

Own Damage Premium (A)

SBI General Insurance Company Limited.

Servicing Office: 3rd floor, Penumadu Towers, Door # 20-3-124, Akkarampalli main road, Alipiri, TIRUPATI,

ANDHRA PRADESH (State Code:37) -517501

Private Car Insurance Policy - Package UIN -- IRDAN144RP0005V03201112

Certificate Cum Policy Schedule (FORM 51 OF THE CENTRAL MOTOR VEHICLE RULES, 1989) PAN :AAMCS8857L GSTIN: 37AAMCS8857L1ZB CIN :U66000MH2009PLC190546 IRDAI Reg:144



Amount(INR)

Policy Issued On: 16-SEP-2023 Previous Policy No.: HSB/00543645 Insured Name: MRS. GALUGU PENCHALAIAH Previous Insurer: SBI General Insurance Company Limited. H NO: 14/284/12-13 SAINATHAPURAM KADAPA ROAD S MYDUKUR KADAPA PIN: 516172 Period of Unibility Cover: 16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR)								ALCOMO LE CL
Insured Name: MRS. GALUGU PENCHALAIAH H NO: 14/284/12-13 SAINATHAPURAM KADAPA ROAD S MYDUKUR KADAPA PIN: 516172 Insured Address: ANDHRAPRADESH Customer Details MRS. GALUGU PENCHALAIAH Previous Insurer: SBI General Insurance Company Limited. Period of Own Damage: 16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR) Period of Liability Cover: 16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR) Period of Compulsory Personal Accident Cover: Name Age (Yr.) Relation	Policy No:	HYNDAIHIIB/101015			Proposal No. & Date:	HIIB931921, 06-FEB-2023		
H NO : 14/284/12-13 SAINATHAPURAM KADAPA ROAD S MYDUKUR RADAPA PIN : 516172 H NO : 14/284/12-13 SAINATHAPURAM KADAPA ROAD S MYDUKUR Period of Own Damage : 16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR)	Policy Issued On:	16-SEP-2023			Previous Policy No.:	HSB/00543645		
KADAPA PIN: 516172 Period of Liability Cover: ANDHRAPRADESH Period of Compulsory Personal Accident Cover: Customer Type PAN GSTIN Nominee Details Customer Details ADAPA PIN: 516172 Period of Compulsory Personal Accident Cover: Name Age (Yr.) Relation	Insured Name:	MRS. GALUGU PENCHALAIAH			Previous Insurer:	SBI General Insurance Company Limited.		
Insured Address: ANDHRAPRADESH Period of Compulsory Personal Accident Cover: Customer Type PAN GSTIN Period of Compulsory Personal Accident Cover: Nominee Details Period of Compulsory Personal Accident Cover: Name Age (Yr.) Relation	Insured Address:				Period of Own Damage:	16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR)		
ANDHRAPRADESH Period of Compulsory Personal Accident Cover: Customer Type PAN GSTIN Nominee Details 16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR) Name Age (Yr.) Relation					Period of Liability Cover:	16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR)		
Customer Details Nominee Details		ANDHRAPRADESH				16-SEP-2023 (00:00) To 15-SEP-2024 (1 YEAR)		
	C	Customer Type	PAN		Name in a Data ila	Name	Age (Yr.)	Relation
	Customer Details	INDIVIDUAL		NA	Nominee Details	NA	NA	NA

Vehicle Details

Make Model		Variant	Cubic Capacity	Manufacturing Year	Seating capacity	
MARUTI	DZIRE	VXI	1248.0	2018	5	
Body Type	Registration No.	RTO	Hypothecation/Lease*	Fuel Type	VIN/Chassis No.	
RIGID	AP04BZ1944	KURNOOL	NA	DIESEL	MA3CZF03SJF422924	
Vehicle IDV	Electrical Accessories	Non-Electrical Accessories	BI Fuel Kit	Total IDV	Engine No	
213,000	0	0	0	213,000	D13A-2263259	

