



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Liability Only Policy

UIN Number - IRDAN190RP0004V01200203

| Policy Number :16060031240200000416 | | |
|--|--|---|
| POLICY ISSUING OFFICE: AMARAVATHI DO (160600), DHARMADAYA COTTON FUND ROAD, , WALCUT COMPOUND, , AMRAVATI , MAHARASHTRA , 444601. PHONE NUMBER:07212577538 / 07212576803 FAX NUMBER:07212575756 / NA Email:nia.160600@newindia.co.in | BUSINESS CHANNEL/CPSC User: NAME: Jainuine Insurance Brokers Pvt. Ltd (DA3388757), PHONE NUMBER:02402350377 / / 9850049400 LAND/FAX NUMBER:/ EMAIL:kailash@jainuineinsurance.co.in / | CLAIM CONTACT: Amravati Non Suit Claim Hub (169002) ADDRESS: Hotel Seven Hills Building, Bajaj Nagar, Wallcot Gym Compound, Amravati : 444601, , , MAHARASHTRA, 444601. PHONE NUMBER: 123456 / MOBILE NUMBER: Email: ch169002@newindia.co.in |

INSURED DETAILS

| INSORED DE IVIES | | | | | | | |
|-------------------|---|----------------|-------------------------|--|--|--|--|
| Insured's Name | MANJEET COTEX | Customer ID | POA4512097 (PAN No :NA) | | | | |
| Insured's Address | WARLA ROAD,SENDHWA,,,, SENDHWA (KHARGON) ,MADHYA PRADESH, 451666 | Contact Number | / / XXXXXX3796 | | | | |
| | | Email | mhtiwari@gmail.com | | | | |
| | | GSTIN | NA | | | | |

POLICY DETAILS

| FOLICI DETAILS | | | | |
|---|--|---------------------------------|--|--|
| Period of cover | 03/05/2024 02:15:42 PM to 02/05/2025 11:59:59 PM | Receipt Number | 16060081240000000699 - 03/05/24 | |
| Previous Insurer | THE NEW INDIA ASSURANCE COMPANY LTD. | Previous Policy Number | 16060031230200000144 | |
| VEHICLE DETAILS | | | | |
| Geographical Area / Zone: | India/C | Year of manufacture: | 2010 | |
| Type of Commercial Vehicles: | A - Goods Carrying | Sub Type: | Other than 3 wheeler - Public Carrier | |
| Name of the Financier: | | Chassis no./Engine no.: | 2142440/050579N | |
| Type of fuel: | Diesel | Cubic capacity (cc): | 0 | |
| Type of body: | Open | Gross Vehicle Weight (GVW): | 2152 | |
| Make/Model: | NEW HOLLAN/HOLLAND 5500 | Registration no. | MP-46-A-2063 | |
| Seating capacity including Driver: | 1 | Variant: | HOLLAND 5500 | |
| Automobile Association membership: | | Colour: | Blue | |
| Cover Note No/Cover Note Issue Date: | / | Name of registration authority: | Dindori - MP 46 | |
| FASTag ID: | | | | |

INSURED DECLARED VALUE (Rs)

| Vehicle | Trailer | Non-Elec Acc | Electrical Acc | Bi-fuel kit | Total Value |
|---------|---------|--------------|----------------|-------------|-------------|
| 0 | 0 | N/A | N/A | N/A | 0 |

SCHEDULE OF PREMIUM

| Own Damage | | Liability | | |
|-----------------------|---|---|-------------|--|
| Basic OD Premium | | Basic TP Premium (+)LL to paid driver conductor cleaner employed for oprn | 16049 50 | |
| Calculated OD Premium | 0 | Calculated TP Premium | 16099 | |
| Total OD Premium (Rs) | 0 | Total TP Premium (Rs) | 16099 | |
| Net Premium (Rs) | | | 16,099 | |

