



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. | 2902023124P106620169 | | | Certificate Number | 2902023124P106620169 | | | | | | | | | | | | | | | | | | | | | |
| Customer Id | 23332589591 | | | Issuing Office Address | Code | 290202 | | | | | | | | | | | | | | | | | | | | |
| Name of the Insured | MR SOUMAY MATHUR | | | P.NO.2 INDRA COLONY, KHEJARLA ROAD, PIPAR CITY - 342601 DIST. JODHPUR (RAJ) | | | | | | | | | | | | | | | | | | | | | | |
| Address of the Insured | 111 442 SHIPRA PATH NEAR HAMUMAN MANDIR GALI MANSAROVAR JAIPUR | | | 342601 JODHPUR RAJASTHAN | | | | | | | | | | | | | | | | | | | | | | |
| | 302020 JAIPUR RAJASTHAN | | | Telephone (02930) 234811 | | | | | | | | | | | | | | | | | | | | | | |
| Business/Occupation | Others Mobile No.- 8003518050 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Insured's Declared Value ₹ 189617 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Period of Insurance | Own Damage | | | From 14:30 Hrs of 05/08/2024 To Midnight of 04/08/2025 | | | | | | | | | | | | | | | | | | | | | | |
| | Liability | | | From 14:30 Hrs of 05/08/2024 To Midnight of 04/08/2029 | | | | | | | | | | | | | | | | | | | | | | |
| | CPA Cover | | | From 14:30 Hrs of 05/08/2024 To Midnight of 04/08/2025 | | | | | | | | | | | | | | | | | | | | | | |
| 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 | R-936*29367* | MD2JPCXD0RN012377 | BAJAJ AUTO LTD / KTM 200 DUKE null | Solo with Pillion | 2024 | 199 | 2 | | | | | | | | | | | | | | | | | |
| Registration Authority | | Geographical Area | | | Financier | | | | | | | | | | | | | | | | | | | | | |
| RJ | | INDIA | | | AU SMALL FINANCE BANK LTD.(JAIPUR,JAIPUR,RAJASTHAN-302018) | | | | | | | | | | | | | | | | | | | | | |
| Amount in words: | | Eleven thousand three hundred seventy-eight 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>₹ 9,642.00</td> </tr> <tr> <td>CGST(9%):</td> <td>₹ 868.00</td> </tr> <tr> <td>SGST(9%):</td> <td>₹ 868.00</td> </tr> <tr> <td>Stamp Duty:</td> <td>₹ 1.00</td> </tr> <tr> <td>Total(Rounded Off):</td> <td>₹ 11,378.00</td> </tr> <tr> <td>Receipt Number :</td> <td>10129020224107415461</td> </tr> <tr> <td>Receipt Date:</td> <td>05/08/2024</td> </tr> <tr> <td>DebitNote Number:</td> <td></td> </tr> <tr> <td>Document Date:</td> <td></td> </tr> </table> | | | | | | | | | Premium: | ₹ 9,642.00 | CGST(9%): | ₹ 868.00 | SGST(9%): | ₹ 868.00 | Stamp Duty: | ₹ 1.00 | Total(Rounded Off): | ₹ 11,378.00 | Receipt Number : | 10129020224107415461 | Receipt Date: | 05/08/2024 | DebitNote Number: | | Document Date: | |
| Premium: | ₹ 9,642.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| CGST(9%): | ₹ 868.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| SGST(9%): | ₹ 868.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Stamp Duty: | ₹ 1.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total(Rounded Off): | ₹ 11,378.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Receipt Number : | 10129020224107415461 | | | | | | | | | | | | | | | | | | | | | | | | | |
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| DebitNote Number: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Document Date: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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: SQUARE INSURANCE BROKERS PVT. LTD. , Mobile: 9783300669 Dealer Name/Code: BRC0000918 Direct Business: Development Officer Code: | | | | | | | | | | | | | | | | | | | | | | | | | | |

Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto 7,22

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: 05/08/2024

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 | :2902023124P106620169 | Previous Policy No | : |
| Geographical Area | :India(A) | Period of Insurance(Own Damage) | :From 14:30 Hrs of 05/08/2024 To Midnight of 04/08/2025 |
| Insured Name/ID | : MR SOUMAY MATHUR/23332589591 | Period of Insurance(Liability) | :From 14:30 Hrs of 05/08/2024 To Midnight of 04/08/2029 |
| Insured address | : | Period of Insurance(CPA) | :From 14:30 Hrs of 05/08/2024 To Midnight of 04/08/2025 |
| Insured address | : | Policy Issuing Office Address | : |
| 111 442 SHIPRA PATH NEAR HAMUMAN MANDIR GALI MANSAROVAR JAIPUR City: JAIPUR District: JAIPUR State: RAJASTHAN Pincode: 302020 Telephone: Mobile: 8003518050 | | 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 | |

| VEHICLE DETAILS | | | | | |
|-----------------------------|------------|---|------------------------------------|-------------------------------|-------------------|
| Registration Number | NEW | Obsolete Vehicle & Engine Number | No & R-936*29367* | Year Of Manufacture | 2024 |
| RTA Name | RJ | Chassis Number | MD2JPCXD0RN012377 | Cubic Capacity/KW | 199 |
| Registration Date | 05/08/2024 | Vehicle Make & Model | BAJAJ AUTO LTD & KTM 200 DUKE 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 |
| 189617 | 0 | 0 | 0 | 0 | 0 | 189617 | 100% |

| OTHER DETAILS | | | |
|--|------------------------------------|----------------------------------|-----------------------|
| Financier | Policy Subject to IMT Endorsements | Applicable Addon-covers/Services | Unique Reference Code |
| AU SMALL FINANCE BANK LTD.(JAIPUR,JAIPUR,RAJASTHAN-302018) | 7,22 | Nil Depreciation Without Excess | |

| | | | |
|--|--|--|--|
| PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE: As narrated in the certificate of insurance attached herewith. | | | |
| LIMITATIONS AS TO USE: As narrated in the certificate of insurance attached herewith. | | | |
| LIMITS OF LIABILITY: As narrated in the certificate of insurance attached herewith. | | | |

EXCLUSIONS:(1)Any accidental Loss Or Damage and/or liability caused sustained or incurred outside the geographical area.(2)Any claim arising out of any contractual liability.(3)Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss.(4)Any liability of whatsoever nature directly or indirectly caused by or contributed to or by arising out of ionizing radiations or contamination by radioactivity from any nuclear fuel.For the purpose of this exception,combustion shall include any self sustaining process of nuclear fission.(5)Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.(6)Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war), civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences or any consequences thereof and in default of such proof the Company shall not be liable to make any payment in respect of such a claim.

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

| SCHEDULE OF PREMIUM (₹) | | | |
|---|--|------------------------------|-----------------------------|
| A-OWN DAMAGE PREMIUM (From 05/08/2024 To 04/08/2025) | B-LIABILITY PREMIUM (From 05/08/2024 To 04/08/2029) | TOTAL PREMIUM | |
| Basic premium on Vehicle and Accessories | B. Basic TP ₹ 7,365.00 | Premium(A+B) | ₹ 9,642.00 |
| A. Basic OD ₹ 1,668.63 | Total ₹ 7,365.00 | CGST(9%) | ₹ 868.00 |
| Total ₹ 1,668.63 | Add : | SGST(9%) | ₹ 868.00 |
| Add : | Compulsory PA for Owner Driver (From 05/08/2024 To 04/08/2025) ₹ 275.00 | TOTAL PAYABLE PREMIUM | ₹ 11,378.00 |
| Nil Depreciation Without Excess ₹ 333.73 | Sub Total (Additions) ₹ 275.00 | Stamp Duty | ₹ 1.00 |
| Sub Total (Additions) ₹ 333.73 | Gross TP(B) ₹ 7,640.00 | SAC Code | 997134 |
| Gross OD(A) ₹ 2,002.00 | Gross OD & TP: (A) + (B) ₹ 9,642.00 | Invoice No & Date | 3124I106620169 & 05/08/2024 |
| | | Receipt Number | 10129020224107415461 |
| | | Receipt Date | 05/08/2024 |
| | | Receipt Amount | ₹ 11,378.00 |
| | | Payment Mode | |
| | | Paying Party | MR SOUMAY MATHUR |

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>.

Date & Signature of Proposal : 05/08/2024
In Witness Whereof this policy has been signed at BO PIPAR CITY 290202 on this 05th day of August ,2024



For United India Insurance Company Limited



Duly Constituted Attorneys

| | | |
|---|--|-----------------------------------|
| IP Address: 10.95.40.80 | Printed By : CUSTOMER @ 05/08/2024 2:35:34 PM | Agent User Name: SQUIPIP00 |
| Issuing Agent: SQUARE INSURANCE BROKERS PVT. LTD. 290202 | Underwritten By - SQUIPIP00 (BROKER) | |
| Agent Location: | | |

