



POLICY SCHEDULE FOR MONEY INSURANCE

UIN NUMBER - IRDAN190P0127100001

Insured's Name		VARDHMAN COTFIBERS	·		
	Insured'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	:	AAACN4165CST178
GSTIN/UIN		23AAQFV8661G1ZO / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details								
Policy Number								
Period of Insurance	:	From: 18/02/2024 12:00:01 AM To: 17/02/2025 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	:	18-Feb-24	Agent/Bancassurance/S pecified Person	:				
Prev. Policy no.	:	16040048220300000110	Phone No	:	02402350377, 9850049400 / NA			
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //			

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
44,000	7,920	51,920	RUPEES FIFTY-ONE THOUSAND NINE HUNDRED TWENTY ONLY	1604008123000001573 7 - 20/02/24

Money in safe (during and after business hours)		:	9900000
Money in	n Till	:	9900000
Sl. No.			Location & Address
1	VARDHMAN COTFIBERS 370-1/2, GAUL JOSHI ROAD, CHHAIGAON DEVI, KHANDWA, DIST. KHANDWA		
2	Ankur Jain,555,Ward No.5,Gandhi Chowk, Pandhana,Dist Khandwa		
3			Vishal Ajay Jain, Jain Temple, Bodwad,Jalgaon
4	Sumit Abhaykumar Jain,617,Near Jain Temple,Bodwad,Jalgaon		
5			Arvind Shantlal Jain, Near Jain Temple, Bodwad, Jalgaon
6	FACT	ORY	, OFFICE, RESIDENCE OF ALL PARTNER / PROPRIETOR/ DIRECTOR

SECTIO	N - 1		
SI. No.	Sub Sections	Single Carrying Limits for - Foreign Currency	Single Carrying Limits for - Any other (Specify)



1.	Section 1 A - Money for the payment of wages, salaries and other earning or for petty cash in direct transit from the bank to the Insureds premises from the time the cash is received at the bank by the insured or the authorized employee/s of the Insured until delivered at the premises or other place of disbursement and whilst there until paid out provided that out of business hours such cash shall be secured in locked safe or locked strong room on the premises. Cheques drawn by the insured to provide for such cash are covered in transit from the premises to the Bank.	9900000	0	0
2.	Section 1 B - Money (other than described in 1A above) in the personal custody of the insured or the authorized employee/s of the insured whilst in direct transit between the premises and the bank or post office and vice versa	9900000	0	0
3.	Section 1 C - Money (other than described in 1A and 1B above) collected by and in the personal custody of the insured or the authorized employee/s of the insured whilst in transit to the premises or hank within a period not exceeding 48 hours from the time of collection and vice versa	9900000	0	0

Limit over the Policy period (Estimated Annual Turnover)	:	50000000
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Optional Covers	Sum Insured (₹)
SRCC Cover	NOT OPTED
Terrorism	NOT OPTED

Risk I	Details	
1.	Maximum distance over which money will be conveyed	500
2.	Details of employees handling Money	BY OWNER OR AUTHORIZED EMPLOYE
3.	How is money carried	IN ANY TYPE OF BAGS, TRUNKS, S
4.	Mode of Transport	ANY VEHICLE PUBLIC O
5.	Details of armed guards or any other protection	No Security Guard
6.	Details of money kept outside business hours	Safe Consists of Wooden / Steel cupboard
7.	Is the safe where money is kept, fixed to the walls or floor	No
8.	By whom are the keys held	BY OWNER OR AUTHORIZED EMPLOYE
9.	Are all the keys removed outside business hours	No

Special Conditions		Section 1 A ₹99,00,000/- (99 Lakhs) Section 1 B ₹ 99,00,000/- (99 Lakhs) Section 1 C ₹ 99,00,000/- (99 Lakhs) Section 2 ₹ 99,00,000/- (99 Lakhs)
Excess	:	1000

This Policy shall subject to MONEY INSURANCE policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR		
Premium		₹	44,000	
SGST	0	0		
CGST	0	0		
IGST	18	7920		

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.

For and on behalf of The New India Assurance Company Limited

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



Date of Issue: 20/02/2024

		Duly Co	onstituted Attorney(s)
Mudrank number	Dt dt	consolidated Stamp Fees Paid by Pay Order Number Stamp Duty under the Policy is ₹1/	vide receipt
	We hereby de	eclare that though our aggregate turnover in any preceding fi	inancial vear from

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: 16040023E0025461

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C