

Name: Mr MOHAMMAD YUNUS ABDUL SATTAR

Address: PLOT NO 24 GAT NO 188, INDRA PRAST COLONY,

JALGAON, Jalgaon,,

425001, JALGAON, MAHARASHTRA Date:31/01/2024

**Your Policy Details:** 

Policy Number: 6301308083 00 00

Policy Period: From 00:00 Hours on 01/02/2024 to Midnight of

31/01/2025

Premium Paid: ₹ 18,476.00

Dear Mr MOHAMMAD YUNUS ABDUL SATTAR,

Welcome to Tata AIG General Insurance Company Limited family & we thank you for choosing our policy for your motor vehicle insurance.

We are enclosing Policy schedule cum certificate of insurance of your vehicle. You are requested to visit our website www.tataaig.com for policy wording.

Your policy has been issued based on the information and declaration provided by you, No Claim Bonus (NCB) if shown on your policy schedule has been allowed as you had not reported any claim in the previous policy.

Kindly go through the enclosed information/declaration provided by you and in case your policy shows No Claim Bonus, for which you are not entitled as explained above or any other error/discrepancy then we request you to get in touch with us within 15 days of receipt of the policy for correction otherwise all particulars will be deemed to be correct.

You may also reach us at our 24\*7 helpline 1800 266 7780 for providing any information or in case you desire to have a printed copy of policy wording.

We assure you of our best services at all times. Happy driving!

Sincerely,

For Tata AIG General Insurance Company Limited

**Authorized Signatory** 

CALL US

24X7 Toll Free

WRITE TO US

Tata AIG General Insurance Co. Ltd., 7th and 8th Floor, Romell Tech Park, Cama Industrial Estate, Western Express Highway, Goregaon(E), Mumbai, Maharashtra 400063





Certif	icate Of Insurance and Policy Schedule F	orm 51 of the Central Motor Vehicle R	ules, 1989	
Agent Name: SANJA	AY VITTHALRAO KENJ	ALE		
<b>Agent License Code:</b>	POSPBOGPK0683C	<b>Agent Contact No.:</b> 7066192625		
Policy Number: 6301308083 00 00 Policy Code: 00/00/3189/02		<b>Policy Type:</b> Auto Secure - Liability Only Policy	Commercial Class: Goods Carrying Vehicle	
Alternate Policy No: N/A		Covernote No: N/A	Covernote Issuance Date: N/A	
Name & Ad	ldress of Insured	Period of Insurance		
Name: Mr MOHAMMAD YUNUS ABDUL SATTAR  Address: PLOT NO 24 GAT NO 188, INDRA PRAST COLONY, JALGAON, Jalgaon,, 425001, JALGAON, MAHARASHTRA, INDIA  Contact Number: 8828564497  Customer ID: GSTIN: Place of Supply: MAHARASHTRA  State Code: 27		(Section-I Liability) From 00:00 Hours on 01/02/2024 To Midnight of 31/01/2025  (Section-II PA cover for owner driver) From 00:00 Hours on 01/02/2 Midnight of 31/01/2025		
RTO Location: THANE	Zone: C	Geographical Area: INDIA	Hire Purchase / Hypothecation / Lease With : Contract/Loan/Reference No:	

Registration Number	Make / Model / Body Type/ Segment	Engine Number	Chassis Number	Mfg. Year	GVW	Public Carrier/Private Carrier	CC/KW	Licensed Carrying Capacity Including Driver
MH04FU8431	TATA MOTORS/ACE/HT/CLOSED/PICK UP VAN	275IDI06LXYSR1875	MAT445222CZNA5840	2012	1550	A1 GCV Public carriers other than 3 wheelers	702	3

Insured Declared Value (IDV) ₹							
Vehicle IDV	Body IDV	Chassis IDV	Non Electrical Accessories IDV	Electrical /Electronic Accessories	Bi-Fuel / CNG /LPG Kit	Trailer IDV	Total IDV
0	0	0	0	0	0	0	0

SCHEDULE OF PREMIUM		
Section - I LIABILITY (B)		
Third Party Premium	Premiu	m Amount
Basic TP premium	₹	16049.00
PA Benefits		
1 Year(s) Compulsory PA cover for Owner Driver	₹	375.00
Legal Liability	MAVC	
Add: Legal liability to paid driver - IMT 28 Number of persons:1	₹	50.00
TOTAL LIABILITY PREMIUM	₹	16474.00
Net basic Liability Premium (B)	₹	16049.00
GST on Basic Liability Premium	<u>.</u>	
SGST@6%	₹	963.00
CGST@6%	₹	963.00
Net Other Liability Premium (D)	₹	425.00
GST on other liability cover		
SGST@9%	₹	38.00
CGST@9%	₹	38.00
NET PREMIUM (B+D)	₹	16474.00
TOTAL POLICY PREMIUM	₹	18476



**Drivers Clause: Persons or Classes of Persons entitled to drive:** Stage Carriage / Contract carriage / Private Service Vehicle Any person including insured: Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle when not used for the transport of passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

**Goods Carriage:** Any person including insured: Provided that a person driving hold an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

**Non Transport vehicles:** Any person including insured: Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989

Warranty for Goods	Warranted that at no time the Gross Laden Weight of the vehicle exceeds the Gross Vehicle weight mentioned in the			
Carrying Vehicles:	of the policy.			

