURIOS DETAILS | Sum Insured |

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



| 1        | NA                        | U           |  |  |
|----------|---------------------------|-------------|--|--|
|          |                           |             |  |  |
| Descript | Description of other item |             |  |  |
| SI. No.  | OTHER ITEM DETAILS        | Sum Insured |  |  |

|     | 1               | N. | Α | 0               |  |
|-----|-----------------|----|---|-----------------|--|
| Γ   | Add on Covers   |    |   | Sum Insured (₹) |  |
|     | Other Extension |    |   | NOT OPTED       |  |
| - 1 |                 |    |   |                 |  |

| Theft Extension        | NOT OPTED  |
|------------------------|--|
| Terrorism              | NOT OPTED  |
| Special Conditions : ( | On stock of Cotton EP Bales stored in the godown |

Special Conditions
 : On stock of Cotton FP Bales stored in the godown

 Excess
 : 1000

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

|         | Rate of Tax | Amount in INR |     |
|---------|-------------|---------------|-----|
| Premium |             | ₹             | 625 |
| SGST    | 9           | 56            |     |
| CGST    | 9           | 56            |     |
| 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 06th day of October, 2023.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 06/10/2023

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: 16050023P0008248

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C

This Policy shall subject to BURGLARY policy clauses attached herewith.