



## POLICY SCHEDULE FOR MONEY INSURANCE

## UIN NUMBER - IRDAN190P0127100001

| Insured's Name : KRISHNA NATURAL FIBER PVT LTD |                  |  |                |   |  |  |
|--|------------------|--|----------------|---|--|--|
|  | nsured's Details | Issuing Office Details   |                |   |  |  |
| Customer ID                                    | :                | PO85659191   | Office Code    | : | AURANGABAD DO-160400 (160400)                                    |  |
| Address  | :                | NR.AMC MARKET SHAKKARGA<br>ROAD,AT.PO-MADNOOR,DI:-<br>KAMAREDDY TELANGANA D NO 3-95 &<br>3-96 SHAKKARGA ROAD<br>ROAD,MANDNNUR -503309,DI:-<br>KAMAREDDY TELANGANA<br>GOVANDPRASAD KAKANI 5/114<br>KHATUNI VAS MARWADI GALI<br>MADNOOR 503309 DIST KAMAREDDY<br>Nizamabad,TELANGANA, 503309 | Address        | : | AJAY ENGINEERING COMPOUND,<br>ADALAT ROAD, AURANGABAD<br>,431005 |  |
| Phone No                                       | :                |  | Phone No       | : | 02402333572 / 02402333361  |  |
| E-mail/Fax                                     | :                | pancholi.tejas@gmail.com, /  | E-mail/Fax     | : | nia.160400@newindia.co.in /<br>02402331226                       |  |
| PAN No   | :                |  | S.Tax Regn. No | : | AAACN4165CST178  |  |
| GSTIN/UIN                                      | :                | 36AABCK9137G1ZG / NA   | GSTIN          | : | 27AAACN4165C3ZP  |  |
|  | :                |  | SAC            | : | 997139 (Other non-life insurance services excl RI)               |  |

| Policy Details      |   |   |   |   |   |  |  |
|---------------------|---|---|---|---|---|--|--|
| Policy Number       | : | 16040048230300000093                                    | Business Source Code  |   |   |  |  |
| Period of Insurance | : | From: 03/11/2023 04:40:20 PM To: 02/11/2024 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    | : | 03-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, //   |  |  |

| Premium(₹) | GST(₹) | Total(₹) | Total (₹ in words)                                       | Receipt No. & Date                  |
|------------|--------|----------|--|-------------------------------------|
| 13,200     | 2,376  | 15,576   | RUPEES FIFTEEN THOUSAND FIVE<br>HUNDRED SEVENTY-SIX ONLY | 1604008123000001001<br>0 - 03/11/23 |

| Money in safe (during and after business hours) |  | :  | 10000000   |
|---|--|----|--|
| Money in  | n Till   | :  | 10000000   |
| SI. No.   | Location & Address   |    |  |
| 1   | KRISHNA NATURAL FIBER PVT LTD<br>NR.AMC MARKET SHAKKARGA ROAD,AT.PO-MADNOOR ,DI:-KAMAREDDY TELANGANA |    |  |
| 2   | D no 3-95 & 3-96 SHAKKARGA ROAD, Mandnnur -DI:-KAMAREDDY TELANGANA                                   |    |  |
| 3   | GOVIND PRASAD KAKANI 5/114 KHATUNI VAS MARWADI GALI MADNOOR DIST KAMAREDDY                           |    |  |
| 4   | Insured Premises,Ba  | nk | ALL FACTORIES,OFFICES,RESIDENCE OF ALL DIRECTOR/PARTNER/PROPRIETOR |

| 5 | SECTION | N - 1        |  |  |
|---|---------|--------------|--|--|
| 9 | SI. No. | Sub Sections | Single Carrying Limits<br>for - Foreign Currency | Single Carrying Limits<br>for - Any other<br>(Specify) |



| 1. | Section 1 A - Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insureds premises from the time the cash is received at the bank by the insured or the authorized employee/ s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the insured to provide for such cash are covered in transit from the premises to the Bank. | 10000000 | 0 | 0 |
|----|--|----------|---|---|
| 2. | Section 1 B - Money (other than described in 1A above) in the personal custody of the insured or the authorized employee/s of the insured whilst in direct transit between the premises and the bank or post office and vice versa   | 10000000 |   | 0 |
| 3. | Section 1 C - Money ( other than described in 1A and 1B above ) collected by and in the personal custody of the insured or the authorized employee/s of the insured whilst in transit to the premises or hank within a period not exceeding 48 hours from the time of collection and vice versa  | 10000000 |   | 0 |

| Limit over the Policy period<br>(Estimated Annual Turnover) | : | 150000000 |
|---|---|-----------|
|---|---|-----------|

| Optional Covers | Sum Insured (₹) |
|-----------------|-----------------|
| SRCC Cover      | NOT OPTED       |
| Terrorism       | NOT OPTED       |

| Risk [ | Details  |                                |
|--------|--|--------------------------------|
| 1.     | Maximum distance over which money will be conveyed           | 10000000                       |
| 2.     | Details of employees handling Money                          | OWNER/AUTH EMPLOYEE            |
| 3.     | How is money carried   | BAGS,TRUNKS,SUITCASE WITH LOCK |
| 4.     | Mode of Transport  | PUB/PVT/HIRED/WALK             |
| 5.     | Details of armed guards or any other protection              | NO                             |
| 6.     | Details of money kept outside business hours                 | WOODEN & STEEL CUPBOARD        |
| 7.     | Is the safe where money is kept, fixed to the walls or floor | No                             |
| 8.     | By whom are the keys held                                    | OWNER/AUTH EMPLOYEE            |
| 9.     | Are all the keys removed outside business hours              | No                             |

| Special Conditions | : | Section 1 A ₹ 1,00,00,000/- (1 cr) |
|--------------------|---|------------------------------------|
|                    |   | Section 1 B ₹ 1,00,00,000/- (1 cr) |
|                    |   | Section 1 C ₹ 1,00,00,000/- (1 cr) |
|                    |   | Section 2 ₹ 1,00,00,000/- (1 cr)   |
|                    |   |                                    |
| Excess             | : | 1000                               |

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

## **Premium and GST Details**

|         | Rate of Tax | Amount in INR |        |  |
|---------|-------------|---------------|--------|--|
| Premium |             | ₹             | 13,200 |  |
| SGST    | 0           | 0             |        |  |
| CGST    | 0           | 0             |        |  |
| IGST    | 18          | 2376          |        |  |

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 03rd day of November,2023.

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



nited

|                   |                |  | For and on behalf of               |
|-------------------|----------------|--|------------------------------------|
|                   |                | Th   | ne New India Assurance Company Lim |
| Date of Issue     | : 03/11/2023   |  |                                    |
|                   |                |  | Duly Constituted Attorney(s)       |
| Mudrank<br>number |                | consolidated Stamp Fees Paid by Pay Order Nu Stamp Duty under the Policy is ₹1/  | ımbervide receipt                  |
| :                 | 2017-18 oʻnwar | lare that though our aggregate turnover in any p<br>ds is more than the aggregate turnover notified<br>quired to prepare an invoice in terms of the prov | under sub-rule (4) of rule 48,     |
|                   |                | Tax Invoice No : 16040023P001573   | 32                                 |
|                   |                | IRDA Registration Number: 190  |                                    |
|                   |                | NIA PAN NUMBER: AAACN4165C   |                                    |