



**POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE**

**UIN NUMBER - IRDAN190P0098100001**

|                         |   |                               |   |
|-------------------------|---|-------------------------------|---|
| <b>Insured's Name</b>   | : PEEYUSH TRADERS   |                               |   |
| <b>Insureds Details</b> |   | <b>Issuing Office Details</b> |   |
| <b>Customer ID</b>      | : POA5697242  | <b>Office Code</b>            | : JALNA BRANCH (160501)   |
| <b>Address</b>          | : OPPOSITE GANESH GINNING<br>BARWANI ROAD ANJAD, BARWANI<br>,MADHYA PRADESH<br><br>ANJAOI ,MADHYA PRADESH, 451556 | <b>Address</b>                | : K.K.NIWAS LAKKAD KOT NEAR BUS<br>STAND AURANGABAD ROAD JALNA<br>,431203 |
| <b>Phone No</b>         | :   | <b>Phone No</b>               | : 02482232708 / 02482232709   |
| <b>E-mail/Fax</b>       | : piyushgouri@gmail.com, /  | <b>E-mail/Fax</b>             | : nia.160501@newindia.co.in /   |
| <b>PAN No</b>           | :   | <b>S.Tax Regn. No</b>         | : AAACN4165CST178   |
| <b>GSTIN/UIN</b>        | : 23ABUPG6802D1ZV / NA  | <b>GSTIN</b>                  | : 27AAACN4165C3ZP   |
|                         |   | <b>SAC</b>                    | : 997139 (Other non-life insurance services<br>excl RI)                   |

|                            |  |   |   |
|----------------------------|--|---|---|
| <b>Policy Details</b>      |  |   |   |
| <b>Policy Number</b>       | : 16050146230100000181                                       | <b>Business Source Code</b>   | :   |
| <b>Period of Insurance</b> | : From: 01/02/2024 03:02:12 PM To:<br>30/04/2024 11:59:59 PM | <b>Dev.Off.<br/>level/Broker/Corp.<br/>Agent/Web<br/>Aggregator/CPSC User</b> | : Jainuine Insurance Brokers Pvt. Ltd. -<br>(DA3388757)<br>Jainuine Insurance Brokers Pvt.Ltd. -<br>(SI00028623), |
| <b>Date of Proposal</b>    | : 01-Feb-24  | <b>Agent/Bancassurance/S<br/>pecified Person</b>                              | :   |
| <b>Prev. Policy no.</b>    | :  | <b>Phone No</b>   | : 02402350377, 9850049400 / NA  |
| <b>Client Type</b>         | : Non-Corporate  | <b>E-mail/Fax</b>   | : kailash@jainuineinsurance.co.in, / /  |

|                             |                               |
|-----------------------------|-------------------------------|
| <b>Financier(s) Details</b> |                               |
| <b>Sl. No.</b>              | <b>Name of the Financiers</b> |
| 1                           | HDFC BANK LTD                 |

|                         |               |   |   |                                     |
|-------------------------|---------------|---|---|-------------------------------------|
| <b>Premium(₹)</b>       | <b>GST(₹)</b> | <b>Total(₹)</b>   | <b>Total (₹ in words)</b>                         | <b>Receipt No. &amp; Date</b>       |
| 1,499                   | 270           | 1,770   | RUPEES ONE THOUSAND SEVEN<br>HUNDRED SEVENTY ONLY | 1605018123000001019<br>6 - 01/02/24 |
| <b>Location Details</b> |               | : Annapurna Agri and Warehousing,<br>Vill and Post Talwada Bujurg Teh and Dist Barwani451556-451556 |   |                                     |

|                              |      |
|------------------------------|------|
| <b>First Loss Percentage</b> | : NA |
|------------------------------|------|

**Details of assets covered under the Policy**

|                        |                      |                    |
|------------------------|----------------------|--------------------|
| <b>Stocks in Trade</b> |                      |                    |
| <b>Sl. No.</b>         | <b>STOCK DETAILS</b> | <b>Sum Insured</b> |
| 1                      | F.P. COTTON BALES    | 6000000            |

|  |                           |                    |
|--|---------------------------|--------------------|
| <b>Goods held in Trust / Commision</b> |                           |                    |
| <b>Sl. No.</b>                         | <b>GOODS HELD DETAILS</b> | <b>Sum Insured</b> |
| 1                                      | NA                        | 0                  |

|                                       |   |                    |
|---------------------------------------|---|--------------------|
| <b>Furniture / Fixture / Fittings</b> |   |                    |
| <b>Sl. No.</b>                        | <b>FURNITURE/FIXTURE/FITTINGS DETAILS</b> | <b>Sum Insured</b> |
| 1                                     | NA  | 0                  |

|                          |                                 |                    |
|--------------------------|---------------------------------|--------------------|
| <b>Office Equipments</b> |                                 |                    |
| <b>Sl. No.</b>           | <b>OFFICE EQUIPMENT DETAILS</b> | <b>Sum Insured</b> |
| 1                        | NA                              | 0                  |

|                               |                                      |                    |
|-------------------------------|--------------------------------------|--------------------|
| <b>Coins / Currency notes</b> |                                      |                    |
| <b>Sl. No.</b>                | <b>COINS/CURRENCY/CURIOS DETAILS</b> | <b>Sum Insured</b> |
|                               |                                      |                    |

Policy No. : 16050146230100000181 Document generated by 36776 at 01/02/2024 18:42:29 Hours.

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

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>.



|   |    |   |
|---|----|---|
| 1 | NA | 0 |
|---|----|---|

| Description of other item |                    |             |
|---------------------------|--------------------|-------------|
| Sl. No.                   | OTHER ITEM DETAILS | Sum Insured |
| 1                         | NA                 | 0           |

| Add on Covers   | Sum Insured (₹) |
|-----------------|-----------------|
| Other Extension | NOT OPTED       |
| Theft Extension | NOT OPTED       |
| Terrorism       | NOT OPTED       |

|                    |   |  |
|--------------------|---|--|
| Special Conditions | : | ON STOCK OF Cotton bales ONLY WHILST STORED OR LYING IN GODOWN OF - Annapurna Agri and Warehousing Address - Vill and Post Talwada Bujurg Teh and Dist Barwani Madhya Pradesh 451556 |
| Excess             | : | 1000   |

This Policy shall subject to BURGLARY policy clauses attached herewith.

**Premium and GST Details**

|         | Rate of Tax | Amount in INR |
|---------|-------------|---------------|
| Premium |             | ₹ 1,499       |
| SGST    | 0           | 0             |
| CGST    | 0           | 0             |
| IGST    | 18          | 270           |

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s)

on this 01st day of February,2024.

For and on behalf of  
The New India Assurance Company Limited

Date of Issue: 01/02/2024

Duly Constituted Attorney(s)

Mudrank \_\_\_\_\_Dt. \_\_\_\_\_ consolidated Stamp Fees Paid by Pay Order Number \_\_\_\_\_vide receipt number \_\_\_\_\_dt. \_\_\_\_\_. Stamp Duty 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 : 16050123P0012150

|   |
|---|
| <p><b>IRDA Registration Number: 190</b><br/><b>NIA PAN NUMBER: AAACN4165C</b></p> |
|---|