LIMITS OF LIABIL	TY				
Under Section II - 1 (i) of policy (Death of or bodily injury)	Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988.	Under Section II - 1 (ii) of policy (Third Party Property Damage)	₹7,50,000	Under Section III : 1 Year(s) Compulsory PA Cover for Owner Driver	₹ 15,00,000

This policy does not cover preexisting damages as per Inspection photographs and Report

Subject to: A) IMT Endorsement Number: IMT 28

B) TATA AIG Auto Secure Endorsement Number (TA):

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Name of the Nominee	Relationship with Insured	Name of Appointee (If nominee is minor)	Relationship with Nominee
MR ABDUL SATTAR	Father	NA	NA

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 Chapter XI of M.V. Act, 1988.

In witness whereof this Policy has been signed at MUMBAI on 31/01/2024

Receipt No.(s):

Consolidated Stamp Duty has been paid to the State Exchequer.

**GSTIN:** 27AABCT3518Q1ZW-MAHARASHTRA

Service Account Code: 997134

For TATA AIG General Insurance Company LTD.







**Authorized Signatory** 

**Policy Servicing Office:** SUMIT BUSINESS BAY, UNIT NO.524, ANDHERI KURLA ROAD, ADJACENT TO CINEMAX AND WEH METRO STATION, BEHIND GURUNANAK PETOL PUMP CHAKALA, ANDHERI EAST, , MUMBAI , MAHARASHTRA , 400069

Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.



#### **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 Vehicles Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. This policy does not cover pre existing damages as per Inspection photographs and Report.

**Note :** This Schedule, Policy terms and conditions available on company website and Endorsements mentioned herein above shall read together and word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear the same meaning wherever it may appear. Any amendments/modifications/alterations made on this system generated policy document is not valid and Company shall not be liable for any liability whatsoever arising from such changes. Any changes required to be made in the policy once issued, would be valid and effective, only after written request is made to the Company and Company accepts the requested amendments/modifications/alterations and records the same through separate endorsement to be issued by the Company. You are advised to go through the policy schedule cum certificate of insurance which is issued based on your declaration and if any error/ discrepancy is found in respect of vehicle details, No Claim Bonus or any other material information, it should be brought to our notice within 15 days of receipt of this policy for necessary correction along with the supporting documents, otherwise it will be deemed correct. You may visit company website at www.tataaig.com for detailed benefits, terms & conditions & exclusions of the policy. You may also reach us at our 24\*7 helpline 1800 266 7780 in case you desire to have a printed copy of policy wording. Our grievance redressal procedure and details about ombudsman is also available in our policy wording. Please note that any misrepresentation, non disclosure or withholding of material facts will lead to cancellation of policy ab initio with forfeiture of premium and non consideration of claim, if any. We will specifically seek confirmation on No Claim Bonus availed by you from your previous insurer. In case we receive confirmation that you had lodged claim with them then we will forfeit all the benefits under section I i.e. own damage section of the policy.



WITH YOU ALWAYS



### **Transcript Letter**

1 Name (Registered Owner of the Motor Vehicle)\*: Mr MOHAMMAD YUNUS ABDUL SATTAR

2 Address For Communication\*: PLOT NO 24 GAT NO 188, INDRA PRAST COLONY, JALGAON, Jalgaon,, 425001, JALGAON, MAHARASHTRA, INDIA

3 Vehicle Details: Please refer policy schedule cum certificate

4 Fuel Type: DIESEL

**5 Insured's Declared Value:** Please refer policy schedule cum certificate.

6 Previous Insurance Particulars\*:

Policy Number\* : -- Date of Expiry\* : NA Type of Cover :

Name of the Insurer\*: NA NCB claimed: NA

Accident in the previous policy period: NA NCB in previous policy: undefined

7 Own Damage period of insurance desired from\*: NA to Midnight of NA

8 Liability period of insurance desired from\*: 01/02/2024 to Midnight of 31/01/2025

9 Compulsory PA cover for owner driver period of insurance desired from: 01/02/2024 to Midnight of 31/01/2025

10 Financier's Details: Please refer policy schedule cum certificate

11 Extra Benefits opted

Wider Legal Liability to Paid Driver (As per Workmen's Compensation Act, Fatal Accident Act & Common Law): 1
Legal Liability to Non-Fare Paying Passengers other than Statutory Liability except the Fatal Accidents Act): NA

Compulsory PA Cover for Owner Driver: Rs. 1500000 Term: 1 Years

Name of the Nominee & Age: MR ABDUL SATTAR, 58 Relationship: Father

Name of Appointee (if Nominee is Minor): NA Relationship to the Nominee : NA

12 Restriction of Cover/Discounts/Concessions/Extended Covers
Third Party Property Damage Cover restricted to 6,000/ only: NO
Vehicle is fitted with Anti Theft Device approved by ARAI: NO

13 Add on covers: Please refer policy schedule cum certificate,

14 Bank Details (Required for Refund / Claims)

Name of the Account Holder: MOHAMMAD YUNUS ABDUL SATTAR

Name of Bank & Branch:

Account Number: NA IFSC Code of Bank:

15 Declaration for No Claim Bonus: (If NCB Confirmation is not submitted but NCB claimed)

I/We declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring Policy Period (Copy of Policy enclosed). I/We further undertake that if this declaration is found incorrect all benefits under the Policy in respect of Section 1 of the Policy will stand forfeited.

16 I hereby give my consent to receive one page insurance policy.

### 17 AML Guidelines:

- 1. I/we hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002.
- 2. I understand that the Company has the right to call for documents to establish sources of funds.
- 3. The insurance company has right to cancel the insurance contract in case I am/have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

18 We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness certificate, as applicable.