



## POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

#### UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	LAXMI COTSPIN LTD		·	
		Insureds Details	Issuing Office Details		
Customer ID	:	POA4385619	Office Code	:	JALNA BRANCH (160501)
Address		GUT NO.394 & 399,SAMANGAON,AMBAD ROAD,TQ.DIST JALNA (GINNING & OIL MILL DIVISION)  JALNA ,MAHARASHTRA, 431203	Address	:	K.K.NIWAS LAKKAD KOT NEAR BUS STAND AURANGABAD ROAD JALNA ,431203
Phone No	:		Phone No	:	02482232708 / 02482232709
E-mail/Fax	:	cfo@laxmicotspin.com, /	E-mail/Fax	:	nia.160501@newindia.co.in /
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	27AAECM5186A1ZL / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC		997139 (Other non-life insurance services excl RI)

Policy Details					
Policy Number : 16050146240100000069 Business Source Code					
Period of Insurance	:	From: 13/06/2024 12:00:01 AM To: 12/08/2024 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	:	13-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
14,438	2,600	17,039	RUPEES SEVENTEEN THOUSAND THIRTY-NINE ONLY	1605018124000000215 1 - 11/06/24
Location Details		Gut No.394 & 399,War ad,Tg.Dist Jalna 431	rehouse godown no.1,2&3, Samanga 203-431203	on,Jalna Ambad

#### : NA First Loss Percentage

Details of assets covered under the Policy

Stocks in	n Trade	
SI. No.	STOCK DETAILS	Sum Insured
1	On stock of COTTON FULLY PRESS BALES	77000000

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

Furniture	Furniture / Fixture / Fittings		
SI. No.	No. FURNITURE/FIXTURE/FITTINGS DETAILS Sum Insured		
1	NA	0	

Office Ed	quipments	
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	NA	0

### Coins / Currency notes

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



Sl. 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		Laxmi cotspin Ltd, Gut No.394 & 399,Warehouse godown no.1,2&3, Samangaon,Jalna Ambad road,Tq.Dist Jalna 431203
Excess	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

#### Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹ 14,43	38
SGST	9	1300	
CGST	9	1300	
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 11th day of June, 2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 11/06/2024

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: 16050124P0002499

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C