



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	BHAVESH OIL INDUSTRIES				
Insureds Details		Insureds Details	Issuing Office Details			
Customer ID		POB4668587	Office Code	:	AHMEDNAGAR D.O. 151800 (151800)	
Address	:	1, NEAR MARKET YARD, VAGHEL ROAD, HARIJ, PATAN, GUJARAT, 384240	Address	:	ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR,414001	
Phone No		HARIJ ,GUJARAT, 384240	Phone No		00440204520 / 00440242270	
Phone No			Prione No		02412321538 / 02412343372	
E-mail/Fax		naser@jainuineinsurance.co.in, /	E-mail/Fax	:	nia.151800@newindia.co.in /	
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178	
GSTIN/UIN		24AADFB3010A1ZM / NA	GSTIN	:	27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

Policy Details					
Policy Number : 15180046240100000034		15180046240100000034	Business Source Code		
Period of Insurance	:	From: 25/05/2024 12:00:01 AM To: 24/08/2024 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	:	25-May-24	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA
Client Type	T:	Non-Corporate	E-mail/Fax	T:	kailash@jainuineinsurance.co.in, //

	Financier(s) Details
SI. No.	Name of the Financiers
1	AXIS BANK LTD

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
1,198	216	1,415	RUPEES ONE THOUSAND FOUR HUNDRED FIFTEEN ONLY	1518008124000000168 9 - 29/05/24
Location Details	: Godown No 2, Deepak cattle feed godown - Prabhuram Chaganlal and company Compound ,Harij - 384240		ganlal and company	

: NA First Loss Percentage

Details of assets covered under the Policy

Stocks in	Stocks in Trade				
SI. No.	STOCK DETAILS	Sum Insured			
1	GODOWN NO 2 STOCK OF COTTON	6000000			

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

Furniture	Furniture / Fixture / Fittings				
SI. No.	FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured			
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	:	AS PER POLICY CLAUSE
Excess	:	500

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹	1,198
SGST	0	0	
CGST	0	0	
IGST	18	216	

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 29th day of May,2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 29/05/2024

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: 15180024P0002666

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C