



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	: PALETTE			
Insureds Details		Issuing Office Details			
Customer ID	:	POB0354113	Office Code	:	DO II AURANGABAD (160500)
Address	:	SHOP NO.1, PLOT NO.1, BESIDE LMS JEWELLERS, SAUJI HOSPITAL ROAD SHRINIKETAN COLONY, JALNA ROAD, AURANGABAD, MAHARASHTRA, 431001 AURANGABAD, MAHARASHTRA, 431001	Address	:	LIC BUILDING PLOT NO 3 JEEVAN SUMAN N 5 CIDCO JALGAON ROAD AURANGABAD ,431003
Phone No	:		Phone No	:	02402482688 / 02402480985
E-mail/Fax	:	palettefurnishings@gmail.com, /	E-mail/Fax	:	nia.160500@newindia.co.in / 02402486895
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27AODPP4338K1ZM / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details					
Policy Number : 160500462301		16050046230100000268	Business Source Code		
Period of Insurance	:	From: 08/12/2023 04:59:59 PM To: 07/12/2024 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	:	08-Dec-23	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA
Client Type	T:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //

Premium(₹)	GST(₹) Total(₹)		Total (₹ in words)	Receipt No. & Date
2,500	450	2,950	RUPEES TWO THOUSAND NINE HUNDRED FIFTY ONLY	1605008123000000583 4 - 08/12/23
Location Details	: MR RAJESH BALDEVA GODOWN NO. 1 & 4,(UNDERGROUND)BALDEVA ARCADE, ABHINAY THEATRE, SHRINIKETAN COLONY -431001			

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in Trade				
SI. No.	STOCK DETAILS	Sum Insured		
1	Foam, Mattress, Pvc flooring, wooden flooring, ceiling vox,	10000000		

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

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

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

Coins / Currency notes				
Sl. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured		

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



1	N/	4	0		
December	tion of other item				
SI. No.	tion of other item OTHER ITE	A DETAILS	Sum Incured		
1	OTHER ITEM		Sum Insured 0		
	IN/	1	0		
	Add on Covers		Sum Insured (₹)		
Other Ex	xtension		NOT OPTED		
Theft Ex	tension	NOT OPTED			
Terroris	m		NOT OPTED		
Special	Conditions : F	Foam, Mattres Pvc floorin wooden lairpillow, bedsheet, curtain fabri att,phomi, cladding,blinds, skirtin	floorin ceiling vox hpl sheet, acpsheet sofa catalo, c, sofa fabric bed astar, carpet rugsartificia grass g, reducer wallpaper.		
Excess	: 0)			
This Poli	icy shall subject to BURGLARY polic	y clauses attached herewith.			
Premium	and GST Details	Rate of Tax	Amount in INR		
Premium		nate of rax	₹ 2,500		
SGST		9	225		
CGST		9	225		
IGST		0	0		
set his (ss whereof the undersigned being o their) hand(s) 08th day of December,2023.	duly authorised by the Insurers an	nd on behalf of the Insurers has (have) hereunder		
			For and on behalf of		
			The New India Assurance Company Limited		
Date of	lssue: 08/12/2023				
			Duly Constituted Attorney(s)		
	kDtconsolic dt Stamp Dut		der Numbervide receipt		
	We hereby declare that the 2017-18 onwards is more t	ough our aggregate turnover in han the aggregate turnover no	any preceding financial year from tified under sub-rule (4) of rule 48,		

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 : 16050023P0011777

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C