

Policy Number:
321800212310000108

व्यवसाय स्रोत /Business Source: 910275

जारीकर्ता कार्यालय/Issuing Office

कार्यालय कोड /Office Code: 321800

कार्यालय पता /Office Address: DEWAS
DIVISION 2-TARANI COLONY, A.B ROAD,,
- 455001.

State Code: 23 , Madhya Pradesh
GSTIN: 23AAAACN9967E1ZB
Contact Number: 7272 250074
Mobile Number:

विक्रय चैनल वविरण/Sales Channel Code:
91027500000001

नाम /Name: JAINUINE INSURANCE
BROKERS PVT LTD - INDORE Contact
Number: 9893131223

सह दलाल कोड / Co Broker Code:

कस्टमर केयर टॉल फ्री नंबर/Customer
Care Toll Free Number:
1800 345 0330

ईमेल/

email:customer.support@nic.co.in

Whereas the **Assured** named in the Schedule hereto have represented to **National Insurance Company LTD** (hereinafter called the "company") that they are interested in or duly authorized to make the insurance mentioned and have paid or agreed to pay the premium hereinafter stated.

THE COMPANY HEREBY PROMISES AND AGREES with the assured, their Executors, Administrators and assigns that the company will insure against loss damage liability or expenses subject to Clause , Endorsement Conditions and Warranties contained in the Schedule.

| | | |
|---|---|-----------|
| ग्राहक का नाम /Customer Name: M/S RAHIM TRADERS | ग्राहक आईडी /Customer ID: 9702037754 | पैन /PAN: |
| पता/ Address: 02,01, KHARGOAN ROAD BEDIA DIST KHARGONE M P, City: NIMAR - WEST - DISTRICT OTHERS, District: NIMAR - WEST, State: MADHYA PRADESH, PIN: 451113. Cell: 9893131223 | फोन /Phone: | |
| | ई-मेल /E-Mail: slibindore@gmail.com | |

पॉलिसी: 24/01/2024 के 00:00 से 23/01/2025 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 24/01/2024 to
midnight of 23/01/2025

| | | | |
|---|--------------------|--|-----------------------------------|
| प्रिमियम/ Premium | ₹ 20,000.00 | कवर नोट संख्या और तिथि / Cover Note Number and Date | लागू नहीं/NA |
| CGST | ₹ 1,800.00 | प्रस्ताव संख्या और तिथि/ Proposal Number and Date | 8800240124684833 Dt. 24/01/2024 |
| SGST/UTGST | ₹ 1,800.00 | | |
| IGST | ₹ 0.00 | | |
| कम:जीएसटी टैडीएस / Less:GST_TDS | ₹ 0.00 | | |
| पुनर्प्राप्त योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty | ₹ 0.50 | रसीद संख्या और तिथि/Receipt Number and Date | 321800812310005013 Dt. 25/01/2024 |
| कुल /Total Amount | ₹ 23,601.00 | पछिली पॉलिसी संख्या और समाप्ती तिथि/ Previous Policy Number and Expiry Date | लागू नहीं/NA |

(Rupees Twenty Three Thousand Six Hundred One Only.)

| Open Policy | | | | | | |
|-----------------------|-------------------|--------------------|--------------------|---------------------|-------------|-------------------|
| Limit Per transit | | 60,00,000.00 | | Limit per location | | 1,20,00,000.00 |
| Voyage From Country | Voyage To Country | Voyage From | Voyage To | Via Port | Via Airport | Status of Insured |
| India | India | ANY WHERE IN INDIA | ANY WHERE IN INDIA | NA | NA | Owner |
| Declaration Frequency | | Monthly | | Multi transit cover | | No |
| Mode of Transit | | By Road | | | | |

Policy Number:
321800212310000108

व्यवसाय स्रोत /Business Source: 910275

जारीकर्ता कार्यालय/Issuing Office

कार्यालय कोड /Office Code: 321800

कार्यालय पता /Office Address: DEWAS
DIVISION 2-TARANI COLONY, A.B ROAD,,
- 455001.

