



UNITED INDIA INSURANCE COMPANY LIMITED
CERTIFICATE OF INSURANCE
TWO WHEELER-1 YEAR OWN DAMAGE COVER BUNDLED WITH 5 YEARS LIABILITY COVER
UIN: IRDAN54SRP0011V01201819
(FORM 51 OF CENTRAL MOTOR VEHICLE RULES 1989)

Policy No.	2902023124P106577964			Certificate Number	2902023124P106577964																					
Customer Id	23332199021			Issuing Office Address	Code	290202																				
Name of the Insured	MR SURENDRA KUMAR SAINI			P.NO.2 INDRA COLONY, KHEJARLA ROAD, PIPAR CITY - 342601 DIST. JODHPUR (RAJ)																						
Address of the Insured	PLOT NO 18 GANESH VIHAR 6 PRATAP NAGAR VISTAR MACHATA JAIPUR			342601 JODHPUR RAJASTHAN																						
	302013 JAIPUR RAJASTHAN			Telephone (02930) 234811																						
Business/Occupation	Others Mobile No.- 9828854937																									
Insured's Declared Value ₹ 67403																										
Period of Insurance	Own Damage			From 12:08 Hrs of 04/08/2024 To Midnight of 03/08/2025																						
	Liability			From 12:08 Hrs of 04/08/2024 To Midnight of 03/08/2029																						
	CPA Cover			From 12:08 Hrs of 04/08/2024 To Midnight of 03/08/2025																						
Particulars of Vehicle Insured																										
Registration No.		Obsolete Vehicle	Engine No.	Chassis No.	Make/Model	Type of Body	Year of Mfg	Cubic Capacity/KW	Seating including driver																	
Vehicle	Trailer (if any)																									
NEW		No	DYXPRC00357	MD2B85AX6RPC10968	BAJAJ AUTO LTD / CT 110 X null	Solo with Pillion	2024	110	2																	
Registration Authority		Geographical Area			Financier																					
RJ		INDIA																								
Amount in words:		Five thousand nine hundred fifteen rupees only																								
Persons or classes of persons entitled to drive																										
Any person including Insured provided that a person holds an effective driving licence at the time of accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective Learner's Licence may also drive the vehicle and such a person satisfies the requirements of Rule 3 of Central Motor Vehicle Rule, 1989.																										
Note:- The policy does not cover liability for death, bodily injury or damage as excluded in section 150 (2) (ii) and (iii); (b) and (c) of the Motor Vehicles Act, 1988.																										
Limitations as to use																										
The policy covers use of the vehicle for any purpose other than																										
a) Hire or Reward																										
b) Carriage Goods (other than samples or personal luggage)																										
c) Organized Racing																										
d) Pace Making																										
e) Speed Testing and Reliability Trials																										
f) Use in connection with Motor Trade																										
<table border="1"> <tr> <td>Premium:</td> <td>₹ 5,013.00</td> </tr> <tr> <td>CGST(9%):</td> <td>451.00</td> </tr> <tr> <td>SGST(9%):</td> <td>451.00</td> </tr> <tr> <td>Stamp Duty:</td> <td>1.00</td> </tr> <tr> <td>Total(Rounded Off):</td> <td>₹ 5,915.00</td> </tr> <tr> <td>Receipt Number :</td> <td>10129020224107371057</td> </tr> <tr> <td>Receipt Date:</td> <td>04/08/2024</td> </tr> <tr> <td>DebitNote Number:</td> <td></td> </tr> <tr> <td>Document Date:</td> <td></td> </tr> </table>									Premium:	₹ 5,013.00	CGST(9%):	451.00	SGST(9%):	451.00	Stamp Duty:	1.00	Total(Rounded Off):	₹ 5,915.00	Receipt Number :	10129020224107371057	Receipt Date:	04/08/2024	DebitNote Number:		Document Date:	
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Limits of Liability																										
Under Section II-I (i) Death or bodily injury in respect of any one accident; As per Motor Vehicles Act 1988																										
Under Section II-I (ii) Damage to third party property in respect of any one claim or series of claims arising out of one event: ₹ 100000 /-																										
Agency/Broker Code: BRC0000918 SQUARE INSURANCE BROKERS PVT. LTD. , Mobile: 9783300669 Dealer Name/Code: Direct Business: Development Officer Code:																										

Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto 22

I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with provisions of Chapter X & XI of M.V Act, 1988.

Date of Issue: 04/08/2024

Amount Subject to Reverse Charges-NIL

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.

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For and On behalf of
United India Insurance Co. Ltd.



Duly Constituted Attorney



MOTOR INSURANCE - TWO WHEELER-1 YEAR OWN DAMAGE COVER BUNDLED WITH 5 YEARS LIABILITY COVER(UIN: IRDAN545RP0011V01201819) POLICY SCHEDULE

