



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	: KKCOTTON				
		Insureds Details	Issuing Office Details		uing Office Details	
Customer ID		POA1035828	Office Code		: AHMEDNAGAR D.O. 151800 (151800)	
Address	:	KHASRA NO.225/1,GRAM BHADLI, KHARGAONE	Address	:	ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR,414001	
		KHARGAONE ,MADHYA PRADESH, 451001				
Phone No	:		Phone No	:	02412321538 / 02412343372	
E-mail/Fax	:	kkcottonkgn@gmail.com, /	E-mail/Fax	:	nia.151800@newindia.co.in /	
PAN No	:	ABHPA2442E	S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN	:	23ABHPA2442E2ZF / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details					
Policy Number : 15180046230100000187 Business Source Code					
Period of Insurance		From: 26/02/2024 03:51:13 PM To: 25/05/2024 11:59:59 PM	Agent/Web		Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),
Date of Proposal	:	26-Feb-24	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA
Client Type	:	Non-Corporate	E-mail/Fax	T:	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
10,000	1,800	11,801	RUPEES ELEVEN THOUSAND EIGHT HUNDRED ONE ONLY	1518008123000001073 9 - 26/02/24
Location Details	: M/S.CHOUTHMAL WAREHOUSE , GODOWN NO 6, Oragpura julwania road,KHARGONE-451001-451001			

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in Trade				
Sl. No.	STOCK DETAILS	Sum Insured		
1	ON STOCK OF FULL PRESS COTTON BALES ONLY	4000000		

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

Furniture / Fixture / Fittings				
SI. No.	o. FURNITURE/FIXTURE/FITTINGS DETAILS Sum Insured			
1	NA	0		

Office Equipments				
SI. No.	lo. OFFICE EQUIPMENT DETAILS Sum Insured			
1	NA	0		

Coins / Currency notes				
SI. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured		

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



1	N/	A	0	
			•	
	otion of other item			
SI. No.			Sum Insured	
1	NA NA	Α	0	
	Add on Covers	Sum Insured (₹)		
Other E	extension		NOT OPTED	
	xtension		NOT OPTED	
Terroris			NOT OPTED	
Special	Conditions : C	ON STOCK OF FULL PRESS COTTO	ON BALES ONLY	
			AL WAREHOUSE , GODOWN NO 6,Oragpura	
		lwania road,KHARGONE ,MADHY,	A PRADESH, 451001	
Excess		1000		
This Pol	licy shall subject to BURGLARY polic	y clauses attached herewith.		
Premium	n and GST Details			
_		Rate of Tax	Amount in INR	
Premium	n	_	₹ 10,000	
SGST		0	0	
CGST		0	0	
IGST		18	1800	
In witne	ess whereof the undersigned being	duly authorised by the Insurers a	nd on behalf of the Insurers has (have) hereunder	
	(their) hand(s)			
on this	26th day of February,2024.			
			For and on behalf of	
			The New India Assurance Company Limited	
D	26/02/2024			
Date of	ssue: 26/02/2024			
			Duly Constituted Attorney(s)	
			Duly Constituted Attorney(s)	
Mudran	nk Dt. consolio	dated Stamp Fees Paid by Pay O	rder Number vide receipt	
MudrankDtconsolidated Stamp Fees Paid by Pay Order Numbervide receipt numberdt Stamp Duty under the Policy is ₹1/				
	We hereby declare that the	ough our aggregate turnover in	any preceding financial year from	
	2017-18 onwards is more the we are not required to pre	nan the aggregate turnover no epare an invoice in terms of th	otified under sub-rule (4) of rule 48, the provisions of the said sub-rule.	

we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Tax Invoice No : 15180023P0015680

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C