Own Damage I Temium (A)	Ainount(IIAK)	Liability Tremum (b)	Amount(max)	
Basic Own Da	mage Premium	Basic Third Party Liability Premium	2,094	
Vehicle 3,059		Bi-Fuel Kit	0	
Non-Elec. Accessories (IMT-24)	0	Geographical Area Extension (IMT-1)	0	
Elec. Accessories (IMT-24)	0	Sub Total (Third Party Liability)	2,094	
Bi-Fuel Kit (IMT-25) 0		Personal Accident (PA) Cover		
Geographical Area Extension (IMT-1)	0	Compulsory PA Cover for Owner Driver Rs 1500000 (IMT-15)	325	
IMT 23 Premium		PA Cover for 5 Unnamed Passengers Rs 100000 Each (IMT-16)	250	
Sub Total (Basic Premium) 3,059		PA cover for Paid Driver of Rs 2 Lac (IMT±	100	
Discount/Deductibles		Sub Total PA Cover		
Voluntary Deductibles (0) (IMT-22A) 0		Legal Liability		
Anti Theft Device (IMT-10)	0	Paid Driver (IMT-28)	50	
AA Membership (IMT-8)	0	Employees (for 5 persons) (IMT±	250	
No Claim Bonus (20%)	612	Sub Total (Legal Liability)	300	
Handicapped Discount (IMT-12)	0	Net Liability Premium (B)	3,069	
Sub Total (Deductibles)	612	Total Premium (A+B)	5,814	
Total Own Damage Premium 2,44		SGST(9%)	524	
Add On Coverages (KP, PB)	298	CGST(9%)	524	
Net Own Damage Premium (A)	2,745	Gross Premium Paid	6,862	

ralid Pollution Under Control (PUC) Certificate is held on the date of
ntain a valid and affactive DLIC and/or fitness Cartificate, as applicable

2. This policy has been issued upon declaration by the Insured that a v commencement of the Policy. The insured undertakes to renew and maintain a valid and e during the subsistence of the Policy. 4. Policy issuance is subject to realization of cheque if premium is paid by cheque

6. This policy is to be read in conjunction with the Policy /Add-on wordings T&C available on the insurer website www.sbigeneral.in

5.The policy is subject to compulsory deductible of INR 1000 ,07 22) & Voluntary Deductible of INR 0

3.Geographical Area: India

Payment Mode: Cheque

Liability Premium (B)

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. Driver's 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 (ii) of

WZR FRQVHFXWLYH | HDUV SUHFHGLQI WKUHH FRQVHFXWLYH | HDUV SUHFHGLQI IXXU F 1&% LV DOORZHG SURYLGHG WKH SROLF\ LV UHQHZHG ZLWKLQ GD\V RI WKH H|SLU\ GDWH RI WKH SUHYLRXV SROLF\

Declaration on Tax Invoice 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: 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 reasons 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 2) 5(&29(5<' For legal interruption, English version will hold good.

Grievance Clause: For resolution of any query or grievance, Insured may check Grievance redressal policy at https://www.sbigeneral.in/portal/grievance-redressal or connect with the respective servicing office of insurance company. In the event of unsatisfactory response,he/she may approach the insurance ombudsman for the redressal of grievance at www.irdai.gov.in or on website of General Insurance

Council: www.gicouncil.in

HSN/SAC: 997134, Description of Service: Motor Vehicle Insurance Services, Place of Supply: ANDHRA PRADESH(State Code: 37), Insurer Invoice Number: HYNDAIHIIB/1010471

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 XI of Motor Vehicle Act, 1988. Insurance Broker Name: Hyundai India Insurance Broking Pyt. Ltd. Scan for Renewal

Corporate Office: 16th Floor, Building No. 9A, DLF Cybercity, Phase III, Gurugram, Harvana 122001 MISP Name-MDH MOTORS PRIVATE (Valid from 90 Days Prior to Expiry)

For & On Behalf of SBI General Insurance Company Limited.

Broker Code: 822 (Valid UPTO:30/05/2025) CIN No.: U66030DL2013PTC249265 GST: 06AAGCH0310P1ZP Email ID: connect@hiib.in Contact No: 0124-6833000

MISP Code-HIIB-MHY-0314 DP Name-MIDDE KUMARA SWAMY



Authorized Signatory

For Claims, Policy Servicing & Renewal, Kindly contact (MDH SWIFT VDI) at +91-7799994725