



POLICY SCHEDULE FOR MONEY INSURANCE

UIN NUMBER - IRDAN190P0127100001

Insured's Name		MAHAVEER COTEX		·		
	Insured's Details		Issuing Office Details			
Customer ID		PO83877255	Office Code	Office Code : AURANGABAD DO-160400 (160		
Address	:	SHANWARA,BURHANPUR (MP) BURHANPUR ,MADHYA PRADESH, 450331	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005	
Phone No			Phone No	:	02402333572 / 02402333361	
E-mail/Fax	:	mahaveercottex@gmail.com, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226	
PAN No			S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN		23AAUFM0905G1ZE / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details						
Policy Number : 16040048230300000147 Business Source Code						
Period of Insurance	:	From: 23/01/2024 02:51:17 PM To: 22/01/2025 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	:	23-Jan-24	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
8,800	1,584	10,384	RUPEES TEN THOUSAND THREE HUNDRED EIGHTY-FOUR ONLY	1604008123000001423 7 - 23/01/24

Money in safe (during and after business hours)		:	9900000		
Money in Till		:	9900000		
SI. No.	lo. Location & Address		Location & Address		
1	MAHAVEER COTEX, SHANWARA, BURHANPUR				
2	FACTORY, BANKS, OFFICE, RESIDENCE OF ALL PARTNER / PROPRIETOR.				

SECTION - 1							
SI. No.	Sub Sections	Single Carrying Limits for - Cash/Coin/ Travelers Cheques/ Bank drafts	Single Carrying Limits for - Foreign Currency	Single Carrying Limits for - Any other (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.	9900000	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	9900000	0	0			

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



3.	Section 1 C - Money (other and 1B above) collected by custody of the insured or th employee/s of the insured v premises or hank within a p 48 hours from the time of c versa	and in the personal e authorized whilst in transit to the period not exceeding	9900000	0	0			
Limit ov (Estima	ver the Policy period ated Annual Turnover)	: 100000000						
Ontiona	al Covers		Sum Insured	(₹)				
SRCC C			NOT OPTED	(\)				
Terroris			NOT OPTED					
			1					
Risk De								
1.	Maximum distance over wh		yed		500			
2.	Details of employees handli	ng Money		By owner or authorized employee				
3.	How is money carried			IN ANY TYPE OF BAGS, TRUNKS,				
4.	Mode of Transport			ANY VEHICLE				
5.	Details of armed guards or				ırity Guard			
6.	Details of money kept outsi			Safe Consists of Wo	oden / Steel Cupboard			
7.	Is the safe where money is	kept, fixed to the walls o	or floor	No				
8.	By whom are the keys held			NA				
9.	Are all the keys removed or	itside business hours			No			
Special	Conditions	: Section 1 A ₹ 99,00, Section 1 B ₹ 99,00, Section 1 C ₹ 99,00,	,000/- (99 Lakhs)				
		Section 2 ₹99,00,00	0/- (99 Lakhs)					
Excess		: 1000						
This Po	licy shall subject to MONEY IN	ISURANCE policy clauses	s attached herev	vith.				
Premium	n and GST Details		D.L. CT.	A.v. alliano				
Premiun	•		Rate of Tax	Amount in INR ₹ 8,800				
SGST			0	0				
CGST			0	0				
IGST			18	1584				
In witne set his	ess whereof the undersigned (their) hand(s) on this 24th da	being duly authorised by ay of January,2024.	the Insurers an	d on behalf of the Insur	ers has (have) hereunder			
Date of	f Issue: 24/01/2024				on behalf of rance Company Limited			
				Duly Constitu	uted Attorney(s)			
	nkotc rdt Star			ler Number	vide receipt			

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



IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C