



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

| Insured's Name | : | BHAWANI AGRO INDUSTRIES . | | | | |
|----------------|---|--------------------------------------------|----------------|-----|--------------------------------------------------------------|--|
| | | Insureds Details | | lss | uing Office Details | |
| Customer ID | : | POB2970388 | Office Code : | | JALNA BRANCH (160501) | |
| Address | : | 21, NAVALPURA BARWANI, BARWANI, BARWANI | Address | : | K.K.NIWAS LAKKAD KOT NEAR BUS STAND AURANGABAD ROAD JALNA | |
| | | BARWANI ,MADHYA PRADESH, 451551 | | | ,431203 | |
| Phone No | : | | Phone No | : | 02482232708 / 02482232709 | |
| E-mail/Fax | : | jainprafull1967@gmail.com, / | E-mail/Fax | : | nia.160501@newindia.co.in / | |
| PAN No | : | | S.Tax Regn. No | - : | AAACN4165CST178 | |
| GSTIN/UIN | : | 23BZNPS2056P1ZP / NA | GSTIN | : | 27AAACN4165C3ZP | |
| | : | | SAC | : | 997139 (Other non-life insurance services excl RI) | |

| | Policy Details | | | | |
|---------------------|----------------|---------------------------------------------------------|---------------------------------------------------------------------|---|-----------------------------------------------------------------------------------------------------|
| Policy Number | : | 16050146240100000081 | Business Source Code | | |
| Period of Insurance | : | From: 20/06/2024 05:39:20 PM To: 19/09/2024 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 | : | 20-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 | AXIS BANK LTD |

| Premium(₹) | GST(₹) | Total(₹) | Total (₹ in words) | Receipt No. & Date |
|------------------|--------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------|-------------------------------------|
| 3,325 | 599 | 3,925 | RUPEES THREE THOUSAND NINE HUNDRED TWENTY-FIVE ONLY | 1605018124000000241 2 - 20/06/24 |
| Location Details | Location Details : Annapurna Agri and Warehousing, Godown No.1,Vill and Post Talwada Bujurg Teh and Dist Barwani-451556-451556 | | | |

| First Loss Percentage | : NA

Details of assets covered under the Policy

| Stocks in | n Trade | |
|-----------|-------------------------------------|-------------|
| Sl. No. | STOCK DETAILS | Sum Insured |
| 1 | ON STOCK OF Soyabean & Cotton seeds | 13300000 |

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

| Furniture | Furniture / Fixture / Fittings | | | |
|-----------|------------------------------------|-------------|--|--|
| SI. 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 | : | Annapurna Agri and Warehousing, Godown No.1,Vill and Post Talwada Bujurg Teh and Dist Barwani ,Madhya Pradesh 451556 |
|--------------------|---|----------------------------------------------------------------------------------------------------------------------------|
| Excess | : | 1000 |

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

| | Rate of Tax | Amount in INR | |
|---------|-------------|---------------|-------|
| Premium | | ₹ | 3,325 |
| SGST | 0 | 0 | |
| CGST | 0 | 0 | |
| IGST | 18 | 599 | |

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 20th day of June, 2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 20/06/2024

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 : 16050124P0002791

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C

Policy No.: 16050146240100000081Document generated by 36776 at 20/06/2024 20:17:48 Hours.

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.