



युनाइटेड इंडिया इश्यूरेस कंपनी लिमिटेड

UNITED INDIA INSURANCE COMPANY LTD.

Registered & Head Office : 24, Whites Road, Chennai 600 014
CIN - U93090TN1938GOI000108



MOTOR INSURANCE - Two Wheeler PACKAGE POLICY SCHEDULE

Policy Number :22140031180160195044
Geographical Area :India
Insured Name :R Kishore Kumar
Insured Address :

Previous Policy Number :2312100229427200000
Insurance Start Date & Time :03/09/2018 0:00 (hours)
Insurance Expiry Date & Time :02/09/2019 midnight
Policy Issuing Office Address :

No 1/406, Nesavalur Nagar, Jalladiyampettai, Medavakkam
City :CHENNAI District :CHENNAI
State :TAMIL NADU Pincode :600100
Mobile No :9566256606
Email :malarmannan@gmail.com

DO 14 GURGAON 4, NEW COLONY, ABOVE SBI,
GURGAON
City :GURGAON District :Gurgaon
State :HARYANA Pincode :122001
Office Contact Details :0124 2310260 Email Id :pb.support@uiic.co.in
Fax :0124 2300927 GSTIN :06AAACU5552C1ZN

Business Channel Code: NA
Contact No: 18002585970
IRDA License Code - Number: IRDAI/WBA21/15 - 06

Business Channel Sub Code: BRC0000907
Broker Name : Policybazaar Insurance Web Aggregator Pvt. Ltd.

VEHICLE DETAILS

Registration Number	TN07BQ5926	Engine Number	AF1AC1526549	Year of Manufacture Vehicle Weight(kg.)	2012
RTA Name	TN07 Thiruvanniyur	Chassis Number	MD625NF19C1A17199	Cubic Capacity / GVW	100
Registration Date	08/03/2012	Vehicle Make & Model	TVS - STAR CITY - STD (100 CC)	Type of Body	Two Wheeler
AA Membership Name		Seating Capacity	2	Geographical Extension	NoExtn

INSURED DECLARED VALUE (IN RUPEES)

Vehicle	Trailer	FiberGlass	Electrical /Electronic Accessories	Non-Electrical Accessories	CNG Kit	LPG Kit	TOTAL	Co-Insurance Details
12600	0	0	0.00	0.00	0.00	0.00	12600	0.00

OTHER DETAILS

Financier	Branch Name & Address	Policy Subject to IMT Endorsements/Applicable covers

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.

OTHER DETAILS

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 or liability directly or indirectly or proximately or remotely occasioned by contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or war like operations (whether before or after declaration of war), civil war, mutiny, rebellion, military or usurped power or by any direct or indirect consequence 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 (In Rupees)	DEDUCTIBLES (Under Section I) (In Rupees)						
Owner- Driver (Under section IV)	1,00,000.00	Compulsory	100.00	Imposed	0.00	Voluntary	0.00

SCHEDULE OF PREMIUM (IN RUPEES)

A-OWN DAMAGE PREMIUM		B-LIABILITY PREMIUM		TOTAL PACKAGE PREMIUM	
Basic Own Damage	90	Basic TP Liability	720	Package Premium	815
Anti Theft Device Discount		PA Owner Driver	50	GST @18.00%	147
Nil depreciation without Excess	0	PA for Unnamed persons			
Sub Total (Additions)	0	Sub Total (Additions)	0		
NCB Discount @ 50 %	45	Sub Total (Deductions)	0		
Total	45	Total	770		
				TOTAL PAYABLE PREMIUM	962
				Receipt Date	31/08/2018
				Receipt Amount	962
				Payment Mode	Online
				Paying Party	R Kishore Kumar

CHEQUE DETAIL

Cheque Number	Cheque Date	Bank Name	Branch Name	Branch Code	Cheque Signatory	MICR No
P3414239	31/08/2018	CITI			R Kishore Kumar	

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 <http://uiic.co.in/sites/default/files/uploads/downloadcenter/IndianMotorTariff.pdf>.