State Code: 23 , Madhya Pradesh
GSTIN: 23AAACN9967E1ZB
Contact Number: 7272 250074
Mobile Number:

विक्रय चैनल वविरण/**Sales Channel** Code:
91027500000001

नाम /Name: JAINUINE INSURANCE
BROKERS PVT LTD - INDORE Contact
Number: 9893131223

सह दलाल कोड / Co Broker Code:

कस्टमर केयर टॉल फ्री नंबर/**Customer
Care Toll Free Number:**
1800 345 0330

ईमेल/

email:customer.support@nic.co.in

| Cover Type Name | Sum Insured |
|--------------------------|------------------|
| Inland Transit Clause -A | ₹ 5,00,00,000.00 |
| SRCC | ₹ 5,00,00,000.00 |

| Details of Packaging and Commodity | | |
|--|---|--------------------|
| Commodity | Packaging | Sum Insured |
| ALL KIND OF DRY CHILLI (PACKING IN BARDANA,JUTE BAGS,PP BAGS BOXES,STANDARD) | High Density Polythene Bags | INR 5,00,00,000.00 |
| Storage description | | |
| Description of storage | Period /time (In weeks) | |
| N/A | N/A | |
| Term Of Cover | As per the clauses written hereunder, current on date of sailing or dispatch and /or otherwise stated and attached hereto | |
| Clauses / Special Condition/Warranties | As per Annexure I | |
| Important notice (claim) | As per attached document | |
| EXCESS DETAILS | | |
| Sr.No. | Excess Description | Excess Amount |
| 1 | 0.50% OF THE CONSIGNMENT VALUE OR RS 5000/-WHICHEVE IS HIGHER | 5000 |

| Survey and claim settlement | | | |
|---|--|----------------------------------|-------------------------------|
| Survey Agent Details | | | |
| Jurisdiction of Claim settling agencies/Region of the world | Mail ID | Telephone No | Fax No |
| India | Contact nearest Division/Branch office of National Insurance Company . | | |
| Canada,USA,North America,South America and Polynesia up to the east of International Date line. | eimc@eimc.com | +1 201 963 3355 | +1 201 963 4015 |
| | james.lynch@eimc.com | +1 201 942 1204 | +1 201 963 4015 |
| For far East and Australia & Asia | info@wkwebster.com and/or dlim@wkwebster.com | 00 65 85224379 /020 83007744 | 00 65 62250428 / 020 83091266 |
| All other Region except above | info@wkwebster.com and/or kwright@wkwebster.com | 00 44 77 15003651 / 020 83007744 | 020 83091266 |

टिप्पणियाँ/ **Remarks:** ALL RISK WITH SRCC
COVERAGE FOR LOADING AND UNLOADING
EXCESS CLAUSE 0.50%OF THE CONSIGNMEN VALUE OR RS 5000/-WICHEVER IS HIGHER
BASIS OF VALUATION COST OF INSURANCE AND FREIGHT(CIF)10%

Clauses:

∩ Inland Transit Rail/Road Clause (A) : 2010

∩ Inland SRCC Clause

∩ Important notice Clause (time limits for lodging claim and filing suits shall be followed as per the actual position at law at the material time

Policy Number:**321800212310000108**

व्यवसाय स्रोत /Business Source: 910275

जारीकर्ता कार्यालय/Issuing Office

कार्यालय कोड /Office Code: 321800

कार्यालय पता /Office Address: DEWAS
DIVISION 2-TARANI COLONY, A.B ROAD,,
- 455001.State Code: 23 , Madhya Pradesh
GSTIN: 23AAACN9967E1ZB
Contact Number: 7272 250074
Mobile Number:विक्रय चैनल वविरण/Sales Channel Code:
91027500000001नाम /Name: JAINUINE INSURANCE
BROKERS PVT LTD - INDORE Contact
Number: 9893131223

सह दलाल कोड / Co Broker Code:

कस्टमर केयर टॉल फ्री नंबर/Customer
Care Toll Free Number:
1800 345 0330

ईमेल/

email:customer.support@nic.co.in



in each case)

; Infectious disease clause

Warranties:

1. Warranted that unexplained losses (loss of moisture, evaporation, ordinary leakage, etc.) are excluded from the scope of coverage. Warranted Shortage from sound packages is excluded.
2. It is warranted that if the weight of the cargo exceeds the Registration Laden weight/ Licensed Carrying Capacity of the vehicle, as mentioned in the Registration Certificate of the vehicle, then any loss or damage arising out of such transit is not covered under the above mentioned policy.
5. Warranted that losses due to adulteration, contamination and deterioration of quality is excluded from the scope of coverage.
6. Warranted that losses due to dampness of atmosphere, rot, dry rot, mould, fungus, infestation, or mildew is excluded from the scope of coverage.
7. Warranted that losses due to wear and tear, deterioration, weathering, corrosion, rust, oxidation, discoloring, metal fatigue, or electrolysis are excluded from the scope of coverage.
9. Warranted that all goods must be suitably packed and/or protected as befits the type of goods and the transit to be undertaken.
10. Warranted that notice of loss would be provided to the insurer immediately within 24 hours of delivery and weight receipts and other documents pertaining to the adventure as and when required would be produced for claim processing.
11. Warranted On Deck Cargo and Over Dimensional Cargo excluded from scope of coverage.
15. WARRANTED CARGO CONVEYANCE TO BE FIT AND SUITABLE FOR THE INTENDED CARGO AND THE INTENDED JOURNEY.
16. WARRANTED THAT GOODS ARE TRANSPORTED IN CLOSED WAGONS AND/OPR TRUCKS TO BE COVERED WITH TARPAULIN OR ANY OTHER WATERPROOF MATERIAL TO AVOID INGRESS OF WATER.

