



**POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE**

**UIN NUMBER - IRDAN190P0098100001**

<b>Insured's Name</b>	: LAXMI COTSPIN LTD		
<b>Insureds Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: POA4385619	<b>Office Code</b>	: SHIRDI (151806)
<b>Address</b>	: GUT NO.394 & 399, SAMANGAON, AMBAD ROAD, TQ. DIST JALNA ( GINNING & OIL MILL DIVISION)  JALNA , MAHARASHTRA, 431203	<b>Address</b>	: Nagar Panchayat, SAI Prasad Shopping Complex, At Shirdi-Tal rahata Dist A`nagar, Shirdi  ,423109
<b>Phone No</b>	:	<b>Phone No</b>	: 02423255179
<b>E-mail/Fax</b>	: cfo@laxmicotspin.com, /	<b>E-mail/Fax</b>	: nia.151806@newindia.co.in /
<b>PAN No</b>	:	<b>S.Tax Regn. No</b>	: AAACN4165CST178
<b>GSTIN/UIN</b>	: 27AAECM5186A1ZL / NA	<b>GSTIN</b>	: 27AAACN4165C3ZP
		<b>SAC</b>	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>			
<b>Policy Number</b>	: 15180646230100000011	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 13/03/2024 02:53:08 PM To: 12/06/2024 11:59:59 PM	<b>Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User</b>	: Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757) Jainuine Insurance Brokers Pvt.Ltd. - (SI00028623),
<b>Date of Proposal</b>	: 13-Mar-24	<b>Agent/Bancassurance/S pecified Person</b>	:
<b>Prev. Policy no.</b>	:	<b>Phone No</b>	: 02402350377, 9850049400 / NA
<b>Client Type</b>	: Non-Corporate	<b>E-mail/Fax</b>	: kailash@jainuineinsurance.co.in, / /

<b>Financier(s) Details</b>	
<b>Sl. No.</b>	<b>Name of the Financiers</b>
1	HDFC BANK LTD

<b>Premium(₹)</b>	<b>GST(₹)</b>	<b>Total(₹)</b>	<b>Total (₹ in words)</b>	<b>Receipt No. &amp; Date</b>
3,253	586	3,840	RUPEES THREE THOUSAND EIGHT HUNDRED FORTY ONLY	1518068123000000039 3 - 13/03/24
<b>Location Details</b>		: GUT NO.394 & 399, WAREHOUSE GODOWN NO 1,2 & 3AT SAMANGAON, JALNA AMBAD ROAD, TQ & DIST, JALNA-431203		

<b>First Loss Percentage</b>	: NA
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**Details of assets covered under the Policy**

<b>Stocks in Trade</b>		
<b>Sl. No.</b>	<b>STOCK DETAILS</b>	<b>Sum Insured</b>
1	On stock of COTTON FULLY PRESS BALES	13000000

<b>Goods held in Trust / Commision</b>		
<b>Sl. No.</b>	<b>GOODS HELD DETAILS</b>	<b>Sum Insured</b>
1	NA	0

<b>Furniture / Fixture / Fittings</b>		
<b>Sl. No.</b>	<b>FURNITURE/FIXTURE/FITTINGS DETAILS</b>	<b>Sum Insured</b>
1	NA	0

<b>Office Equipments</b>		
<b>Sl. No.</b>	<b>OFFICE EQUIPMENT DETAILS</b>	<b>Sum Insured</b>
1	NA	0

<b>Coins / Currency notes</b>		
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Policy No. : 15180646230100000011 Document generated by 39267 at 13/03/2024 14:57:11 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



Sl. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured
1	NA	0

Description of other item		
Sl. 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

<b>Special Conditions</b>	:	Location: Laxmi cotspin Ltd, GUT NO.394 & 399, WAREHOUSE GODOWN NO 1,2 & 3 AT SAMANGAON KAJLA PHATA ,JALNA AMBAD ROAD OPP. MEENATAI THAKARE VRIDHASHRAM ,JALNA -431203
<b>Excess</b>	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

**Premium and GST Details**

	Rate of Tax	Amount in INR
Premium		₹ 3,253
SGST	9	293
CGST	9	293
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 13th day of March,2024.

For and on behalf of  
The New India Assurance Company Limited

Date of Issue: 13/03/2024

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 : 15180623P0000534

<p><b>IRDA Registration Number: 190</b> <b>NIA PAN NUMBER: AAACN4165C</b></p>
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