



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	SHRI KRISHNA GINNING & PRESSING	G FACTORY			
Insureds Details		Insureds Details	Issuing Office Details			
Customer ID		POA3762686	Office Code	:	JALGAON (160700)	
Address	:	PLOT NO.A-11 & A-5, MIDC, DEOLI DIST- WARDHA	Address	:	MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001	
		DEOLI ,MAHARASHTRA, 442101				
Phone No	:		Phone No	:	02572236189 / 02572232179	
E-mail/Fax	:	maheshagrawal69@gmail.com, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	27AABHM7216H1Z9 / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details					
Policy Number : 16070046230100000337 Business Source Code					
Period of Insurance	:	From: 30/01/2024 03:40:28 PM To: 29/07/2024 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	:	30-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, //

Financier(s) Details		
SI. No. Name of the Financiers		
1	ICICI BANK LTD BR NAGPUR	

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date	
5,625	1,012	6,638	RUPEES SIX THOUSAND SIX HUNDRED THIRTY-EIGHT ONLY	1607008123000000812 4 - 30/01/24	
Location Details		Ambika Industries C/o. EOLI -442101-442101	./o. Dineshkumar Mohanlal Agrawal Godown,Plot.no. A- 4 ,M 01		

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in Trade				
SI. No.	STOCK DETAILS	Sum Insured		
1	cotton F P Bales, & Cotton seed	3000000		

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

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

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

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

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



1		NA				0
Descript	vian of other item					
Sl. No.	tion of other item	EM DETAILS			Sum	Incured
1		NA		Sum Insured 0		
	1					
	Add on Covers			Sum Insure		
Other Ex				NOT OPT		
Theft Ex				NOT OPT		
Terrorisi	<u> </u>			NOT OPT	בט	
Special (Conditions :	Ambika Industries C	/o. Dineshkuma	ar Mohanla	l Agrawal Go	odown ,
		Plot no. A- 4 ,MIDC,	DEOLI Dist. Wa	rdha Maha	rashtra PIN	- 442101
Excess	:	1000				
This Poli	icy shall subject to BURGLARY po	licy clauses attached	herewith.			
Premium	and GST Details					
			Rate of Tax	Amou	ınt in INR	
Premium				₹	5,625	
SGST			9	506		
CGST			9	506		
IGST			0	0		
In witnes set his (ss whereof the undersigned being their) hand(s)	g duly authorised by	the Insurers an	d on behalf	f of the Insur	ers has (have) hereunder
on this 3	30th day of January,2024.					
					For and	on behalf of
				The Nev	v India Assur	ance Company Limited
						, ,
Date of	Issue: 30/01/2024					
					Duly Constitu	uted Attorney(s)
				!	Duly Constitt	ateu Attorney(s)
Mudrank	<dtconsc< td=""><td>olidated Stamp Fees F</td><td>Paid by Pay Ord</td><td>er Number</td><td></td><td>vide receipt</td></dtconsc<>	olidated Stamp Fees F	Paid by Pay Ord	er Number		vide receipt
number_	dt Stamp D	Outy under the Policy	is ₹1/			

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: 16070023P0013902

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C