



POLICY SCHEDULE FOR MONEY INSURANCE

UIN NUMBER - IRDAN190P0127100001

Insured's Name	:	VENKATESH COTTON PVT LTD	·		
	nsured's Details	Issuing Office Details			
Customer ID :		POA1538464	Office Code		AURANGABAD DO-160400 (160400)
Address	:	478/2 PARBHANI ROAD, MANWATH , DIST PARBHANI	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
		PARBHANI ,MAHARASHTRA, 431401			
Phone No	:		Phone No	:	02402333572 / 02402333361
E-mail/Fax	:	Vcpl.sdw@gmail.com, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27AADCV6521H1ZA / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services

Policy Details						
Policy Number						
Period of Insurance	:	From: 11/01/2024 05:05:23 PM To: 10/01/2025 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	:	11-Jan-24	Agent/Bancassurance/S pecified Person	:		
Prev. Policy no.	:	16040048220300000060	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
16,000	2,880	18,880	RUPEES EIGHTEEN THOUSAND EIGHT HUNDRED EIGHTY ONLY	1604008123000001367 4 - 11/01/24

Money in safe (during and after business hours)		:	15000000	
Money in Till			15000000	
SI. No.	Location & Address			
1	Premises, Bank, ALL FACTORIES, OFFICES, RESIDENCE OF ALL directors/ PARTNER / PROPRIETOR.			
2	VENKATESH COTTON PVT LTD 478/2 PARBHANI ROAD, MANWATH , DIST PARBHANI			

SECTIO	SECTION - 1								
SI. No.	Sub Sections	Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts	Single Carrying Limits for - Foreign Currency						
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.	15000000	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	15000000	0	0					

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



3.	Section 1 C - Money (other than described and 1B above) collected by and in the per custody of the insured or the authorized employee/s of the insured whilst in transit premises or hank within a period not exceed the transmitten of collection and viversa	to the eding	15000000		0	0	
	over the Policy period : 20000000 ated Annual Turnover)	00					
Option	al Covers		Sum Insured	l (₹)			
SRCC	Cover		NOT OPTED				
Terrori	sm		NOT OPTED				
Risk D	etails						
1.	Maximum distance over which money will	be conve	yed		300		
2.	Details of employees handling Money	•			NA		
3.	How is money carried				IN ANY TYPE OF BA	.GS, TRUNKS, S	
4.	Mode of Transport				ANY VEHICLE	<u> </u>	
5.	Details of armed guards or any other prote	ection			No Security	Guard	
6.	Details of money kept outside business ho	urs		Saf	e Consists of Woode	en / Steel Cupboard	
7.	Is the safe where money is kept, fixed to the	ne walls o	r floor	No			
8.	By whom are the keys held			BY OWNER OR AUTHORIZED EMPLOYE			
9.	Are all the keys removed outside business	hours			No		
Excess	Section 1 E Section 1 C Section 2 ₹	8 ₹ 150,00 C ₹ 150,00 f 150,00,0	,00,000/- (150L),000/- (150Lak),000/- (150Lak),000/- (150Lakh	(hs) (hs) s)			
	m and GST Details	y clauses	Rate of Tax		mount in INR		
Premiu	m			₹	16,000		
SGST			9	1	440		
CGST			9		440		
IGST			0	0			
In witn set his	ess whereof the undersigned being duly auth (their) hand(s) on this 11th day of January,20	orised by 024.	the Insurers ar	nd on be	half of the Insurers	has (have) hereunder	
Date c	f Issue: 11/01/2024			The	For and on b New India Assurand	pehalf of se Company Limited	
					Duly Constituted	l Attorney(s)	
	nkDtconsolidated Sta erdt Stamp Duty under			der Num	ıberv	ide receipt	

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



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: 16040023E0022043

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C