



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	SHRI SAISHYAM COTSPIN			
		Insureds Details		lss	uing Office Details
Customer ID	:	POA8071663	Office Code		JALNA BRANCH (160501)
Address	:	SURVEY NO. 19/4A & 19/5, MOUJE JOGBAN, BEHIND SHYAM WEIGH BRIDGE, OFF HIWARKHED ROAD, AKOT-, DIST. AKOLA AKOT ,MAHARASHTRA, 444101	Address	:	K.K.NIWAS LAKKAD KOT NEAR BUS STAND AURANGABAD ROAD JALNA ,431203
Phone No	:		Phone No	:	02482232708 / 02482232709
E-mail/Fax	:	sales@saishyamcotspin.com, /	E-mail/Fax	:	nia.160501@newindia.co.in /
PAN No	:	ABWFS3819E	S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27ABWFS3819E1ZP / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details					
Policy Number : 16050146230100000213 Business Source Code					
Period of Insurance	:	From: 28/02/2024 06:53:22 PM To: 27/08/2024 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	:	28-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	NISHANT MULTISTATE CO- OP CREDIT SOCIETY AKOLA

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
11,253	2,026	13,280	RUPEES THIRTEEN THOUSAND TWO HUNDRED EIGHTY ONLY	1605018123000001109 7 - 28/02/24
Location Details	: Salasar Corporation, Hiwarkhed road,Near ,Setwayee Mata Mandir Tarfe, Akot-, Dist. Akola- 444101- 444101			

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in	Stocks in Trade			
Sl. No.	STOCK DETAILS	Sum Insured		
1	On Stock of F.P Bales & such other goods in godown.	6000000		

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

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

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

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



Coins / C	Coins / Currency notes			
SI. No.	COINS/CURRENCY/CURIOS DETAILS Sum Insured			
1	NA	0		

Descript	Description of other item			
SI. No.	OTHER ITEM DETAILS	Sum Insured		
1	NA	0		

Add on Covers	Sum Insured (₹)
Other Extension	NOT OPTED
Theft Extension	NOT OPTED
Terrorism	NOT OPTED

Special Conditions	:	Salasar Corporation,
		Hiwarkhed road,Near ,Setwayee Mata Mandir Tarfe, Akot-, Dist. Akola- 444101
Excess	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹ 11,253
SGST	9	1013
CGST	9	1013
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 28th day of February, 2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 28/02/2024

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 : 16050123P0013218

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C