



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	MAHALAXMI GINNING INDUSTRIES			
		Insureds Details	Issuing Office Details		
Customer ID	:	POA1043420	Office Code	:	AHMEDNAGAR D.O. 151800 (151800)
Address	:	KALAMB ROAD AT P RALEGAON,DIST YAVATMAL	Address	:	ABBOT BUILDING, 2ND FLOOR, NEAR ASHOKA HOTEL, KINGS ROAD, AHMEDNAGAR,414001
		RALEGAON ,MAHARASHTRA, 445402			
Phone No	:		Phone No	:	02412321538 / 02412343372
E-mail/Fax	:	rajukhivasara@gmail.com, /	E-mail/Fax	:	nia.151800@newindia.co.in /
PAN No	:		S.Tax Regn. No	- :	AAACN4165CST178
GSTIN/UIN	:	27ABKFM3369F1Z0 / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details					
Policy Number	:	15180046240100000197	Business Source Code		
Period of Insurance	:	From: 07/10/2024 02:27:40 PM To: 06/01/2025 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User	:	Jainuine Insurance Brokers Pvt. Ltd. (DA3388757) Jainuine Insurance Brokers Pvt.Ltd (SI00028623),
Date of Proposal	:	07-Oct-24	Agent/Bancassurance/S pecified Person	:	
Prev. Policy no.	:		Phone No	:	02402350377, 9850049400 / NA
Client Type	:	Non-Corporate	E-mail/Fax	:	kailash@jainuineinsurance.co.in, //

Financier(s) Details	
SI. No. Name of the Financiers	
1	L & T FINANCE LTD

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
3,749	676	4,426	RUPEES FOUR THOUSAND FOUR HUNDRED TWENTY-SIX ONLY	151800812400000609 9 - 07/10/24
Location Details	: SHYAMSUNDER MOR WAREHOUSE,GODOWN NO.7 & 8, SR NO. 32/1,MIDC LOHARA,TEH & DIST YAVATMAL. 445001-445001			

First Loss Percentage : NA

Details of assets covered under the Policy

Stocks in Trade		
Sl. No.	STOCK DETAILS	Sum Insured
1	On stock of cotton F P Bales, whilst stored &/or	15000000
	lying in Godown / & or Warehouse.	

Goods h	Goods held in Trust / Commision		
SI. No.	No. GOODS HELD DETAILS Sum Insured		
1	NA	0	

Furniture	Furniture / Fixture / Fittings		
SI. No.	FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured	
1	NA	0	

Office Ed	quipments	
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	NA	0

Coins / Currency notes

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



Sl. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured	
1	NA	0	

Descript	Description of other item			
SI. No.	o. OTHER ITEM DETAILS Sum Insured			
1	NA	0		

Add on Covers	Sum Insured (₹)
Other Extension	NOT OPTED
Theft Extension	NOT OPTED
Terrorism	NOT OPTED

Special Conditions	:	SHYAMSUNDER MOR WAREHOUSE, GODOWN NO. 7 & 8, SURVEY NO. 32/1, MIDC LOHARA, DARWHA ROAD, TEHSIL & DISTRICT YAVATMAL, MAHARASHTRA. 445001
Excess	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹	3,749
SGST	9	338	
CGST	9	338	
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 07th day of October, 2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 07/10/2024

Duly Constituted Attorney(s)

Mudrank_____Dt.____consolidated Stamp Fees Paid by Pay Order Number_____vide receipt number______dt.____. Stamp Duty under the Policy is ₹1/-.

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: 15180024P0009227

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C