



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	PRADEEP FIBERS PRIVATE LIMITED			
		Insureds Details		lss	uing Office Details
Customer ID	:	POA1660538	Office Code	:	JALGAON (160700)
Address	:	DOOR NO.3, VENKATESHWARA NAGAR MAIN ROAD, SOLIPALAYAM, TIRUPPUR, TIRUPPUR,	Address	:	MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001
Phone No	:	, , , , , , , , , , , , , , , , , , , ,	Phone No	1:	02572236189 / 02572232179
E-mail/Fax	:	pradeepfibers.abad@gmail.com, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	33AADCP3567F1ZJ / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

		Po	licy Details		
Policy Number	:	16070046230100000260	Business Source Code		
Period of Insurance	:	From: 30/11/2023 12:00:01 AM To: 29/11/2024 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),
Date of Proposal	:	30-Nov-23	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //

	Financier(s) Details
SI. No.	Name of the Financiers
1	STATE BANK OF INDIA

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
3,750	675	4,425	RUPEES FOUR THOUSAND FOUR HUNDRED TWENTY-FIVE ONLY	1607008123000000646 0 - 30/11/23
Location Details		oor No.3,Venkateshwara Nagar Main Road,Solipalayam, Tiruppur, Tiruppur,Tar du-641652-641652		iruppur, Tiruppur,Tamil

: NA First Loss Percentage

Details of assets covered under the Policy

Stocks in	n Trade	
SI. No.	STOCK DETAILS	Sum Insured
1	Fabric, Yarn, Dyed Yarn, Garments,	15000000

Goods he	eld in Trust / Commision	
SI. No.	GOODS HELD DETAILS	Sum Insured
1	NA	0

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

Office Ed	quipments	
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	NA	0

Coins / Currency notes

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

Date of Issue: 01/12/2023



SI. No.	COINS/CURR	ENC'	Y/CURIOS DETAILS		Sum Insured
1		N	IA		0
Description of	other item				
SI. No.		R ITE	M DETAILS		Sum Insured
1		IA		0	
	Add on Covers			Sum Insi	ured (₹)
Other Extension				NOT O	` '
Theft Extension				NOT O	
Terrorism				NOT O	
Special Conditi	ions	S	On Stock of Fabric, Yarn, Dyed \ oods tock in process, related to insure EXCESS: 5% OF CLAIM AMOUNT S	ed trade	nts, Semi, Semi Finished and finished
Excess			5000	објест то	MINIMOM INK.3000/- FOR EEL.
This Policy sha	ll subject to BURGLARY		cy clauses attached herewith.		
This Policy sha	ll subject to BURGLAR\				
This Policy sha					
				Am	ount in INR
			cy clauses attached herewith.	A m ₹	ount in INR 3,750
Premium and GS			cy clauses attached herewith.		
Premium and GS			cy clauses attached herewith. Rate of Tax	₹	
Premium and GS Premium SGST			cy clauses attached herewith. Rate of Tax	₹ 0	3,750
Premium and GS Premium SGST CGST IGST	T Details reof the undersigned b	/ poli	cy clauses attached herewith. Rate of Tax 0 0 18	₹ 0 0 675	3,750
Premium and GS Premium SGST CGST IGST In witness whe set his (their) h	T Details reof the undersigned b	/ poli	cy clauses attached herewith. Rate of Tax 0 0 18	₹ 0 0 675	3,750
Premium and GS Premium SGST CGST IGST In witness whe set his (their) h	oreof the undersigned be nand(s)	/ poli	cy clauses attached herewith. Rate of Tax 0 0 18	₹ 0 0 675	3,750
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 Mudrank______Dt._____consolidated Stamp Fees Paid by Pay Order Number______vide receipt

 number______dt._____. Stamp Duty under the Policy is ₹1/-.

Duly Constituted Attorney(s)

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C