

Policy Number: 321800442310000028	व्यवसाय स्त्रोत / Business Source: 910275
	विक्रय चैनल विवरण/
	Sales Channel Details
	कोड/ Code: 91027500000001
जारीकर्ता कार्यालय/Issuing Office	नाम/ Name: JAINUINE INSURANCE
कार् यालय कोड/ Office Code: 321800	BROKERS PVT LTD - INDORE
कार्यालय पता/ Office Address: DEWAS	Contact Number: 9893131223
DIVISION 2-TARANI COLONY, A.B ROAD,, -	सह दलाल कोड / Co Broker Code:
455001. State Code: 23 , Madhya Pradesh	tie gant may so zhonor sodor
GSTIN: 23AAACN9967E1ZB	
Contact Number: 7272 250074	कस्टमर केयर टॉल फ्री नंबर/Customer
Mobile Number:	Care Toll Free Number:
	1800 345 0330
	ईमेल/
	email:customer.support@nic.co.in

ग्राहक का नाम/Customer Name: M/S BRGIL LLP	ग्राहक आईडी/ Customer ID: 9702089213	पैन/ PAN:
पता/ Address: B/2 DIKSON BUILDING RAMHLUN SOUTH	फोन/ Phone:	
RAMHLUN SOUTH AIZAWAL MIZORAM, City: AIZAWL - DISTRICT OTHERS, District: AIZAWL, State: MIZORAM, PIN: 796012. Cell: 9893131223	ई-मेल/ E-Mail: slibindore@gmail.co	om

पॉलिसी: 02/03/2024 के 00:00 से 01/03/2025 की मध्य रात्रि तक प्रभावी /Policy Effective from 00:00 hours, on 02/03/2024 to						
midnight of 01/03/2025	midnight of 01/03/2025					
प्रीमयिम /Premium	₹ 5,623.00	कवर नोट संख्या तथा तथि/ि Cover Note Number and Date	NA			
CGST	₹ 0.00					
SGST/UTGST	₹ 0.00					
IGST	₹ 1,012.00	प्रस्ताव संख्या और तथि /Proposal	8800230302181821 Dt. 05/01/2024			
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00	Number and Date				
पुनर्प्राप्त स्टाम्प शुल्क / Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तथि/ि Receipt Number and Date	321800812310005762 Dt. 29/02/2024			
कुल / Total	₹ 6,640.00	पछिली पॉलिसी संख्या तथा समाप्ती तथि/ि Previous Policy Number and Expiry Date	321800442210000025 and Dt.01/03/2024			
(Rupees Six Thousand Six Hundred Forty Only.)						

Inventory of the Property Insured Location details: B/2, DIKSON BUILDING, RAMHLUN SOUTH, AIZWAL- 796012, MIZORAM , Aizawl - District Others , Aizawl ,

Mizoram , 796012 Anywhere in India.

Sr. No.	Description	Make	Year	Part No.	Specification	Sum Insured	Escalation Percentage
1	Pumps, Transformers, Electric Motors	JAKSON	2023	25476784 (HSN CODE- 85021310)	2022	30,30,000.00	0%

Clauses	As per Annexure I
Add on coverage	As per Annexure II

Standard Excess

Value of equipment's	For claims arising out of AOG perils	For claims arising out of perils other than AOG
Individual value upto Rs.1 lakh.	10 % of S.I. Subject to a minimum of Rs. 5,000/-	2 % of S.I. subject to minimum of Rs. 1,500/-