Policy No. : 16060031240200000416Document generated by 39404 at 2024/05/03 14:39:00. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. Give your valuable feedback on https://www.newindia.co.in/portal/policy/FeedbackGen. 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 redre approach Insurance Ombudsman. For details of our office addresses and addresses of office of insurance Ombudsman, please visit our website http://newindia.co.in. ssal mechanism; you may also



| | | | | | | | | 4.005 |
|---|---------------------|---|------------------------------------|--|---|--------------------|--|------------------------------|
| GST (Rs) | | | | | | | | 1,935 |
| Total Payable (Rs) | <u>م</u>). | | | | V | | | 18,034 |
| Total Payable in Rs(in word | S): | RUPEES EIGHTEEN T | HUUSAND THI | 1 | | | | |
| GSTIN(Issuing Office) | | | | 27AAACN416 | 5C3ZP | | | |
| SAC | | | | | or vehicle insurance se | | | |
| Limitation as to use: The poli under sub-section (3) of Sec | icy cove tion 66 | ers use only under a p of the Motor Vehicle | ermit within th s Act, 1988.The | ne meaning of e policy does n | the Motor Vehicles Ac ot cover use for: a)Or | t, 1988 ganized | B or such a carria d racing b) Spee | age falling d testing |
| Limits of Liability:Limit of the Act, 1988. Limit of the amou event: Up to Rs. 7,50,000 | e amou int of th | nt the Company's Lial ne Company's Liability | bility Under Se Under Section | ction II 1(i) in r n II 1(ii) in resp | espect of any one acc ect of any one claim o | ident: or serie | as per the Moto s of claims arisir | or Vehicles ng out of one |
| For individual covers (OD) in | RS:0 | | | Compulsory e | excess in Rs:NA | | | |
| Imposed excess in Rs:0 | | | | Voluntary exc | ess in Rs:0 | | | |
| Persons or classes of person license at the time of the act effective Learner's License n Rules, 1989. | cident a | and is not disqualified | from holding | or obtaining su | ich a license. Provided | l also tl | hat the person h | nolding an |
| PA cover for Owner Driver | - | | | | | | | |
| Name of Nominee | Age of | Nominee | Relationship v Insured | with the Name of the Appoin Nominee is a minor) | | ee (if | e (if Relationship to the Nominee | |
| none | 0 | | none | none | | none | | |
| PA cover for named persons | 5 | | | • | | | | |
| Name | | CSI Opted(Rs.) | | Nominee | | Relationship | | |
| NA | | NA | | NA | | NA | NA | |
| Premium and GST Details | | | | | | | | |
| | | Rate of Tax | | Amount in INR | | | | |
| Premium | | | | | Rs50 | | | |
| SGST | | 0 | | 0 | | | | |
| CGST | | 0 | | 0 | | | | |
| IGST | 18 | | 9 | | | | | |
| Premium | | | | | Rs16049 | | | |
| SGST | | 0 | | | 0 | | | |
| CGST | 0 | | | 0 | | | | |

In witness where of this policy has been signed at AMARAVATHI DO on this 03/05/2024 WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, conditions and exceptions applicable to Package/Liability policy attached/available on the web site http://newindia.co.in; IMT Endorsement Number(s) printed herewith attached 21,40.

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Important notice:

IGST

The insured is not indemnified, if, the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicles Act, 1988 is recoverable from the insured: see clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 11akh or a claim for refund of premium exceeding Rs 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company website.

I/We hereby certify that the policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of Chapter X and XI of M.V. Act, 1988.

For and on behalf of The New India Assurance Company Limited

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THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



Date of Issue: 03/05/2024

Duly Constituted Attorney(s)

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 : 16060024E0001175

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

Policy No. : 1606003124020000416Document generated by 39404 at 2024/05/03 14:39:00. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. Give your valuable feedback on https://www.newindia.co.in/portal/policyFeedbackGen. 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 red approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in. sal mechanism; you may als