



# POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Liability Only Policy

UIN Number - IRDAN190RP0004V01200203

Policy Number :16060031240200003254		
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: Jainuine Insurance Brokers Pvt. Ltd (DA3388757), PHONE NUMBER:02402350377 / / 9850049400 LAND/FAX NUMBER:/ EMAIL:kailash@jainuineinsurance.co.in /	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	MANJEET FIBERS PVT.LTD	Customer ID	POA2678351 (PAN No :AAICM0112G)
Insured's Address	A/P. 84/2,VILLAGE NO.337,NILAPUR ROAD,,WANI,DIST.YAVATMAL(M.S.)-445304,, WANI ,MAHARASHTRA, 445304	Contact Number	//
		Email	kailash@jainuineinsurance .co.in
		GSTIN	27AAICM0112G1ZX

#### POLICY DETAILS

Period of cover	22/10/2024 05:22:24 PM to 21/10/2025 11:59:59 PM	Receipt Number	16060081240000004431 - 22/10/24
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	16060031230200002449
VEHICLE DETAILS			
Geographical Area / Zone:	India/	Year of manufacture:	2019
Type of Commercial Vehicles:	B - Trailers	Sub Type:	Other vehicles
Name of the Financier:		Chassis no./Engine no.:	none/NKI93319
Type of fuel:	Others	Cubic capacity (CC):	0
Type of body:	Others	Gross Vehicle Weight (GVW):	0
Make/Model:	NEW HOLLAN/3630 TX PL US+ Tractor	Registration no.	MH-29-BC-6576
Seating capacity including Driver:	0	Variant:	TRAILER
Automobile Association membership:		Colour:	NA
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Yavatmal

### **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	2485 0	
Calculated OD Premium	0	Calculated TP Premium	2485	
Total OD Premium (Rs)	0	Total TP Premium (Rs)	2485	

Policy No. : 16060031240200003254Document generated by 39404 at 2024/10/22 17:34:22. Regd. & Head Office: New India Assumance 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/policy/FeedbackGen. For redressal of your grievance, if any,you may approach any one of the following offices -1. Policy issuing office 2. Regional offices. In case, you are not satisfied with our own grievance redr enormach 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



						0.405	
Net Premium (Rs)						2,485	
GST (Rs)						298	
Total Payable (Rs)						2,783	
Total Payable in Rs(in words):	RUPEES TWO THO	JUSAND SEVEN H		SHIY-THREE UNLY			
GSTIN(Issuing Office)			27AAACN4	165C3ZP			
SAC			· ·	otor vehicle insurance ser			
imitation as to use:The policy co under sub-section (3) of Section	overs use only under a 66 of the Motor Vehic	a permit within tl cles Act, 1988.Th	ne meaning o e policy does	of the Motor Vehicles Act s not cover use for: a)Org	, 1988 anizec	or such a carriage falling I racing b) Speed testing	
imits of Liability:Limit of the am Act, 1988. Limit of the amount of event: Up to Rs. 7,50,000	ount the Company's L f the Company's Liabil	iability Under Se lity Under Sectio	ection II 1(i) i n II 1(ii) in re	n respect of any one accio spect of any one claim or	dent: series	as per the Motor Vehicles s of claims arising out of on	
or individual covers (OD) in RS:0	)		Compulsor	y excess in Rs:NA			
mposed excess in Rs:0			Voluntary	excess in Rs:0			
Persons or classes of persons enticense at the time of the accider affective Learner's License may a Rules, 1989.	t and is not disqualifi	ed from holding	or obtaining	such a license. Provided a	aľso tł	hat the person holding an	
PA cover for Owner Driver							
Name of Nominee Age	of Nominee	Relationship Insured	with the	Name of the Appointe Nominee is a minor)	e (if	Relationship to the Nominee	
none 0		none		none		none	
A cover for named persons							
Vame	CSI Opted(Rs.)		Nominee	F	Relatio	onship	
NA	NA		NA	NA			
Premium and GST Details	Rate o	ıf Tax		Amount in INF	२		
Premium				Rs0			
SGST	9		0				
CGST	9		0				
IGST	0		0				
Premium				Rs2485			
SGST	6		149				
CGST	6		149				
IGST	0		0				
n witness where of this policy ha NARRANTED THAT IN CASE OF D This policy is subject to the Term http://newindia.co.in; IMT Endor mportant notice:	ISHONOUR OF THE PI s, conditions and exce	REMIUM CHEQU eptions applicabl	E, THIS DOCI e to Package	JMENT STANDS AUTOMA	ATICAL /availa	LY CANCELLED ABINITIO able on the web site	

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

Policy No. : 16060031240200003254Document generated by 39404 at 2024/10/22 17:34:22. 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 red 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 THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



Date of Issue: 22/10/2024

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 : 16060024E0008268

**IRDA Registration Number: 190** NIA PAN NUMBER: AAACN4165C

Policy No. : 16060031240200003254Document generated by 39404 at 2024/10/22 17:34:22. 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/policy/FeedbackGen. 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 re-anomach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in. al mechanism; you may als