



## MACHINERY INSURANCE POLICY

Insured's Name	:	VARDHMAN COTFIBERS			
	Ins	ured's Details	Issuing Office Details		
Customer ID	:	PO95131536	Office Code	:	AURANGABAD DO-160400 (160400)
Address	:	370-1/2, GAUL JOSHI ROAD, CHHAIGAON DEVI, KHANDWA, DIST. KHANDWA CHHEGAON MAKHAN ,MADHYA PRADESH, 450771	Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
Phone No	:		Phone No	:	02402333572 / 02402333361
E-mail/Fax	:	vardhmancotfibers@gmail.com, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226
PAN No	:		S.Tax Regn. No	T:	AAACN4165CST178
GSTIN/UIN	:	23AAQFV8661G1ZO / NA	GSTIN	<b> </b> :	27AAACN4165C3ZP
	:		SAC	:	997137 (Other property insurance services)

Policy Details					
Policy Number	:	16040044235100000038	Business Source Code		
Period of Insurance	:	From:18/02/2024 12:00:01 AM To: 17/02/2025 11:59:59 PM	Agent - (DA3388757)		Jàinuine Insurance Brokers Pvt.Ltd
Date of Proposal	:	18-Feb-24	Agent/Bancassurance/CPS C User	:	
Prev. Policy no.	:	16040044225100000031	Phone No	:	02402350377, 9850049400 / NA
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //

Premium	GST	Total	Receipt No. & Date
3,253	586	3,839	16040081230000015737 - 20/02/24

Premises / Work Address (Site of the Property to be Insured)	Risk Address:M/S. VARDHMAN COTFIBERS 370-1/2, GAUL JOSHI ROAD, CHHAIGAON DEVI, KHANDWA,DIST. KHANDWA (MP) 450771,MP939,CHHEGAON MAKHAN,MP,MADHYA PRADESH.INDIA.450771
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## ₹ 650000 Total Sum Insured

	Inventory of the Property Insured							
Sl. No.	Quantity	Description of Machines	Year of Make	Sum Insured (In ₹)	Escalation(%)	Excess(₹)		
1	1	Machine Details: NIM INFRA PVT. LTD.  500 KVADISRBUTION TRANSFORMER WITH OIL, 33/433. , Serial No of Machine: ST/30F/22, Name of the manufacturer: NIM INFRA PVT LTD	2022	650000	NA	6500		

Warranted that the machinery described in above schedule of Machinery does not embrace any foundations masonry and brickwork or Oil in transformer and other electrical equipment damage thereto being covered by the Policy only when specifically described in said schedule.

SI. No.	Add on Covers Opted	Indemnity Limits Opted	Excess
1	THIRD PARTY LIABILITY	NA	Policy Excess
2	EXPRESS FREIGHT (EXCLUDING AIR FREIGHT), HOLIDAY RATES OF WAGES ETC	NA	Policy Excess
3	AIR FREIGHT	NA	5 % of Air Freight
4	ADDITIONAL CUSTOMS DUTY	NA	5 % of Additional duty
5	SURROUNDING PROPERTY	NA	Policy Excess



6	DEBRIS REMO	VAL	NA	Policy Excess		
ENDORSEMENTS ATTACHED TO & FORMING PART OF THE POLICY						
SI. No.	. Endorsement Number Endorsement Title					
Premium and GST Details						

	Rate of Tax	Amount in INR	
Premium		₹	3,253
SGST	0	0	
CGST	0	0	
IGST	18	586	

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 20th day of February,2024.

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: 16040023E0025460

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C