



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Package Policy

UIN Number - IRDAN190RP0044V01100001

Policy Number :16050131240100002811		
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

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Insured's Name	WINNER COOTON CORPORATION	Customer ID	PO91704546 (PAN No :AFPPJ3339F)
Insured's Address	KATKUT PHATA MAIN ROAD,BARWAHA DIST KHARGONE MP,, KARHI ,MADHYA PRADESH, 451220	Contact Number	/ / XXXXX3096
		Email	satishsand2@gmail.com
		GSTIN	23ABGPJ2967G1ZQ

POLICY DETAILS

Period of cover	21/09/2024 12:00:01 AM to 20/09/2025 11:59:59 PM	Receipt Number	16050181240000005392 - 19/09/24	
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	16050131230100002392	
VEHICLE DETAILS				
Geographical Area / Zone:	India/C	Year of manufacture:	2017	
Type of Commercial Vehicles:	A - Goods Carrying	Sub Type:	Other than 3 wheeler - Public Carrier	
Name of the Financier:	ubi	Chassis no./Engine no.:	1VY5210EJHA00236/PY302 9T261177	
Type of fuel:	Diesel	Cubic capacity (CC):	0	
Type of body:	Tanker	Gross Vehicle Weight (GVW):	3000	
Make/Model:	JOHN DEERE/JOHN DEERE 5210	Registration no.	MP-10-AB-5787	
Seating capacity including Driver:	1	Variant:	JOHN DEERE 5210	
Automobile Association membership:	none	Colour:	GREEN	
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Khargone	
FASTag ID:				

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value	
225000	0	225000	0		450000	

SCHEDULE OF PREMIUM

Own Damage		Liability		
Basic OD Premium (+)Additional Premium for Non-Electrical fitting (-)Calculated NCB Discount(35%) (+)Loading for Inclusion of IMT 23	692.16	Basic TP Premium (+)LL to paid driver conductor cleaner employed for oprn	16049 0 50	

Policy No. : 16050131240100002811Document generated by 36776 at 2024/09/19 18:10:45. 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 redres approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in. ssal mechanism; you may also



(.) Additional OD Promium		0					
		1035	Calculated TP	P Promium			16099
Total OD Premium (Rs)		1035	Total TP Prem				16099
Net Premium (Rs)					17,134		
GST (Rs)						2,121	
Total Payable (Rs)						19,255	
Total Payable in Rs(in word	s): RUPEES NINETEEN 1	HOUSAND TW	O HUNDRED F	IFTY-FIVE ONLY			17,200
GSTIN(Issuing Office)			27AAACN416	5C3ZP			
SAC			997134 (Mot	or vehicle insurance s	ervices)		
Limitation as to use: The Pol under Sub-section 3 of Secti Reliability Trials d) Speed Te	icy covers use only under a p ion 66 of the Motor Vehicles esting	ermit within tl Act, 1988.The	he meaning of Policy does no	the Motor Vehicles A ot cover use FOR a)Or	ct, 1988 ganised	8 or such a carri I racing b) Pace	age falling Making c)
Limits of Liability:Limit of th Act, 1988. Limit of the amou event: Up to Rs. 7,50,000	e amount the Company's Lia unt of the Company's Liabilit	bility Under Se y Under Sectio	ection II 1(i) in r n II 1(ii) in resp	espect of any one acc ect of any one claim o	ident: or series	as per the Mot s of claims arisi	or Vehicles ng out of one
For individual covers (OD) ir	n RS:450000		Compulsory e	excess in Rs:500			
Imposed excess in Rs:0			Voluntary exc	cess in Rs:0			
license at the time of the ac	is entitled to drive:Any perso cident and is not disqualified nay also drive the vehicle an	d from holding	or obtaining su	ich a license. Provideo	d also th	hat the person l	holding an
PA cover for Owner Driver							
Name of Nominee	Age of Nominee	Relationship Insured	with the Name of the Appoint Nominee is a minor)		tee (if	Relationship to the Nominee	
none	0	none		none		none	
PA cover for named persons	5	•				•	
Name	CSI Opted(Rs.)		Nominee		Relationship		
NA	NA		NA		NA		
Premium and GST Details							
	Rate of T	Тах		Amount in II	١R		
Premium				Rs1085			
SGST	0		0				
CGST	0		0				
IGST	18		195				
Premium			Rs16049				
SGST			0				
CGST	0		0				
IGST	12			1926			
In witness where of this policy has been signed at JALNA BRANCH on this 19/09/2024 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 21,23,40.							

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

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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.

Date of Issue: 19/09/2024

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 : 16050124E0006463

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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