SHOP KEEPERS INSURANCE POLICY SCHEDULE

: 182000/48/2024/1897 Policy No. Prev. Policy No.

Cover Note No. Cover Note Date

Insured's Code : 173425535 Issuing Office Code: 182000

Insured's Name : Reyansh Impex (GSTIN: Issuing Office : BO OSMANPURA CIRCLE AURANGABAD 27AAYFR0889G1ZE)

(GSTIN: 27AAACT0627R4ZW)

: Radhakisan Chal, Malkapur, Buldhana-· OFFICE NO. 3 & 4, 1st FLOOR, SAI Address Address

SQUARE, OSMANPURA CIRCLE,

AURANGABAD 431001

BULDHANA MAHARASHTRA 443101 AURANGABAD MAHARASHTRA 431601

Tel./Fax/Email : //0/NA Tel./Fax/Email : 0240 - 2332019, 2323364 / /

182000@orientalinsurance.co.in

Agent/Broker Details

443101

Dev.Off.Code

Agent/Broker : LC0000000281 M/S JAINUINE INSURANCE BROKERS PVT LTD

: 4th Floor Office No. E-5, Aurangabad Business Centre, Kesarsingpura **Address**

Adalat,,AURANGABAD MAHARASHTRA -431001,AURANGABAD,MAHARASHTRA,431001 Tel/Fax/Email

: 02572225747/8888841491/

Period of Insurance: FROM 18:00 ON 16/11/2023 TO MIDNIGHT OF 15/11/2024

Collection No. & Dt. : DC_I_IND 8714002742 - 16/11/2023 GST INVOICE NO: 2722284331378 UIN:0

Gross Premium Stamp Duty: 25 Total: 6,800 : 5,762 1038 **GST**

Co-insurance Details: NIL

Nature of Business : MOBILE SHOP

Sec. No.	Section	Description of property covered	Sum Insured Rs.	Premium Rs.

1B SEC 1(B) FIRE and **SPECIAL** PERILS -

Contents as detailed below contained within the above

premises / premises address:

Value Sr. Description No. CONTENTS

1 STOCK IN TRADE All types of Mobile 50,00,000.00 phones and all types of Accessories

53,00,000.00

2 Furniture Fitting and Fixture, Glass Shelf 3,00,000.00

Etc

2 SEC II Contents as in Section 1B **BURGLARY**

53,00,000.00 7,950.00

Place: **AURANGABAD**

16/11/2023 Date:

and HOUSE **BREAKING**





For and on behalf of The Oriental Insurance Company Limited

10,600.00

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupees

Page 1 of 3

Attached to and forming part of policy number 182000/48/2024/1897

3 SEC IIIA Money	Mon	ey in Transit						50,000	100.00
3 SEC IIIA Money	Mon	ey in Safe						1,50,000	375.00
6 SECTION VI	Description Yr of Mfg. / Mfd. by			by	Value				
NEON SIGN	ОТ	HERS	201	18		2,000		2,000	10.00
7 SECTION VII	De	scription				Value			
BAGGAGE	OTHER				2,000	_	2,000	10.00	
8 SECTION VIII PERSONAL ACCIDENT	Sr. No.	Name	DOB	Assignee Name	Table of Benefits		SI		
ACCIDENT			Age	Relationsh	ip				
	1	YOGESH AGRAWAL	18/12/1990 32	APURVA YOGESH AGRAWAL	Table II	Ę	5,00,000	5,00,000	500.00
				Spouse					
		cal Extension (x Disabilities	Covers : NIL : NA		Premium	in Rs :			

10 A LIABILITY SECTION X(A) PUBLIC LIABILITY

50,000 .4

20.00

S	r. No	Manufactured By	MACHINE_NO	
s	r. No	Manufactured By	MACHINE_NO	

The Insurance under this policy is subject to Warranties & Clauses :

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac,the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operaing offices as well as Company's website.

Terrorism clause

Terrorism Cancellation Clause

Terrorism Additional Exclusions

Place: AURANGABAD Date: 16/11/2023





For and on behalf of The Oriental Insurance Company Limited

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CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupees

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Attached to and forming part of policy number 182000/48/2024/1897

Excess: NIL

Bank Names are as per the list attached: None

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void ab inito (from inception).

In witness where of the undersigned being authorised by and on behalf of the Company has herein to set his hands at AURANGABAD the 16TH DAY OF NOVEMBER 2023.

Entered By : SUNIL BHANDARE

For and on behalf of

Examined By : SUNIL BHANDARE

The Oriental Insurance Company Limited

Policy Printed By: 508373 IP:
Policy Printed On: 16-NOV-23 17:50:04 MAC:

Authorised Signatory

Place: AURANGABAD Date: 16/11/2023





For and on behalf of The Oriental Insurance Company Limited

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