



MACHINERY INSURANCE POLICY

Insured's Name	:	N. B COTEX PVT LTD					
Insured's Details		Issuing Office Details					
Customer ID	:	PO92336277	Office Code		: AURANGABAD DO-160400 (160400)		
Address	:	GAT NO .490, KALYANE- HOL ROAD AT. DHARANGAON, DIST - JALGAON DHARANGAON(JALGAON)	, Address	:	AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005		
Dhana Na		,MAHARASHTRA, 425105	Dhana Na		0040000070 / 0040000004		
Phone No	:		Phone No		02402333572 / 02402333361		
E-mail/Fax	:	nbcotexpvtltd@gmail.com, /	E-mail/Fax	:	nia.160400@newindia.co.in / 02402331226		
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178		
GSTIN/UIN	:	27AADCN6730G1ZH / NA	GSTIN	:	27AAACN4165C3ZP		
	:		SAC	:	997137 (Other property insurance services)		

Policy Details					
Policy Number	:	16040044245100000019	Business Source Code		
Period of Insurance	:	From:29/10/2024 12:00:01 AM To: 28/10/2025 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent	:	Jainuine Insurance Brokers Pvt. Ltd (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),
Date of Proposal	:	29-Oct-24	Agent/Bancassurance/CPS C User	:	
Prev. Policy no.	:	16040044235100000023	Phone No	:	02402350377, 9850049400 / NA
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //

Premium	GST	Total	Receipt No. & Date
7,809	1,406	9,215	16040081240000009526 - 24/10/24

	Risk Address:Gat no .490 ,Kalyane- Hol road, At Dharangaon Dist-jalgaon
Property to be Insured)	425105,NA,MH1902,DHARANGAON(JALGAON),MH,MAĤARASHTRA,INDIA,425105

Total Sum Insured ₹ 800000

	Inventory of the Property Insured							
SI. No.	Quantity	Description of Machines	Year of Make	Sum Insured (In ₹)	Escalation(%)	Excess(₹)		
1	1	Machine Details: Description:- Transformers (with oil), Serial No of Machine: 11111, Name of the manufacturer: NA	2011	800000	NA	8000		

Warranted that the machinery described in above schedule of Machinery does not embrace any foundations masonry and brickwork or Oil in transformer and other electrical equipment damage thereto being covered by the Policy only when specifically described in said schedule.

SI. No.	Add on Covers Opted	Indemnity Limits Opted	Excess
1	THIRD PARTY LIABILITY	NA	Policy Excess
2	EXPRESS FREIGHT (EXCLUDING AIR FREIGHT), HOLIDAY RATES OF WAGES ETC	NA	Policy Excess
3	AIR FREIGHT	NA	5 % of Air Freight
4	ADDITIONAL CUSTOMS DUTY	NA	5 % of Additional duty
5	SURROUNDING PROPERTY	NA	Policy Excess
6	DEBRIS REMOVAL	NA	Policy Excess

	ENDORSEMENTS ATTACHED TO & FORMING PART OF THE POLICY						
Sl. No.	Endorsement Number	Endorsement Title					

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹	7,809
SGST	9	703	
CGST	9	703	
IGST	0	0	

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 24th day of October,2024.

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: 16040024E0015342

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C