



Cholamandalam MS General Insurance Company Limited

NEW NO. 2, OLD NO. 234, DARE HOUSE, II FLOOR., N. S. C. BOSE ROAD, PARRYS, CHENNAI - 600 001., CHENNAI TAMIL NADU, 600001

GSTIN Number: 33AABCC6633KIZQ PAN: AABCC6633K CIN: U66030TN2001PLC047977

IRDA Registration No: 123 UIN No: IRDAN123RP0017X/01201819

MOTOR TWO - WHEELERS POLICY BUNDLED CUM RECEIPT
(Form 51 of the central motor vehicle rules, 1989)

Policy No/Issue Dt & Time	3410/01092830 000 00 / 25-Jun-2022 17:23	Proposal No. & Date	YC2206251722248634 & 25-Jun-2022 17:23
Insured Name	Mr ELUMALAI V	Period Of Own Damage Cover	25-Jun-2022 (17:23) to 24-Jun-2023 (Midnight)
Period Of Liability Cover	25-Jun-2022 (17:23) to 24-Jun-2027 (Midnight)	Period Of PA Owner Driver	25-Jun-2022 (17:23) to 24-Jun-2023 (Midnight)
Previous Insurer	N/A	Previous Policy No	N/A
Reg. Address	S O VEERAN NO 47 2 NORTH STREET KATTUEDAYAR KALLAKURCHI TAMIL NADU 605751	Comm. Address	S/O VEERAN NO 47 2 NORTH STREET KATTUEDAYAR KALLAKURCHI TAMIL NADU 605751
Customer GSTIN	N/A		

Product Type: STANDARD

Make	Model	Sub Model	Cubic Capacity	Manufacturing Year	Seating Capacity
YAMAHA	FZ (FZS)	BFH1	149	2022	2
Body Type	Registration No.	RTO	Hypothecation/Lease*	Fuel Type	Chassis No
SOLO	NEW	VILLUPURAMULUNDURPET	Yes	PETROL	ME1RG66D5N0026609
Engine No	Invoice Date	Vehicle IDV	Elec. Accessories	Non-Elec. Accessories	Total IDV
G3N3E0192706	25-Jun-2022	115082	0	0	115082

Schedule of Premium (Amount in Rs.)

Own Damage Premium (A)			Liability Premium (B)	
Basic Premium			Basic Third Party Liability (Including TPPD)	
Vehicle	1543		3851	
Non-Elec. Accessories (IMT-24)	0		Sub Total (Third Party Liability)	
Elec. Accessories (IMT-24)	0		3851	
Sub Total (Basic Premium)			PA Cover For Owner Driver of Rs.1500000(IMT-15) For 1 Year	
IMT 33	0		325	
Add On Coverages (Nil Depreciation)	0		PA Cover (0 Per Person) for 2 Persons(IMT-16)	
Add On Coverages (RTI)	0		0	
Add On Coverages (Engine Protector)	0		Geographical Area Extension (IMT-1)	
Geographical Area Extension (IMT-1)	0		0	
Sub Total-Addition			Sub Total (PA Cover)	
Deductibles			Net Liability Premium (B)	
Voluntary Deductibles (0) (IMT-22A)	0		4176	
Anti Theft Device (IMT-10)	0		Total Premium (A+B)	
AA Membership (IMT-8)	0		5719	
No Claim Bonus (0%)	0		SGST(0 %)	
Handicap Discount (IMT-12)	0		CGST(0 %)	
Sub Total (Deductibles)			IGST(18 %)	
Net Own Damage Premium (A)			1029	
CIN Details:			Gross Premium Paid	
Name of Nominee			6748	
Age			Note: 1. Policy issuance is subject to realization of cheque	
Relationship with Insured			2. Consolidated stamp duty paid Vide G.O. Rt No.536, Commercial Taxes and Registration (J1)	
Name of Appointee			Department: Tamil Nadu dated null	
Relationship with Nominee			3. The policy is subject to compulsory deductible of Rs.100 (IMT-22)	
Insured Declared Value: The schedule of age-wise insured declared (IDV) as shown in the below table is applicable for the purpose of Total loss including Theft Constructive Total Loss (TL, CTL) claims only on basis of loss date falling in the respective year. A vehicle will be considered to be a CTL, where the aggregate cost of retrieval and/or repair of the vehicle subject to terms and conditions of the policy exceeds 75% of the IDV.			*Subject to IMT Endt. Nos. & Memorandum: 15.22	
Tenure			25-Jun-2022 to 24-Jun-2023	
IDV			115082	

Limitations as to use: The policy covers use of the vehicle for any purpose other than (1) Hire or Reward (2) Carriage of goods (other than samples or personal luggage) (3) Organized racing (4) Pace making (5) Speed testing (6) Reliability trials (7) Any purpose in connection with motor trade.

Drivers Clause: Any person including the insured, provided that the person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such license. Provided also that the person holding an effective learners license may also drive the vehicle & that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

Limits of Liability Clause: Under Section II-1(i) of the policy - Death of or bodily injury: Such amount as is necessary to meet the requirements of the Motor Vehicle Act 1988 Under Section II-1(i) of the policy - Damage to third party property is Rs.1 lakhs PA Cover Under Section III for Owner-Drive is Rs. 1500000.

Grievance Clause: For resolution of any query or grievance, Insured may contact the respective branch office of the company or may call at (1800-208-5544) or may write an email at (www.cholainsurance.com). In case the insured is not satisfied with the response of the office, insured may contact the Grievance Officer of the Company at (customercare@cholams.munugappa.com). In the event of unsatisfactory response from the Grievance Officer, the insured may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDA website: www.irdaonline.org, or on the website of General Insurance Council: www.generalinsurancecouncil.org.in or on the company website (customercare@cholams.munugappa.com).

Policy wording can be downloaded from our Website (www.cholainsurance.com)

Hypothecation Details: IDFC FIRST BANK LTD, CHENNAI CHENNAI

Important Notice: The insured is not indemnified, if the vehicle is used or driven otherwise than in accordance with the 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 & RIGHT OF RECOVERY For legal interpretation. English version will hold good.

I 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 Chapter XI of Motor Vehicle Act, 1988



For & On Behalf of Cholamandalam MS General Insurance Company Limited

MISP Code: TTIBI/Y/186802100

Authorized Signatory

SAC: 997134 - Description Of Service: MOTOR VEHICLE INSURANCE SERVICES, Place Of Supply: TAMIL NADU (State Code :29) . Receipt No: YC2206251722248634 .

Payment Mode: APD Wallet.

Broker Name & Address: Toyota Tsusho Insurance broker India Pvt. Ltd., No 53(NP) Developed Plots, Industrial Estate, Ekkatturhanganal, Chennai - 600032

Broker Code: DB-403/08

For Renewal/Claims assistance - please contact Ins.Co. & Broker through SRI KARPAGA VINAYAGA MOTORS, TAMIL NADU at (04151-228888 / 7339200226)