



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Liability OnlyPolicy

UIN Number - IRDAN190RP0004V01200203

Policy Number :16060031230200002164		
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

INSURED DETAILS			
Insured's Name	M/S.KESHAV GINNING & PRESSING FACTORY	Customer ID	POA2677076 (PAN No :AAGFK9251P)
Insured's Address	GUT NO.235,131,AT.PISEGAON,AMBEJOGAI KAIJ ROAD,TO.KAIJ,,DIST.BEED,, KAIJ ,MAHARASHTRA, 431123	Contact Number	/ / XXXXX3796
		Email	mhtiwari@gmail.com
		GSTIN	27AAGFK9251P1ZM

POLICY DETAILS

Period of cover	23/09/2023 12:00:01 AM to 22/09/2024 11:59:59 PM	Receipt Number	16060081230000004121 - 20/09/23
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	16060031220200001755
VEHICLE DETAILS			
Geographical Area / Zone:	India/C	Year of manufacture:	2016
Type of Commercial Vehicles:	D - Misc-Special Type	Sub Type:	EXCAVATORS
Name of the Financier:		Chassis no./Engine no.:	HAR2DXLSC02475635/T41 0401620143
Type of fuel:	Diesel	Cubic capacity (cc):	0
Type of body:	Open	Gross Vehicle Weight (GVW):	5600
Make/Model:	JCB INDIA /2DX	Registration no.	MH-44-D-6039
Seating capacity including Driver:	1	Variant:	JCB INDIA LTD 2DX
Automobile Association membership:		Colour:	YELLOW
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Ambajogai

INSURED DECLARED VALUE (Rs)

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

SCHEDULE OF PREMIUM

Own Damage		Liability		
Basic OD Premium	0	Basic TP Premium (+)LL to paid driver conductor cleaner employed for	7267	
		oprn	50	
Calculated OD Premium	0	Calculated TP Premium	7317	
Total OD Premium (Rs)	0	Total TP Premium (Rs)	7317	
Net Premium (Rs)			7,317	

Policy No. : 16060031230200002164Document generated by 30396 at 2023/09/20 16:37:27. 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. sal mechanism; you may also



GST (Rs)								1 210
Total Payable (Rs)								<u>1,318</u> 8,635
Total Payable in Rs(in word	in words): RUPEES EIGHT THOUSAND SIX HUNDRED THIRTY-FIVE ONLY			0,030				
	15).			1				
GSTIN(Issuing Office)				27AAACN416	5C3ZP			
SAC					or vehicle insuranc			
Limitation as to use: The pol under sub-section (3) of Sec	icy cove tion 66	rs use only under a po of the Motor Vehicles	ermit within th s Act, 1988.The	ne meaning of e policy does n	the Motor Vehicle ot cover use for: a	s Act, 1988)Organize	8 or such a carri d racing b) Spee	age falling d testing
Limits of Liability:Limit of th Act, 1988. Limit of the amou event: Up to Rs. 7,50,000	e amou unt of th	nt the Company's Liak he Company's Liability	bility Under Se Under Sectior	ction II 1(i) in r n II 1(ii) in resp	espect of any one ect of any one clai	accident: m or serie	as per the Moto s of claims arisin	or Vehicles ng out of one
For individual covers (OD) in	ר RS:0			Compulsory e	excess in Rs:NA			
Imposed excess in Rs:0				Voluntary excess in Rs:0				
Persons or classes of persor license at the time of the ac effective Learner's License r Rules, 1989. PA cover for Owner Driver	cident a nay also	nd is not disqualified drive the vehicle and	from holding d that such a p	or obtaining su erson satisfies	ich a license. Provi the requirement c	ded alšo t of Rule 3 o	hat the person h f the Central Mo	noldinğ an otor Vehicles
Name of Nominee			with the Name of the Appointed Nominee is a minor)			Relationship to Nominee	o the	
none	0	0 none		none		none		
PA cover for named persons	S							
Name		CSI Opted(Rs.)		Nominee		Relati	onship	
NA	NA		NA		NA	A		
Premium and GST Details								
		Rate of T	ах		Amount i	n INR		
Premium					Rs	7,317		
SGST	9				659			
0.007	_							

SGST	9	659
CGST	9	659
IGST	0	0

In witness where of this policy has been signed at AMARAVATHI DO on this 20/09/2023 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 21,40.

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: 20/09/2023

Duly Constituted Attorney(s)

Policy No.: 16060031230200002164Document generated by 30396 at 2023/09/20 16:37:27.

fice: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

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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 : 16060023P0006120

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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