



New India Bharat Flexi Griha Raksha
UIN-IRDAN190RP0032V01202223

| 1. Insured's Details : | | | |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------|
| Insured Name | : MAHESHKUMAR BAIJNATH SHARMA | E-mail Id/Fax | : jagdambecottoncompany@gmail.com, / |
| Customer ID | : PO80621587 | PAN No. | : |
| Address | : C.T.S. NO. 2702/A/3, KESAR BAG, NEAR RAILWAY STATION & INDRAPRASTH NAGAR, JALGAON (M.S), NEAR RING ROAD , SHIVAJI NAGAR, JALGAON, JALGAON ,MAHARASHTRA, 425001 | GSTIN/UIN. | : NA / NA |
| Phone No. | : | | : |

| 2. Issuing Office Details : | | | |
|-----------------------------|-------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------|
| Office Name | : DO II AURANGABAD (160500) | E-mail Id/Fax | : nia.160500@newindia.co.in / 02402486895 |
| Office Code | : 160500 | S.Tax Regn. No. | : AAACN4165CST178 |
| Address | : LIC BUILDING PLOT NO 3 JEEVAN SUMAN N 5 CIDCO JALGAON ROAD AURANGABAD ,431003 MAHARASHTRA , 431003. | GSTIN | : 27AAACN4165C3ZP |
| Phone No. | : 02402482688 / 02402480985 | SAC | : 997137 (Other property insurance services) |

| 3. Policy Details : | |
|--------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Policy Number | : 16050011238500000021 |
| Period of Insurance | : From: 07/12/2023 03:50:25 PM To: 06/12/2024 11:59:59 PM |
| Date of Proposal | : 07-Dec-23 |
| Prev. Policy no. | : |
| Client Type | : Non-Corporate |
| Business Source Code | : |
| Dev.Off level./Broker | : Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757) Jainuine Insurance Brokers Pvt.Ltd. - (SI00028623), |
| Agent/Bancassurance/SPECIFIED PERSON | : |
| Phone No. | : 02402350377, 9850049400 / NA |
| E-mail Id/Fax | : kailash@jainuineinsurance.co.in, / / |

| 4. Collection Particulars : | | | |
|-----------------------------|---------|--------------------|-----------------------------------|
| Premium | : 2,031 | Total (₹) | : 2,397 |
| GST | : 366 | Receipt No. & Date | : 16050081230000005787 - 07/12/23 |

| 5. Policy Level Covers : | |
|--------------------------------|------------------------------|
| Description of Property | : As per Block Details |
| Location Address with Pin Code | : As per Block Details |
| Risk Description | : As per Block Details |
| Risk Code | : 1001(Dwelling: Individual) |
| Sum Insured | : ₹ 13,002,000 |

6. Block Details :

Policy No. : 16050011238500000021 Document generated by 35691 at 07/12/2023 16:32:49 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on <https://www.newindia.co.in/portal/policyFeedbackGen>.

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>.



| Risk SI No. | Location Address with Pin Code | Carpet Area of the structure(sq m) | Rate of Cost of Construction(₹ /sq.m) | Building SI | SI of Addl. Structure | Details of Addl. Structure | F.F.F.(Home Furnishing) SI |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------|-------------------|----------------------------|----------------------------|----------------------------|
| 1 | MAHESHKUMAR BAIJNATH SHARMA C.T.S. NO. 2702/A/3, Kesar Bag, Near Railway Station & Indraprasth Nagar, Jalgaon (M.S), Near Ring Road , SHIVAJI NAGAR, JALGAON, , 425001 | 3,000 | 4,334 | 1,30,02,000 | 0 | 0 | 0 |
| Risk SI No. | Location Address with Pin Code | Electrical/Electronic Sum Insured | Others General Contents Sum Insured | Total Sum Insured | Type of Construction-Walls | Type of Construction-Floor | Type of Construction-Roof |
| 1 | MAHESHKUMAR BAIJNATH SHARMA C.T.S. NO. 2702/A/3, Kesar Bag, Near Railway Station & Indraprasth Nagar, Jalgaon (M.S), Near Ring Road , SHIVAJI NAGAR, JALGAON, , 425001 | 0 | 0 | 1,30,02,000 | Pucca | Pucca | Pucca |

7. Additional Covers:

7(a) Inbuilt Cover:

Cover for Loss of Rent

| Risk Serial Number | Sum Insured for No. of Months | No. of Months |
|--------------------|-------------------------------|---------------|
| 1 | 0 | 0 |

Cover for Rent for Alternative Accommodation

| Risk Serial Number | Sum Insured for No. of Months | No. of Months |
|--------------------|-------------------------------|---------------|
| 1 | 0 | 0 |