Policy Number	:2902023124P106577964	Previous Policy No	:
Geographical Area	:India(A)	Period of Insurance(Own Damage)	:From 12:08 Hrs of 04/08/2024 To Midnight of 03/08/2025
Insured Name/ID	: MR SURENDRA KUMAR SAINI/23332199021	Period of Insurance(Liability)	:From 12:08 Hrs of 04/08/2024 To Midnight of 03/08/2029
Insured address	:	Period of Insurance(CPA)	:From 12:08 Hrs of 04/08/2024 To Midnight of 03/08/2025
Insured address	:	Policy Issuing Office Address	:
PLOT NO 18 GANESH VIHAR 6 PRATAP NAGAR VISTAR MACHATA JAIPUR City: JAIPUR District: JAIPUR State: RAJASTHAN Pincode: 302013 Telephone: Mobile: 9828854937		P.NO.2 INDRA COLONY, KHEJARLA ROAD, PIPAR CITY - 342601 DIST. JODHPUR (RAJ) , GST No.:- 08AAACU5552C1ZJ City: JODHPUR District: JODHPUR State: RAJASTHAN Pincode: 342601 Telephone: (02930) 234811	
Business Channel Code: BRC0000918		Business Channel Sub Code:	
Dealer Name:		Agent Name: SQUARE INSURANCE BROKERS PVT. LTD.	
Dealer Code:		Land Line No: 141 4052609, Mobile: 9783300669	

Registration Number	NEW	Obsolete Vehicle & Engine Number	No & DYXPRC00357	Year Of Manufacture	2024
RTA Name	RJ	Chassis Number	MD2B85AX6RPC10968	Cubic Capacity/KW	110
Registration Date	04/08/2024	Vehicle Make & Model	BAJAJ AUTO LTD & CT 110 X null	Type Of Body	Solo with Pillion
AA Membership Number		Seating Capacity(Including SideCar)	2	Geographical Extension	

INSURED DECLARED VALUE (₹)							
Vehicle	Trailer/Sidecar	Electrical/Electronic Accessories	Non Electrical Accessories	CNG Kit	LPG Kit	Total	Co-Insurance Details
67403	0	0	0	0	0	67403	100%

OTHER DETAILS			
Financier	Policy Subject to IMT Endorsements	Applicable Addon-covers/Services	Unique Reference Code
	22	Consumables Cover, Loss Of Key Cover, Nil Depreciation Without Excess, Return To Invoice, Road Side Assistance	

PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE: As narrated in the certificate of insurance attached herewith.	Name Of the CPA Nominee	Relation	Age	Name of the Appointee
LIMITATIONS AS TO USE: As narrated in the certificate of insurance attached herewith.	Santra saini	Spouse	NA	
LIMITS OF LIABILITY: As narrated in the certificate of insurance attached herewith.				

PA Cover CSI (₹)		DEDUCTIBLES (Under Section I) (₹)					
Owner Driver CSI (Under Section III)	1500000	Compulsory	100	Imposed	0	Voluntary	0

A-OWN DAMAGE PREMIUM (From 04/08/2024 To 03/08/2025)		B-LIABILITY PREMIUM (From 04/08/2024 To 03/08/2029)		TOTAL PREMIUM	
Basic premium on Vehicle and Accessories		B. Basic TP	₹ 3,851.00	Premium(A+B)	₹ 5,013.00
A. Basic OD	₹ 530.94	Total	₹ 3,851.00	CGST(9%)	₹ 451.00
Total	₹ 530.94	Add :		SGST(9%)	₹ 451.00
Add :		Compulsory PA for Owner Driver (From 04/08/2024 To 03/08/2025)	₹ 275.00	TOTAL PAYABLE PREMIUM	₹ 5,915.00
Return to Invoice	₹ 101.10	Sub Total (Additions)	₹ 275.00	Stamp Duty	₹ 1.00
Nil Depreciation Without Excess	₹ 112.97	Gross TP(B)	₹ 4,126.00	SAC Code	997134
Consumables Cover	₹ 67.40	Gross OD & TP: (A) + (B)	₹ 5,013.00	Invoice No & Date	31241106577964 & 04/08/2024
Loss Of Key Cover (SI: 3000/-)	₹ 50.00			Receipt Number	10129020224107371057
Road Side Assistance	₹ 25.00			Receipt Date	04/08/2024
Sub Total (Additions)	₹ 356.47			Receipt Amount	₹ 5,915.00
Gross OD(A)	₹ 887.00			Payment Mode	
				Paying Party	MR SURENDRA KUMAR SAINI

TERMS & CONDITIONS:As per the Indian Motor Tariff, personal copy of the same is available free of cost on request. Further the Indian Motor Tariff is also available and displayed at all United India Insurance company Offices and on Website www.uilic.co.in

DISCLAIMER:The policy stands Cancelled or void in the event of Cheque Dishonored. The company may cancel the policy by sending 7 days notice in case of fraud, misrepresentation, nondisclosure of material fact or non co-operation of the insured.

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 Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For Legal interpretation, English Version will hold good. In case of accident the insured must inform United India Insurance Co. Immediately to arrange spot survey.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 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's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

For Roadside Assistance please contact- Europ Assistance India Private Limited, 7th, Floor, Building No. 2, Star Hub, Near ITC Maratha Hotel, Sahar, Andheri East, Mumbai Suburban, Maharashtra, Toll Free Number - 18002102051

Date & Signature of Proposal : 04/08/2024
In Witness Whereof this policy has been signed at BO PIPAR CITY 290202 on this 04th day of August ,2024

For United India Insurance Company Limited

Affix Policy Stamp



Duly Constituted Attorneys

IP Address: 10.95.40.80
Issuing Agent: SQUARE INSURANCE
BROKERS PVT. LTD.
Agent Location: 290202

Printed By : CUSTOMER @ 04/08/2024 12:11:45 PM
Underwritten By - SQUIP00 (BROKER)

Agent User Name: SQUIP00

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