

The Oriental Insurance Company Limited

NAGRIKSURAKSHA INDIVIDUAL POLICY SCHEDULE

Policy No. 182000/48/2025/867 Prev. Policy No. 182100/48/2024/551

Cover Note No : - Cover Note Dt :

Insured's Code : 130394729 Issue Office Code : 182000

Insured's Name : DINESH CHAGANRAO PINJARE Issue Office Name : BO OSMANPURA CIRCLE (GSTIN: 0) AURANGABAD (GSTIN:

AURANGABAD (GSTIN: 27AAACT0627R4ZW)

Address : Plot no-43, galll no-2,datt Address : OFFICE NO. 3 & 4, 1st FLOOR, SAI

nagar,shamshan maroti road, kailash SQUARE, OSMANPURA CIRCLE, nagar,Aurangabad

AURANGABAD 431001

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AURANGABAD MAHARASHTRA AURANGABAD MAHARASHTRA

431001 431601

Tel /Fax /Email : / / 9422205626 / sham@jainuineinsurance.co.in Tel /Fax /Email

Agent/Broker Details

Dev.Off.Code :

Agent/Broker : LC0000000281 M/S JAINUINE INSURANCE BROKERS PVT LTD

Address 4th Floor Office No. E-5, Aurangabad Business Centre, Kesarsingpura

: Adalat,,AURANGABAD MAHARASHTRA -431001,AURANGABAD,MAHARASHTRA,431001

Tel /Fax /Email : 02572225747/8888841491//

Period of Insurance: FROM 12:00 ON 10/05/2024 TO MIDNIGHT OF 09/05/2025

Collection No & Dt : CHQ 8714000899 - 10/05/2024 GST INVOICE NO :272380823 UIN :0

Gross Premium : 338 GST 60 Stamp Duty : 0 Total : 398

Coinsurance Details: NIL

Particulars of the Persons Covered

	Name of Person Covered	Age	Relationship	Occupation	Disabled/Injur ed/Sick	Sum Insured		Cumulative
						Personal Accident Section 80%	Hospitalistion Section 20%	bonus
1	DINESH CHAGANRAO PINJARE	48	3 Self	SERVICE		4,00,000	1,00,000	50,000

Assignee Details

Sr. No. Name Assignee Name Share % Relationship

1 DINESH CHAGANRAO Ms Pinjare 100 Spouse Unemployed PINJARE

Place: AURANGABAD

Date: 10/05/2024





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The Oriental Insurance Company Limited

Attached to and forming part of policy number 182000/48/2025/867

0240 - 2332019, 2323364 / / 182000@orientalinsurance.co.in

Total Sum Insured in words: Indian Rupees Five Lakhs Only

Total Premium in words : Indian Rupees Three Hundred Ninety-Eight Only

The insurance under this policy is subject to conditions, clauses, warranties, exclusions which are available on Company's website: www.orientalinsurance.org.in or on demand from policy issuing office.

The policy shall pay for hospitalisation expenses for medical/surgical treatment at any Nursing Home/Hospital in INDIA as an in-patient defined in the policy.

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac,the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operaing offices as well as Company's website.

Warranted that in case the person covered under the policy has lodged any claim under the previous policy and the sum insured is enhanced under the current policy, for a further claim for the same disease during the current policy, the earlier Limit of Sum Insured shall be applicable and not the enhanced sum insured.

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

In witness whereof the undersigned being authorised by and on behalf of the Company has/have herein to set his/their hands at AURANGABAD on 10TH DAY OF MAY 2024.

Entered By : MR RAJENDRA GAIKWAD

Examined By : MR. AVINASH DESHPANDE

Digitally Signed

By

Policy Printed On: 10-MAY-24 15:58:17 MAC: Authorised Signatory

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post. In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupees

IP:

IRDA Regn. No. 556 - Now you can buy and renew selected policies online at **www.orientalinsurance.org.in** and through other digital platforms including Whatsapp (Send "Hi" to 9560711200).

Place: AURANGABAD

Policy Printed By: 707333

Date: 10/05/2024





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