Policy Number: 321800442310000028 व्यवसाय स्त्रोत / Business Source: 910275 विकरय चैनल विवरण/ Sales Channel Details कोड/ Code: 91027500000001 जारीकर्ता कार्यालय/Issuing Office नाम/ Name: JAINUINE INSURANCE कार्यालय कोड/ Office Code: 321800 BROKERS PVT LTD - INDORE Contact Number: 9893131223 कारयालय पता/ Office Address: DEWAS DIVISION 2-TARANI COLONY, A.B ROAD,, -सह दलाल कोड / Co Broker Code: 455001. State Code: 23, Madhya Pradesh GSTIN: 23AAACN9967E1ZB कस्टमर केयर टॉल फ्री नंबर/Customer Contact Number: 7272 250074 **Care Toll Free Number:** Mobile Number: 1800 345 0330 ईमेल/ er support@nic.co.in

	eman:customer.support@nic.co.in	
Individual value over Rs. 1 lakh and	5 % of S.I. Subject to a minimum of Rs. 10, 000/-	1.5 % of S.I. subject to minimum of Rs.2, 000/-
upto Rs. 5 lakh.		
Individual value over Rs. 5 lakh and	3 % of S.I. subject to a minimum of Rs. 25, 000/-	1.25 % of S.I. subject to minimum of Rs. 7,500/-
upto Rs.10 lakhs.		
Individual value over Rs. 10 lakhs upto	2 % of S.I. subject to a minimum of Rs. 30, 000/-	1.00 % of S.I. subject to minimum of Rs. 12, 500/-
Rs. 25 lakhs		
Individual value over Rs. 25 lakhs upto	1 % of S.I. Subject to a minimum of Rs. 50, 000/-	1 % of S.I. Subject to a minimum of Rs. 50, 000/-)
Rs. 50 lakhs		
Individual value over Rs. 50 lakhs	1 % of S.I. Subject to a minimum of Rs. 50, 000/-	1 % of S.I. Subject to a minimum of Rs. 50, 000

Boom Section- 20% of claim amount subject to minimum of Rs. 25,000/-. For Machinery under Group V – Rs.2,500/- Flat. Excess.

Note: If any other deductible is imposed/mentioned elsewhere in this policy, then that deductible shall supersede the deductible mentioned above.

Terrorism excess (if opted) shall be as per GIC Terrorism pool.

FINANCIE	R DETAILS	
Sr.No.	Name of Financier	Financier Address
1	TATA CAPITAL FINANCIAL SERVICES LTD.	NA

टप्पिणविां/ Remarks: CPM POLICY (ALL INDIA COVERAGE ON FLOATER BASIS) COVERING BASIC COVER + EQ + STFI + TERRORISM + THIRD PARTY LIABILITY

JAKSON 3B0KVA/304KW SILENT DG SET BEARING SR NO.- 25476784 (HSN CODE- 25476784) WITH TOOL KIT AND STANDARD ACCESSORIES

AGREED BANK CLAUSE

All the terms, conditions, exclusions, warranties and excess as per CPM policy, available at company¿s official website

जिसकी गवाही में दिनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को विधिवत अधिकृत किया जा रहा है उसके हाथ निर्धारित किए जाएं। यह अनुसूची, 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 29/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'

इंश्योरेन्सइंडयालिमटिड

कृते नेशनल इन्श्योरेन्स कंपनी स्टांप इय्**द्धी**मिटिड/ For and on behalf of National Insurance Stamp Company Limited Duty: (₹ 0.25)

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory



Policy Number: 321800442310000028	व्यवसाय स्त्रोत / Business Source: 910275
	विक्रय चैनल विवरण/
	Sales Channel Details
	कोड/ Code: 91027500000001
जारीकर्ता कार्यालय/Issuing Office	नाम/ Name: JAINUINE INSURANCE
कार्यालय कोड/ Office Code: 321800	BROKERS PVT LTD - INDORE
कार्यालय पता/ Office Address: DEWAS	Contact Number: 9893131223
DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001.	सह दलाल कोड / Co Broker Code:
State Code: 23 , Madhya Pradesh	
GSTIN: 23AAACN9967E1ZB Contact Number: 7272 250074	कसटमर केयर टॉल फ्री नंबर/Customer
Mobile Number:	Care Toll Free Number:
	1800 345 0330
	ईमेल/
	email:customer.support@nic.co.in