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखति कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधकित कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट <https://nationalinsurance.nic.co.in> पर उपलब्ध हैं, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभिव्यक्ति जिसके लिए यह वशिषिट अर्थ पॉलिसी या अनुसूची के किसी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है क्पिरीमयिम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकित्ता नरिस्त हो जाएगी। **/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 25/January/2024. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website <https://nationalinsurance.nic.co.in> shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**

Policy Number:

321800212310000108

व्यवसाय स्रोत /Business Source: 910275

विक्रय चैनल वविरण/**Sales Channel** Code:
91027500000001

नाम /Name: JAINUINE INSURANCE
BROKERS PVT LTD - INDORE Contact
Number: 9893131223

सह दलाल कोड / Co Broker Code:

जारीकर्ता कार्यालय/**Issuing Office**

कार्यालय कोड /Office Code: 321800

कार्यालय पता /Office Address: DEWAS
DIVISION 2-TARANI COLONY, A.B ROAD,,
- 455001.

State Code: 23 , Madhya Pradesh

GSTIN: 23AAAACN9967E1ZB

Contact Number: 7272 250074

Mobile Number:

कस्टमर केयर टॉल फ्री नंबर/**Customer**

Care Toll Free Number:

1800 345 0330

ईमेल/

email:customer.support@nic.co.in

इंश्योरेंसइंडियालिमिटेड

स्टॉप इयुलिमिटेड/

Stamp

Duty:

(₹ 0.50)

कृते नेशनल इन्श्योरेंस कंपनी
For and on behalf of **National Insurance**
Company Limited

अधिकृत हस्ताक्षरकर्ता/ **Authorized**
Signatory

TAX INVOICE

Invoice Serial No: 30878C3PE0000108

Invoice Date: 25/01/2024

Details of Supplier:

National Insurance Company Limited.,
DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001
State : 23 , Madhya Pradesh
GSTIN No : 23AAACN9967E1ZB

Details Of Receiver : M/S RAHIM TRADERS

Address : 02,01, KHARGOAN ROAD BEDIA DIST KHARGONE M P
City : NIMAR - WEST - DISTRICT OTHERS,
District: NIMAR - WEST,
State: MADHYA PRADESH,
PIN: 451113.

Place Of Supply State : Madhya Pradesh
State Code : 23
GSTIN No : 23BRRPS9967D1Z0

| सैक कोड/ SAC Code | सेवा का विवरण/ Description of Service | कुल/Total(₹) | छूट/ Discount | टैक्स योग्य/ मूल्य/Taxable Value(₹) | सीजीएसटी की राशि/ CGST | | एसजीएसटी/यूटीजीएसटी/ SGST/UTGST | | आईजीएसटी/IGST | | केरला बाढ़ उपकर/Kerala Flood Cess |
|----------------------|---|------------------|------------------|---|---------------------------|------------------------|------------------------------------|------------------------|---------------|------------------------|---|
| | | | | | दर/Rate | राशि/ Amount(₹) | दर/Rate | राशि/ Amount(₹) | दर/Rate | राशि/ Amount(₹) | राशि/Amount(₹) |
| 997135 | Marine, aviation, and other transport insurance services | 20,000 | 0% | 20,000 | 9% | 1,800 | 9% | 1,800 | 0% | 0 | 0 |
| TOTAL | | 20,000 | | 20,000 | | 1,800 | | 1,800 | | 0 | 0 |

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :
₹ 23,601

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees
Twenty Three Thousand Six Hundred One
केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&.O.E

कृते नेशनल इन्श्योरेंस कंपनी लिमिटेड/ For
and on behalf of National Insurance Company Limited

अधिकृत हस्ताक्षरकर्ता/ Authorized Signatory

