



Personal Accident Insurance ((Individual))
UIN NUMBER - IRDAN190P0002201314

Insured Name	ASHVINBHAI KANTIBHAI RAMANI		
Insured's Details		Issuing Office Details	
Customer ID	POC2152414	Office Code	: DO-IV (230400)
Address	284, SHUBHLAXMI SOCIETY NANA VARACHHA SURAT ,GUJARAT, 395006	Address	: 2ND FLOOR, KIRAN CHAMBERS, OPP J K TOWER SUB JAIL CROSSING, RING ROAD,395002
Phone No	: XXXXXX3593	Phone No	: 2336864 / 2337644
E-mail/Fax	: ramanikapil284@yahoo.com, /	E-mail/Fax	: nia.230400@newindia.co.in / 2313467
PAN No	: BDEPR4390A	S.Tax Regn. No	: AACCN4165CST178
GSTIN/UIN	: NA / NA	GSTIN	: 24AACCN4165C2ZW
		SAC	: 997133 (Accident and health insurance services)

Policy Details

Policy Number	23040042250100000363			Business Source Code	
Period of Insurance	From:02/05/2025 12:28:16 PM To: 01/05/2026 11:59:59 PM			Dev.Off level./Broker/Corp. Agent/IMF/POS/Web Aggregator	: DIRECT CODE 230400 - (1D3937242)
Date of Proposal	02-May-25			Agent/Bancassurance/Spe cified Person/CPSC User	: KAPIL KANTIBHAI RAMANI (NIAAG00055908) KAPIL KANTIBHAI RAMANI (SI00098888)
Prev. Policy no.				Phone No	: 9979343593 / 2336864 /
Client Type				E-mail/Fax	: ramanikapil284@yahoo.com, / nia230400@gmail.com, / /
Staff Discount	No			Type of Cover	: NA
Premium:	GST:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
₹ 1,539	₹ 278	₹ 1,817	₹42	RUPEES ONE THOUSAND EIGHT HUNDRED SEVENTEEN ONLY	1000008925050003 3899 - 02/05/25

Details of the Insured and/other Family members covered under the Policy: INDIVIDUAL

Sl. No	Name of the Insured	Age	Occupation	Relation	Medical Extension	Sum Insured	Risk Group
1	ASHVINBHAI KANTIBHAI RAMANI	47	Service	Self	No	840000	Risk Group I
2	MANISHABEN ASHVINBAHI RAMANI	44	Service	Spouse	No	300000	Risk Group I

Sl. No	Cumulative Bonus	Assignee Details		Physical Defects/ Details	Excess	War & Allied Cover opted		
		Amount	Name			Sum Insured	Country	Type of Period
1	0	MANISHABEN ASHVINBAHI RAMANI	SPOUSE	No / NA	0	0	NA	NA
2	0	ASHVINBHA AI KANTIBHAI RAMANI	SPOUSE	No / NA	0	0	NA	NA

Table Details: (Individual)

Sl.No	Table A	Table B	Table C	Table D
-------	---------	---------	---------	---------

Policy No. : 23040042250100000363 Document generated by EM_38727 at 02/05/2025 12:28:17 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on <https://www.newindia.co.in/portal/policyFeedbackGen>.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy Issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism, you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



	Table A	Sum Insured	Table B	Sum Insured	Table C	Sum Insured	Table D	Sum Insured
1	Yes	840000	No	0	No	0	No	0
2	Yes	300000	No	0	No	0	No	0

Sl.No	Special Conditions
1	D.O.B: 30/09/1977
2	D.O.B: 16/11/1980

Premium and GST Details

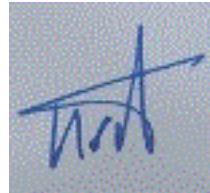
	Rate of Tax	Amount in INR
Premium		₹ 1,539
SGST	9	139
CGST	9	139
IGST	0	0

The Policy Shall be subject to PERSONAL ACCIDENT INSURANCE ((Individual)) policy clauses attached herewith IN WITNESS WHEREOF the undersigned duly authorized hereinto set his hand

Place:-

Date:-

For and on behalf of
The New India Assurance Company Limited



(MR. SANDEEP KUMAR)
[DIV MANAGER]

Duly Constituted Attorney(s)

Mudrank _____ Dt. _____ consolidated Stamp Fees Paid by Pay Order Number _____ vide receipt number _____ dt. _____.

Stamp Duty under the Policy is ₹

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.

Tax Invoice No : 23040025P0003983

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C

Policy No. : 23040042250100000363 Document generated by EM_38727 at 02/05/2025 12:28:17 Hours.
Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on <https://www.newindia.co.in/portal/policyFeedbackGen>.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy Issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.