7(b) Optional Covers:

i) Valuable Contents:

| SI No | Item Name | Sum Insured | Valuation Certificate Attached | Valuation agency |
|-------------------|-----------|-------------|--------------------------------|------------------|
| Total Sum Insured | | | | |

ii) PA cover

| Name of Policy Holder | Age | Sum Insured | Nominee Name | Relationship |
|-----------------------|-----|-------------|--------------|--------------|
| NA | 0 | 0 | NA | NA |
| Name of your Spouse | Age | Sum Insured | Nominee Name | Relationship |
| NA | 0 | 0 | NA | NA |

(7c) Add-on Covers

| Sl. No. | Add-on Covers | SI/Maximum limit of Indemnity | Availed/Not Availed |
|---------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------|
| 1 | Removal of Debris (In Excess of 2% and maximum up to 5% of claim amount) | In Excess of 2% and Maximum up to 5% of the claim amount | Not Availed |
| 2 | Architects, Surveyors and Consulting Engineers Fees (In excess of 5% & maximum up to 10% of claim amount) | In Excess of 5% & Maximum up to 10% of the claim amount | Not Availed |
| 3 | Reimbursement of Food Expense | Maximum 3 days up to ₹15000/- | Not Availed |
| 4 | Garden & Landscaping and Tree Removal cost | 5% of Claim amount maximum upto ₹25000/- | Not Availed |

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| | | | |
|----|---------------------------------------------------------|----------------------------------------------------------------|-------------|
| 5 | Loss Minimization Expenses | 5% of claim amount upto ₹10 lakhs | Not Availed |
| 6 | Immediate Repairs | 5% of claim amount upto ₹10,000/- | Not Availed |
| 7 | Immediate Repairs | 5% of claim amount upto ₹50,000/- | Not Availed |
| 8 | Claims Preparation cost | 5% of claim amount maximum upto ₹50,000 | Not Availed |
| 9 | Claims Preparation cost | 5% of claim amount maximum upto ₹ 25 Lacs | Not Availed |
| 10 | Omission to Insure additions, alterations or extensions | 5% of Sum Insured of Fixed Assets | Not Availed |
| 11 | Brokerage for Alternate accommodation(Maximum ₹25000/-) | applicable only to Individual Dwellings covering Home Building | Not Availed |

8. Sum Insured Summary :

| Sl. No. | Asset Description | Sum Insured (₹) |
|---------|---------------------------------------------------------------|-------------------|
| 1. | Home building Sum Insured | 13,002,000 |
| 2. | SI of additional structure | 0 |
| 3. | Furniture, Fixtures and Fittings(Home Furnishings)Sum Insured | 0 |
| 4. | Electrical/Electronic Sum Insured | 0 |
| 5. | Other General Contents SI | 0 |
| 6. | Other property specifically required to be covered | 0 |
| | Total Sum Insured | 13,002,000 |

9. Terrorism/EQ/STFI :

| | | | | | |
|-------------------|------|--------------------|-------|--------------|-------|
| Terrorism Covered | : NO | Earthquake Covered | : Yes | STFI Covered | : Yes |
|-------------------|------|--------------------|-------|--------------|-------|

10. Hypothecation Details :

| Sl.No. | Name of the Financiers |
|--------|------------------------|
| 1 | STATE BANK OF INDIA |

11. Coinsurance Details :

| Sl.No. | Coinsurance Type | Company | Office Code | % Share | Premium Share |
|--------|------------------|---------|-------------|---------|---------------|
| 1 | NOT OPTED | | | | |

12. Subjectivities :

The insurance under this policy is subject to

| | |
|---------------------------------|--------------------------------|
| Special Conditions | : Residential Building |
| Warranty Title | Wordings |
| Special Exclusion | : NA |
| Risk Covered | : As per Risk covered attached |
| Fire Products-Exclusions | : As per Exclusions attached |

14. Premium Details :

| Premium Head | Premium Amount (₹) |
|---------------------------------------|-------------------------------------------------------|
| Net Premium under the policy | : 2,031 |
| GST | : 366 |
| Total premium including GST | : 2,397 |
| Total premium including GST(In words) | : RUPEES TWO THOUSAND THREE HUNDRED NINETY-SEVEN ONLY |

Premium and GST Details

| | Rate of Tax | Amount in INR |
|--|-------------|---------------|
|--|-------------|---------------|



| | | |
|---------|---|---------|
| Premium | | ₹ 2,031 |
| SGST | 9 | 183 |
| CGST | 9 | 183 |
| IGST | 0 | 0 |

In witness whereof the undersigned being duly authorized by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 07th day of December, 2023.

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 07/12/2023

Duly Constituted Attorney(s)

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 : 16050023P0011684

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C