अनुलग्नक I / ANNEXURE I– लागू खंडों की सूची/ List of Applicable Clauses

- Terrorism Clause
- Third Party Liability

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

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory



Policy Number: 321800442310000028	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,, - 455001. State Code: 23, Madhya Pradesh	विक्रय चैनल विविरण/ Sales Channel Details कोड/ Code: 91027500000001 नाम/Name: JAINUINE INSURANCE BROKERS PVT LTD - INDORE Contact Number: 9893131223 सह दलाल कोड / Co Broker Code:
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

ANNEXURE II - Add on Coverage

Location: B/2, DIKSON BUILDING, RAMHLUN SOUTH, AIZWAL-796012, MIZORAM, Aizawl - District Others, Aizawl Mizoram, 796012

Sr. No.	Coverage	Sum Insured / Limit	Applicable Excess	Premium
1	Terrorism	30,30,000.00	0.5% of the total sum insured subject to a minimum of Rs.1 lakh and maximum of Rs.10 Crores	696.90
2	Earthquake	30,30,000.00	50,000.00	1,666.50
3	Third Party Liability	3,03,000.00	50,000.00	757.50
3A	Any One Accident	N/A	N/A	N/A
3B	Any One Year	1.00	N/A	N/A

For and On Behalf Of National Insurance Company Limited

Authorized Signatory



Policy Number: 321800442310000028	व्यवसाय स्त्रोत / Business Source: 910275
	विक्रय चैनल विवरण/
	Sales Channel Details
	कोड/ Code: 91027500000001
जारीकर्ता कार् यालय/Issuing Office	नाम/ Name: JAINUINE INSURANCE
कार् यालय कोड/ Office Code: 321800	BROKERS PVT LTD - INDORE
कार्यालय पता/ Office Address: DEWAS	Contact Number: 9893131223
DIVISION 2-TARANI COLONY, A.B ROAD,, - 455001.	सह दलाल कोड / Co Broker Code:
State Code: 23 , Madhya Pradesh	
GSTIN: 23AAACN9967E1ZB Contact Number: 7272 250074	कस्टमर केयर टॉल फ्री नंबर/Customer
Mobile Number:	Care Toll Free Number:
	1800 345 0330
	ईमेल/
	email:customer.support@nic.co.in

ANNEXURE III - Location of Premises & Financier Details

Location of Premises:

Sr. No.	Address
1	B/2, DIKSON BUILDING, RAMHLUN SOUTH, AIZWAL- 796012, MIZORAM,,Mizoram,Aizawl - District
	Others, Aizawl, 796012.

TAX INVOICE

Invoice Serial No: 30878E3PE0000028 Invoice Date: 29/02/2024

Details of Supplier:

National Insurance Company Limited.,

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

State: 23 , Madhya Pradesh GSTIN No: 23AAACN9967E1ZB

Details Of Receiver: M/S BRGIL LLP

Address: B/2 DIKSON BUILDING RAMHLUN SOUTH RAMHLUN SOUTH AIZAWAL MIZORAM

City: AIZAWL - DISTRICT OTHERS,

District: AIZAWL, State: MIZORAM, PIN: 796012.

Place Of Supply State : Mizoram

State Code: 15

GSTIN No: 15AAYFB4873C1Z7

सैक कोड/ SAC Code	सेवा का वविरण/ Descripti on of Service	कुल/Total(₹)	छूट/ Discou nt	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/ IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि Amount(₹)	दर/Rate	राशि Amount(₹)	दर/Rate	राशा∕ि Amount(₹)	राशा⁄/Amount(₹)
997137	Other property insurance services	5,623	0%	5,623	0%	0	0%	0	18%	1,012	0
TOTAL		5,623		5,623		0		0		1,012	0

कुल इनवॉयस मूल्य (अंकों में)Total Invoice Value (In figures) :

₹ 6.640

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

Six Thousand Six Hundred Fourty

केवल/Only.

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

E.&.O.E

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

अधिकृत हस्तात्क्षरकर्ता/ Authorized Signatory

