



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE Two Wheeler Liability Only Policy

UIN Number - IRDAN190RP0002V01200203

Policy Number :16050131240200002834		
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 Name	THE PARTNER ANILKUMAR & CO	Customer ID	PO63293078 (PAN No :NA)
Insured Address	ANILKUMAR & CO. NEAR BASAVA VANA, OLD BUS STAND, HUBLI,,, HUBLI ,KARNATAKA, 580020	Contact Number	//
		Email	prabhuaco@yahoo.in
		GSTIN	29AACFA2641K1ZI

POLICY DETAILS

Period of cover	21/09/2024 12:00:01 AM to 20/09/2025 11:59:59 PM	Receipt Number	16050181240000005436 - 20/09/24
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	16050131230200002324

VEHICLE DETAILS

Registration Number	KA-25-Y-0014	Chassis no./Engine Number	06E16C37760/06E15M333 23
Make / Model	HERO HONDA/SPLENDOR +	Variant:	STD
Year of manufacture	2005	Type of body / Type of Fuel	Metal/Petrol
Colour	NM	Cubic capacity(cc) /Wattage(kW):	100cc
Seating capacity including Driver	2	Name of registration authority	Dharwar
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	1	Automobile Association membership	none

INSURED DECLARED VALUE (in 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	0	Basic TP Premium (+)PA premium for UnNamed/Hirer/Pillion Persons(1)	714 70	
Calculated OD Premium	0	Calculated TP Premium	784	
Total OD Premium	0	Total TP Premium	784	
Net Premium in Rs			784	
GST in Rs			141	
Total Payable in Rs			925	
Total Payable in Rs(in words):	RUPEES NINE HUNDRED TWENTY-FIVE ONLY			
GSTIN(Issuing Office)		27AAACN4165C3ZP		
SAC		997134 (Motor vehicle insurance services)		
Limitation as to use: The policy co	vers use for any purpose other that	n: a)Hire or reward b)Organized racing, OR c)Speed testing		
Limits of Liability:Limit of the ame Act, 1988. Limit of the amount of event: Up to Rs. 1,00,000	ount the Company's Liability Under the Company's Liability Under Sect	Section II 1(i) in respect of any one accident: as per the Mo ion II 1(ii) in respect of any one claim or series of claims are	otor Vehicles sing out of one	

For individual covers (OD) in RS:0



Imposed excess in Rs:0 Voluntary excess in Rs:0 Persons or classes of persons entitled to drive: Any person including the insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's License may also drive the vehicle and that such a person satisfies the requirement of Rule 3 of the Central Motor Vehicles Rules, 1989.

PA COVELTOI OWNEL DITVEL							
Name of Nominee	Age of	Nominee	Relationship v Insured		Name of the Appoint Nominee is a minor)		Relationship to the Nominee
none	1		none		none		none
PA cover for named persons	ò						
Name		CSI Opted(Rs.)		Nominee		Relatio	onship
none		0		NA		NA	

Premium and GST Details

	Rate of Tax	Amount in INR		
Premium		Rs 784		
SGST	0	0		
CGST	0	0		
IGST	18	141		

In witness where of this policy has been signed at JALNA BRANCH on this 20/09/2024WARRANTED 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 18,22.

Important notice:

Date of Issue: 20/09/2024

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

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 : 16050124E0006512

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C