



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Liability Only Policy

UIN Number - IRDAN190RP0004V01200203

Policy Number :16050131240200002732		
POLICY ISSUING OFFICE: JALNA BRANCH (160501), K.K.NIWAS LAKKAD KOT NEAR BUS STAND AURANGABAD ROAD JALNA,,, MAHARASHTRA, 431203. PHONE NUMBER:02482232708 / 02482232709 FAX NUMBER:NA / NA Email:nia.160501@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: Aurangabad Non Suit Claim Hub (169001) ADDRESS: JEEVAN SUMAN LIC BLDG., PL.NO.3N-5, CIDCO, JALGAON RD.,AURANGABAD-431003., , , MAHARASHTRA, 431003. PHONE NUMBER: 123456 / MOBILE NUMBER: Email: ch169001@newindia.co.in

INSURED DETAILS

Insured's Name	OMPRAKASH GHISALAL GOYAL	Customer ID	PO72770883 (PAN No :NA)	
	AT SENDHWA DIST. BADWANI.,,, BARWANI ,MADHYA PRADESH, 451551	Contact Number	/ / XXXXX1491	
			BackOffice@jainuineinsura nce.co.in	
		GSTIN	NA	

Period of cover	15/09/2024 12:00:01 AM to 14/09/2025 11:59:59 PM	Receipt Number	10000089240900434707 - 13/09/24
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	16050131230200002312
VEHICLE DETAILS			
Geographical Area / Zone:	India/	Year of manufacture:	1997
Type of Commercial Vehicles:	B - Trailers	Sub Type:	Other vehicles
Name of the Financier:		Chassis no./Engine no.:	none/02997
Type of fuel:	Others	Cubic capacity (CC):	0
Type of body:	Open	Gross Vehicle Weight (GVW):	3500
Make/Model:	SWARAJ TRA/963 FE	Registration no.	MP-10-A-4128
Seating capacity including Driver:	0	Variant:	ASIAN TROLLY
Automobile Association membership:		Colour:	NA
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Khargone

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value
0	0	N/A	N/A		0

SCHEDULE OF PREMIUM

Own Damage		Liability		
Basic OD Premium (+) Additional OD Premium for CNG/LPG	0 0	Basic TP Premium (+)LL to persons employed for opn and/or maint.and/or loading and/or unloading(4)	2485 0 200	
Calculated OD Premium	0	Calculated TP Premium	2685	
Total OD Premium (Rs)	0	Total TP Premium (Rs)	2685	
Net Premium (Rs)			2,685	

Policy No. : 16050131240200002732Document generated by QR_RENEWAL at 2024/09/13 18:23:19. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbal - 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 earny 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



								224
GST (Rs)								334
Total Payable (Rs) Total Payable in Rs(in word	4c).	RUPEES THREE THOU						3,019
	15).		JSAND MINET	1				
GSTIN(Issuing Office)				27AAACN416				
SAC					or vehicle insurance se			
Limitation as to use: The pol under sub-section (3) of Sec	licy cove ction 66	ers use only under a p of the Motor Vehicles	ermit within tl s Act, 1988.Th	ne meaning of e policy does n	the Motor Vehicles A not cover use for: a)Or	ct, 1988 ganized	8 or such a carria d racing b) Speed	age falling d testing
Limits of Liability:Limit of th Act, 1988. Limit of the amorevent: Up to Rs. 7,50,000	ne amou unt of th	nt the Company's Lial ne Company's Liability	oility Under Se Under Sectio	ection II 1(i) in r n II 1(ii) in resp	respect of any one acc lect of any one claim o	ident: or serie	as per the Moto s of claims arisir	or Vehicles ig out of one
For individual covers (OD) in	n RS:0			Compulsory e	excess in Rs:NA			
Imposed excess in Rs:0				Voluntary exc	cess in Rs:0			
Persons or classes of person license at the time of the ac effective Learner's License i Rules, 1989.	cident a	and is not disqualified	from holding	or obtaining su	uch a license. Provideo	d also tl	hat the person h	oldină an
PA cover for Owner Driver	-							
Name of Nominee	Age of	Age of Nominee Relationship Insured		with the Name of the Appoint Nominee is a minor)		tee (if	ee (if Relationship to the Nominee	
none	0		none		none		none	
PA cover for named person	S	-						
Name		CSI Opted(Rs.)		Nominee Rel		Relati	lationship	
NA		NA		NA				
Premium and GST Details								
	Rate of Tax		Amount in INR					
Premium					Rs200			
SGST		0		0				
CGST		0		0				
IGST		18		36				
Premium					Rs2485			
SGST		0			0			

In witness where of this policy has been signed at JALNA BRANCH on this 13/09/2024 WARRANTED 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

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Important notice:

CGST

IGST

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.

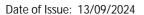
For and on behalf of The New India Assurance Company Limited

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(Mr. Pratik Manwatkar) [Branch Manager]

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 : 16050124P0006293

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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