



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

:	: SHRIYANSH AGRO						
Insureds Details		Issuing Office Details					
:	PO97461055	Office Code	Office Code : JALGAON (160700)				
:	4, AURANGABAD, MAHARASHTRA	Address		MANDORE MARKET, BEHIND DADHIWALA BUNGLOW, JILHA PETH,425001			
	AURANGABAD(MA) ,MAHARASHTRA, 431003						
:		Phone No	:	02572236189 / 02572232179			
:	sagro9413@gmail.com, /	E-mail/Fax	:	nia.160700@newindia.co.in / 2572236189			
:		S.Tax Regn. No	:	AAACN4165CST178			
:	27AEOFS1065F1ZV / NA	GSTIN	:	27AAACN4165C3ZP			
:		SAC	:	997139 (Other non-life insurance services excl RI)			
	:	Insureds Details : PO97461055 : PLOT NO 101, SECTOR F-1, CIDCO N- 4, AURANGABAD, MAHARASHTRA AURANGABAD(MA) ,MAHARASHTRA, 431003 : : : sagro9413@gmail.com, / :	Insureds Details Office Code : PO97461055 Office Code : PLOT NO 101, SECTOR F-1, CIDCO N- 4, AURANGABAD, MAHARASHTRA Address AURANGABAD(MA) ,MAHARASHTRA, 431003 Address : Phone No : Sagro9413@gmail.com, / : S.Tax Regn. No : 27AEOFS1065F1ZV / NA	Insureds Details Iss : PO97461055 Office Code : : PLOT NO 101, SECTOR F-1, CIDCO N- 4, AURANGABAD, MAHARASHTRA Address : AURANGABAD(MA) ,MAHARASHTRA, 431003 Address : : Phone No : : Sagro9413@gmail.com, / E-mail/Fax : 27AEOFS1065F1ZV / NA GSTIN			

Policy Details							
Policy Number	/ Number : 16070046240100000093 Business Source Code						
Period of Insurance	:	From: 05/06/2024 05:51:21 PM To: 04/07/2024 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User:Jainuine Insurance Brokers Pvt. Ltd 				
Date of Proposal	:	05-Jun-24	Agent/Bancassurance/S pecified Person	:			
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA		
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, / /		

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

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date	
499	90	590	RUPEES FIVE HUNDRED NINETY ONLY	1607008124000000141 2 - 06/06/24	
Location Details		Buldana Urban Wareho Kola Road ,Akot Dist A			

First Loss Percentage

Details of assets covered under the Policy

: NA

Stocks in Trade				
SI. No.	STOCK DETAILS	Sum Insured		
1	Cotton F.P Bales	1500000		

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

FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured					
NA	0					
Office Equipments						
OFFICE EQUIPMENT DETAILS	Sum Insured					
NA	0					
	FURNITURE/FIXTURE/FITTINGS DETAILS NA oments OFFICE EQUIPMENT DETAILS					

Coins / Currency notes

Policy No. : 1607004624010000093Document generated by 33037 at 06/06/2024 18:06:25 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

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 redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website

http://newindia.co.in.



SI. No.	COINS/CURRENCY	CURIOS DETAILS	Sum Insured
1	N	4	0
Descript	ion of other item		
SI. No.	OTHER ITEI	M DETAILS	Sum Insured
1	N	4	0
	Add on Covers		Currently surrend (#)
	Add on Covers		Sum Insured (₹)
Other Extension		NOT OPTED	
Theft Extension			NOT OPTED
Terrorism		NOT OPTED	
Special C	Conditions : E	Buldana Urban Warehouse, Kola Road Akot Dist Akola-4441	01

Special Conditions	:	Buldana Urban Warehouse, Akola Road ,Akot Dist Akola-444101
Excess	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹	499
SGST	9	45	
CGST	9	45	
IGST	0	0	

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 06th day of June,2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 06/06/2024

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 : 16070024P0002816

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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