पॉलिसी अनुसूची/ Policy Schedule - Marine Ca	rgo Open Policy
Policy Number: 321800212310000126	व्यवसाय स्त्रोत /Business Source: 910275
जारीकर्ता कार्यालय/ Issuing Office कार्यालय कोड /Office Code: 321800 कार्यालय पता /Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,,	विक्र्य चैनल विवेरण/ Sales Channel Code: 91027500000001 नाम /Name: JAINUINE INSURANCE BROKERS PVT LTD - INDORE Contact Number: 9893131223 सह दलाल कोड / Co Broker Code:
- 455001. State Code: 23 , Madhya Pradesh GSTIN: 23AAACN9967E1ZB 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



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	फोन /Phone:			
M P, City: NIMAR - WEST - DISTRICT OTHERS, District: NIMAR - WEST, State: MADHYA PRADESH, PIN: 451113. Cell: 9893131223	ई-मेल /E-Mail: slibindore@gmail.com			

प्रीमयिम/ Premium	₹ 20,000.00	कवर नोट संख्या और तथि7ि Cover Note Number and Date	लागू नहीं/NA	
CGST	₹ 1,800.00			
SGST/UTGST	₹ 1,800.00			
IGST	₹ 0.00	प्रस्ताव संख्या और तथि। Proposal	8800240227855367 Dt. 27/02/2024	
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00	Number and Date		
नर्प्राप्ति योग्य स्टाम्प ड्यूटी Recoverable Stamp Duty	₹ 0.50	रसीद संख्या और तथिि Receipt Number and Date	321800812310005743 Dt. 28/02/2024	
कुल /Total Amount	₹ 23,601.00	पछिली पॉलिसी संख्या और समाप्ती तथि7ि Previous Policy Number and Expiry Date	लागू नहीं/NA	

Open Policy									
Limit Per transit 60,00,000.00 Limit pe					Limit per le	ocation	1,20,00,000.00		
Voyage From Country	Voyage T Country	Ö	Voyage From Voy		Voyage To Via Port		Vi	Via Airport Status of Insured	
India	India		ANY WHERE IN ANY WHERE IN INDIA		/HERE IN	NA	NA Owner		Owner
Declaration Frequency Monthly			Multi transit cover No						
Mode of Transit	Mode of Transit By Road								





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				
	F DRY CHILLI (PACKING IN UTE BAGS,PP BAGS NDARD)	High Density Polythene Bags		INR 5,00,00,000.00				
		Storage	description					
Description	of storage		Period /time (In w	veeks)				
N/A			N/A					
Term Of Cover As per the clauses writ stated and attached he			· ·	nt on date of sailing or dispatch and /or otherwise				
Clauses / Sp	pecial Condition/Warranties	As per Annexure I						
Important n	otice (claim)	As per attached docum	ient					
	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	ce of National Insurance Compan	у.					
Canada, USA, North	eimc@eimc.com,	+1 201 963 3355	+1 201 963 4015					
America, South America and Polynesia up to the east of International Date line.	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					

टप्पिणयों/ 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
- $\tilde{\lambda}$ 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





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.

जिसकी गवाही में दिन/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवत अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुस्ची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट https://nationalinsurance.nic.co.in पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढ़ा जाए तथा कोई भी शब्द या अभिव्यक्त जिसके लिए यह विशिष्ट अर्थ पॉलिसी या अनुसूची के किसी भी हिस्से में संलग्न किया गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखित हो। यह आश्वासन दिया जाता है कि प्रीमियम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमिकता निरस्त हो जाएगी। /IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 28/February/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'

पॉलर्सी अनुसूची/ Policy Schedule - Marine Ca	rgo Open Policy
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जारीकर्ता कार्यालय/ Issuing Office कार्यालय कोड /Office Code: 321800 कार्यालय पता /Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD.,	विक्रय चैनल विवरण(Sales Channel Code: 91027500000001 नाम /Name: JAINUINE INSURANCE BROKERS PVT LTD - INDORE Contact Number: 9893131223 सह दलाल कोड / Co Broker Code:
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इंश्योरेन्सइंडयालमिटिड

कृते नेशनल इन्श्योरेन्स कंपनी स्टांप इयू**बे**मिटिड/ For and on behalf of National Insurance Company Limited

Stamp

Duty: (₹ 0.50)

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

TAX INVOICE

Invoice Serial No: 30878C3PE0000126 Invoice Date: 28/02/2024

Details of Supplier:

National Insurance Company Limited.,

DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001

23, Madhya Pradesh State: GSTIN No: 23AAACN9967E1ZB

Details Of Receiver: M/S RAHIM TRADERS
Address: 02,01, KHARGOAN ROAD BEDIA DIST KHARGONE M P Address :

NIMAR - WEST - DISTRICT OTHERS, City: NIMAR - WEST,

District: State: MADHYA PRADESH,

PIN: 451113.

Place Of Supply State : Madhya Pradesh

State Code: 23

GSTIN No: 23BRRPS9967D1Z0

सैक कोड/ SAC Code	सेवा का विवरण/ Descripti on of Service	ण/ ripti ₹)	l(छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable	सीजीएसटी की राशि एसजीएसटी/यूटीजीएसटी/ CGST SGST/UTGST आईजीएसटी		ਜਟੀ/ IGST	केरला बाढ़ उपकर/Kerala Flood Cess			
				Value(₹)	दर/Rate	राशि Amount(₹)	दर/Rate	राशि Amount(₹)	दर/Rate	राशा∕ि Amount(₹)	राशािAmount(₹)
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) :

कुल इनवॉयस मूल्य (शब्दों में)Total Invoice Value (In words) : रूपए/Rupees

Twenty Three Thousand Six Hundred One

केवल/Only.

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

E.&.O.E

कृते नेशनल इन्श्योरेन्स कंपनी लमिटिड/ For and on behalf of National Insurance Company Limited

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

