



[B]

POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Package Policy

UIN Number - IRDAN190RP0044V01100001

Policy Number :16060031240100001413		
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		

Insured's Name	M/S. MANJEET COTTON PVT.LTD.	Customer ID	PO74755244 (PAN No :AAECM5891Q) / /				
Insured's Address	GAT NO. 175, BAGPIMPALGAON, AURANGABAD BEED ROAD, GEORAI, DIST.BEED, GEVARAI , MAHARASHTRA, 431127	Contact Number					
		Email	kailash@jainuineinsurance .co.in				
		GSTIN	27AAECM5891Q1ZK				

POLICY DETAILS

Period of cover	12/07/2024 11:22:41 AM to 11/07/2025 11:59:59 PM	Receipt Number	16060081240000002280 - 12/07/24	
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	16060031230100000978	
VEHICLE DETAILS				
Geographical Area / Zone:	India/C	Year of manufacture:	2020	
Type of Commercial Vehicles:	A - Goods Carrying	Sub Type:	Other than 3 wheeler - Public Carrier	
Name of the Financier:		Chassis no./Engine no.:	MA1ZN2TNKL1C30288/TNL 1C44798	
Type of fuel:	Diesel	Cubic capacity (cc):	0	
Type of body:	Open	Gross Vehicle Weight (GVW):	3225	
Make/Model:	MAHINDRA A/BIG BOLERO PICKUP	Registration no.	MH-23-AU-2928	
Seating capacity including Driver:	2	Variant:	BIG BOLERO PIK UP 1.25T - BS4 - PS	
Automobile Association membership:		Colour:	WHITE	
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Beed	
FASTag ID:				

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
478000	0	0	0	0	478000

SCHEDULE OF PREMIUM

Own Damage		Liability		
Basic OD Premium825(-)Calculated NCB Discount(45%)371.26		Basic TP Premium (+)LL to paid driver conductor cleaner employed for	16049	

Policy No. : 16060031240100001413Document generated by 39404 at 2024/07/12 12:03:04. 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/portat/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 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. sal mechanism; you may also



			oprn				100		
Calculated OD Premium	454	1 1	ted TP Premium			16149			
Total OD Premium (Rs)	454	Total TP Premium (Rs)				16149			
Net Premium (Rs)		101					16,603		
GST (Rs)									
Total Payable (Rs)									
Total Payable (Rs)18,629Total Payable in Rs(in words):RUPEES EIGHTEEN THOUSAND SIX HUNDRED TWENTY-NINE ONLY									
GSTIN(Issuing Office)									
SAC			997134 (Moto	or vehicle insurance se	ervices)				
Limitation as to use:The Pol under Sub-section 3 of Secti Reliability Trials d) Speed Te	icy covers use only under a p ion 66 of the Motor Vehicles ssting	ermit within tl Act, 1988.The	he meaning of Policy does no	the Motor Vehicles Ad ot cover use FOR a)Or	ct, 1988 ganised	or such a carr I racing b) Pace	iage falling Making c)		
Limits of Liability:Limit of th Act, 1988. Limit of the amou event: Up to Rs. 7,50,000	e amount the Company's Lia unt of the Company's Liability	bility Under Se 1 Under Sectio	ection II 1(i) in r n II 1(ii) in resp	espect of any one acc ect of any one claim c	ident: or series	as per the Mot s of claims arisi	or Vehicles		
For individual covers (OD) in	n RS:478000		Compulsory e	excess in Rs:500					
Imposed excess in Rs:0			Voluntary exc	ess in Rs:0					
license at the time of the ac	ns entitled to drive:Any perso cident and is not disqualified nay also drive the vehicle and	from holding	or obtaining su	ich a license. Provideo	t also th	nat the person	holding an		
PA cover for Owner Driver									
Name of Nominee	Age of Nominee	Relationship Insured	with the Name of the Appointe Nominee is a minor)		tee (if	if Relationship to the Nominee			
none	0	none		none		none			
PA cover for named persons	S								
Name	CSI Opted(Rs.)		Nominee		Relationship				
NA	NA		NA						
Premium and GST Details									
	Rate of 1	ах		Amount in IN	NR				
Premium				Rs554					
SGST	9		50						
CGST	9		50						
IGST	0		0						
Premium		Rs16049							
SGST 6			963						
CGST 6			963						
IGST 0		0							
WARRANTED THAT IN CASE This policy is subject to the	icy has been signed at AMAR OF DISHONOUR OF THE PRE Terms, conditions and excep Endorsement Number(s) prin	MIUM CHEQU tions applicabl	E, THIS DOCUN le to Package/L	IENT STANDS AUTON iability policy attache					

Important notice:

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

Policy No. : 16060031240100001413Document generated by 39404 at 2024/07/12 12:03:04. 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. assal 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 redr 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: vou mav also



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.

Date of Issue: 12/07/2024

For and on behalf of The New India Assurance Company Limited

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 : 16060024E0004017

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

Policy No. : 16060031240100001413Document generated by 39404 at 2024/07/12 12:03:04. 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. , 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 For redressal of your griev fied with our own griev sm: vou mav a dia.co.in. n. For d is of ou e http: