



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

:	: SHRIYANSH AGRO				
Insureds Details		Issuing Office Details			
:	PO97461055	Office Code	:	JALGAON (160700)	
:	4, AURANGABAD, MAHARASHTRA AURANGABAD(MA) ,MAHARASHTRA,	Address	:	MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001	
:		Phone No	:	02572236189 / 02572232179	
:	sagro9413@gmail.com, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189	
:		S.Tax Regn. No	:	AAACN4165CST178	
:	27AEOFS1065F1ZV / NA	GSTIN	:	27AAACN4165C3ZP	
:		SAC	:	997139 (Other non-life insurance services excl RI)	
	:	Insureds Details : PO97461055 : PLOT NO 101, SECTOR F-1, CIDCO N- 4, AURANGABAD, MAHARASHTRA AURANGABAD(MA) ,MAHARASHTRA, 431003 : : : sagro9413@gmail.com, / : :	Insureds Details Office Code : PO97461055 Office Code : PLOT NO 101, SECTOR F-1, CIDCO N- 4, AURANGABAD, MAHARASHTRA Address AURANGABAD(MA) ,MAHARASHTRA, 431003 Address : Phone No : Sagro9413@gmail.com, / : S.Tax Regn. No : 27AEOFS1065F1ZV / NA	Insureds Details Iss : PO97461055 Office Code : : PLOT NO 101, SECTOR F-1, CIDCO N- 4, AURANGABAD, MAHARASHTRA Address : AURANGABAD(MA) ,MAHARASHTRA, 431003 Address : : Phone No : : sagro9413@gmail.com, / E-mail/Fax : S.Tax Regn. No : : 27AEOFS1065F1ZV / NA GSTIN	

Policy Details								
Policy Number	:	16070046230100000359	Business Source Code	Business Source Code				
Period of Insurance	:	From: 12/02/2024 12:27:54 PM To: 11/03/2024 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	:	12-Feb-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	HDFC BANK LTD

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date	
625	112	738	RUPEES SEVEN HUNDRED THIRTY- EIGHT ONLY	160700812300000848 0 - 12/02/24	
Location Details	: Buldana Urban Co-op credit soc ltd, Godown No.4,Hingoli-431513 -431513				

First Loss Percentage

Details of assets covered under the Policy

: NA

Stocks in Trade				
SI. No.	STOCK DETAILS	Sum Insured		
1	Cotton F.P Bales	500000		

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

Furniture / Fixture / Fittings				
SI. No.	D. FURNITURE/FIXTURE/FITTINGS DETAILS Sum Insured			
1	NA 0			
Office Equipments				
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured		
1	NA	0		

Policy No. : 16070046230100000359Document generated by 33037 at 12/02/2024 16:37:42 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.



Coins / Currency	v notes		
SI. No.	COINS/CURREN	CY/CURIOS DETAILS	Sum Insured
1		NA	0
Description of o	ther item		
SI. No.	OTHER IT	TEM DETAILS	Sum Insured
1		NA	0
Ac	ld on Covers		Sum Insured (₹)
Other Extension	er Extension NOT OPTED		NOT OPTED
Theft Extension	eft Extension NOT OPTED		NOT OPTED
Terrorism		NOT OPTED	
Special Conditio	ns :	Buldana Urban Co-op credit s Godown No.4,Hingoli-431513	soc ltd,
Excess	:	1000	

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹	625
SGST	9	56	
CGST	9	56	
IGST	0	0	

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 12th day of February,2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 12/02/2024

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 : 16070023P0014527

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

Policy No. : 16070046230100000359Document generated by 33037 at 12/02/2024 16:37:42 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.