



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle PackagePolicy

UIN Number - IRDAN190RP0044V01100001

Policy Number :16060031230100001051		
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:Mr. PRADIP VIJAYKUMAR AGREKAR - (DI00001558) Mr. Mukesh Mahesh Tiwari - (NIAAG00089661), PHONE NUMBER: / / 9423193196 LAND/FAX NUMBER:/ EMAIL:mhtiwari@gmail.com /	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

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Insured's Name	M/S. MANJEET COTTON PVT.LTD.	Customer ID	PO74755832 (PAN No :AAECM5891Q)
Insured's Address	GAT NO. 417, PUSAD ROAD, TQ. MAHAGAON,GUNJ, DIST. YAVATMAL,, MAHAGAON (YEOTMAL) ,MAHARASHTRA, 445205	Contact Number	/ / XXXXX3796
		Email	mhtiwari@gmail.com
		GSTIN	27AAECM5891Q1ZK

POLICY DETAILS

Period of cover	14/07/2023 12:00:01 AM to 13/07/2024 11:59:59 PM	Receipt Number	16060081230000002396 - 12/07/23	
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	16060031220100000886	
VEHICLE DETAILS				
Geographical Area / Zone: India/C		Year of manufacture:	2021	
Type of Commercial Vehicles:	D - Misc-Special Type	Sub Type:		
Name of the Financier:		Chassis no./Engine no.:	RAJ5DA5MK02893244/H00 298611	
Type of fuel:	Diesel	Cubic capacity (cc):	0	
Type of body:	Open	Gross Vehicle Weight (GVW):	0	
Make/Model:	JCB INDIA /2DX	Registration no.	MH-29-BP-8716	
Seating capacity including Driver:	1	Variant:	JCB 530 70 THLEHANDLER 7M/76HP/AG/IT/FRK/HK/G RNBKT/QF	
Automobile Association membership:		Colour:	OTHER	
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Yavatmal	

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
1888678	0	0	0	0	1888678

SCHEDULE OF PREMIUM

Own Damage		Liability		
(-)Calculated NCB Discount(25%) 2247.53		Basic TP Premium (+)LL to paid driver conductor cleaner employed for oprn	7267 50	
Calculated OD Premium	6743	Calculated TP Premium	7317	
Total OD Premium (Rs)	6743	Total TP Premium (Rs)	7317	
Net Premium (Rs)			14,060	

Policy No. : 16060031230100001051Document generated by 30396 at 2023/07/12 17:33:02. 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 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



GST (Rs)								2,530
Total Payable (Rs)								16,590
Total Payable in Rs(in word	ds):	RUPEES SIXTEEN TH	OUSAND FIVE I	HUNDRED NIN	ETY ONLY			
GSTIN(Issuing Office)				27AAACN416	5C3ZP			
				997134 (Moto	or vehicle insurar	nce services)	
Limitation as to use:The Pol under Sub-section 3 of Sect Reliability Trials d) Speed Te	ion 66 of	s use only under a p the Motor Vehicles	ermit within th Act, 1988.The	ne meaning of Policy does no	the Motor Vehicl ot cover use FOR	es Act, 198 a)Organised	3 or such a carr d racing b) Pace	iage falling Making c)
Limits of Liability:Limit of th Act, 1988. Limit of the amo event: Up to Rs. 7,50,000	ne amour unt of the	it the Company's Lia e Company's Liability	bility Under Se y Under Section	ction II 1(i) in r n II 1(ii) in resp	espect of any on ect of any one cla	e accident: aim or serie	as per the Mo s of claims aris	tor Vehicles ing out of or
For individual covers (OD) in RS:1888678				Compulsory e	excess in Rs:9443			
Imposed excess in Rs:0				Voluntary exc	ess in Rs:0			
Persons or classes of persor license at the time of the ac effective Learner's License r Rules, 1989.	cident a	nd is not disqualified	l from holdina	or obtainína su	ich a license. Pro	vided also t	hat the person	holding an
PA cover for Owner Driver	-							
Name of Nominee	Age of I	Nominee	Relationship v Insured	with the Name of the Appointe Nominee is a minor)		pointee (if inor)	ee (if Relationship to the Nominee	
none	0		none		none		none	
PA cover for named person	s							
Name	(CSI Opted(Rs.)		Nominee		Relati	Relationship	
NA		NA		NA		NA		
Premium and GST Details								
		Rate of 1	Гах	Amount in INR				
Premium					Rs	14,060		
SGST		9			1265			
CGST		9			1265			
IGST		0			0			
		een signed at AMAR						

ARRANTED 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.

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 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

Date of Issue: 12/07/2023

Duly Constituted Attorney(s)

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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 : 16060023E0003455

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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