



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

Insured Name	: ASHVINBHAI KANTIBHAI RAMANI
<b>Insured's Details</b>	
Customer ID	: POC2152414
Address	: 284, SHUBHLAXMI SOCIETY NANA VARACHHA SURAT ,GUJARAT, 395006
Phone No	: XXXXXX3593
E-mail/Fax	: ramanikapil284@yahoo.com, /
PAN No	: BDEPR4390A
GSTIN/UIN	: NA / NA
	: SAC
<b>Issuing Office Details</b>	
Office Code	: DO-IV (230400)
Address	: 2ND FLOOR, KIRAN CHAMBERS, OPP J K TOWER SUB JAIL CROSSING, RING ROAD,395002
Phone No	: 2336864 / 2337644
E-mail/Fax	: nia.230400@newindia.co.in / 2313467
S.Tax Regn. No	: AAACN4165CST178
GSTIN	: 24AAACN4165C2ZW
	: 997133 (Accident and health insurance services)

Policy Details

Policy Number	: 23040042250100000363	<b>Business Source Code</b>	
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/or 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	Relation			Sum Insured	Country	Type of Period
1	0	MANISHABEN ASHVINBAHI RAMANI	SPOUSE	No / NA	0	0	NA	NA
2	0	ASHVINBHAI 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