For terms and conditions for add on covers go to : http://uiic.co.in/sites/default/files/uploads/downloadcenter/motor_additional_covers.pdf

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. Date & Signature of Proposal: 31/08/2018 00:00:00

In Witness whereof this Policy has been signed at GURGAON this day of , Date

For United India Insurance Company Limited

CONSOLIDATED STAMP DUTY PAID VIDE
GRN NO. 32325721 DTD 28/12/2017 AND
CERT. NO. 780 DTD 28/12/2017 ISSUED BY
TREASURY OFFICER, GURGAON

Duly Constituted Attorneys

IP Address: 171.161.56.16

Print Date: 31/8/2018 13:59:40



युनाइटेड इंडिया इंश्योरेंस कंपनी लिमिटेड
UNITED INDIA INSURANCE COMPANY LTD.
Registered & Head Office : 24, Whites Road, Chennai 600 014
CIN - U93090TN1938GOI000108

मण्डलीय कार्यालय-14 (221400)
4, न्यू कॉलोनी, गुरुगांव 122001 (हरियाणा)
फोन : 0124-2321506, 2320650
टेलीफैक्स : 0124-2300927
Divisional Office-14 (221400)
4, New Colony, Gurgaon-122001 (Haryana)
Tel. : 0124-2321506, 2320650
Telefax : 0124-2300927

Claims Settlement Procedure for Policies issued by M/S Policybazaar Insurance Web Aggregator Pvt. Ltd.

Our Company has signed an agreement for Online Sale of Insurance Policies with M/S Policybazaar Insurance Web Aggregator Pvt. Ltd. Policy will be issued by DO 14, Gurgaon (Office Code 221400) under DR02, Delhi

The claims will be processed and paid by OD Service Hub, RO 2 Delhi only (220091)

All operating Offices are hereby informed that with reference to our Circular Ref. no. HO:MOT:OD:CIR:02:17 Dated on 13.06.2017 receipt of intimation for claim on policy where Policybazaar Insurance Web Aggregator Pvt. Ltd. is the intermediary, the following steps to be followed:-

Confirmation of Policy details from GC Core at local office by entering policy number.

Immediate appointment of the surveyor of the eligible category as per estimate of loss and as per Company guidelines. Wherever spot or re-inspection survey is required to be done the same may be arranged. In case of Fire/Theft/TP injury/ Death, immediate investigation to be arranged. Scanned copy of Claim Intimation, Details of Estimate of loss and Surveyor/Investigator Details to be mailed to the following email id:

email - pbclaim.uiic@gmail.com & pb.claims@uiic.co.in

Once Loss assessment is completed, the surveyor should send the survey report with all enclosures (a) to (h) mentioned below by email in a "pdf format to the above mentioned email Id's. Thereafter the following to be sent by speed post/registered post at the address mentioned below:

All the documents relating to the claim like:

- Claim Intimation,
- Estimates,
- Survey reports (Spot, Final, Re-inspection),
- Bills / Cash Memos, Receipts,
- Vehicular Documents, FIR details, Fire brigade report Investigation report,
- NEFT details,
- Previous policy copy / Pre-inspection report details to be collected from insured in case of old vehicle whereas, in case of new vehicle, copy of purchase invoice.

Address of Servicing Office:

Motor OD Service Hub
United India Insurance Co, Ltd, 1st Floor, CORE IV
SCOPE Minar, Laxmi Nagar Distt. Centre
Delhi- 110092
Phone - 011- 22526229

In case of any further clarifications, the operating offices may contact DROII Service Hub In Charge. The above mentioned instructions to be implemented with immediate effect.

पंजीकृत एवं प्रधान कार्यालय : 24, व्हाइट्स रोड, चेन्नई-600014
Regd. & Head Office : 24, Whites Road, Chennai-600014

United India Insurance Company Ltd : IRDA Reg: No : 545

Underwritten by Policy Bazaar on 31/8/2018 13:59:40

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