



POLICY SCHEDULE FOR RAASTA AAPATTI KAVACH POLICY (Group (Unnamed))

Insured Name	PRAVARA RURAL EDUCATION SOCIETY				
Customer ID	Insured's Details				
Address	PO31667390	Office Code	Issuing Office Details		
A/P PRAVARANAGAR(LONI) TAL - RAHATA DIST - AHMEDNAGAR LONI B K MAHARASHTRA 413736		Address	RAHURI BRANCH 151804 (151804)	SITAPLAZA COMPLEX, NAGAR MANMAD ROAD RAHURI,413705	
Phone No		Phone No	02426233069 / 02426233070		
E-mail/Fax	/	E-mail/Fax	/	reg.151804@newindia.co.in / 02426233070	
PAN No	AAATP2302E	S.Tax Regn. No	AAACN4165CST178		
GSTIN/UIN	NA / NA	GSTIN	27AACN4165C3ZP		
		SAC	997139 (Other non-life insurance services excl RI)		

Policy Number		Policy Details			
Period of insurance	From: 11/01/2018 11:03:07 AM To: 10/01/2019 11:59:59 PM	Business Source Code			
Date of Proposal	11-Jan-18	Dev.Off level/Broker/Corp. Agent			
Prev. Policy no.	PU0	Agent/Bancassurance			
Client Type	Non-Corporate	Phone No			
Premium:	GST:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
₹ 436932	₹ 78648	₹ 515580	₹1	RUPEES FIVE LAC FIFTEEN THOUSAND FIVE HUNDRED EIGHTY ONLY	1518048117000000 4482 - 31/01/18

Special Conditions	Limit of Hospitalisation expenses shown above is the combined limit for all the hospitalisation extensions put together.
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SI No.	No. of persons	Group Name	Benefits under the Policy: GROUP UNNAMED			Special Conditions(if any)
			Personal Accident	Sum Insured		
			Road Accident	Hospitalization expenses	Employment extension	Any other accident
1	3305	PRAVARA RURAL EDUCATION SOCIETY	100000	100000	NA	0 AS PER STANDARD POLICY TERMS AND CONDITIONS 3305 STUDENTS AS PER LIST ATTACHED

Special Conditions	Limit of Hospitalisation expenses shown above is the combined limit for all the hospitalisation extensions put together.
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The Policy Shall be subject to RAASTA AAPATTI KAVACH POLICY (Group (Unnamed)) policy clauses attached herewith
Premium and GST Details

Premium	Rate of Tax	Amount in INR
SGST	9	436932 39324

Signature Not Verified
Digitally signed
by Shrikant
Vaderkar
Date: 2018/01/31

Policy No.: 15180448176800000088 Document generated by 35565 at 31/01/2018 11:07:57 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001, TOLL FREE No. 1800 209 1415.

For fastest resolution 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>.

Consolidated Stamps fees paid by DD of Rs. 10000/- + 20000/- vide chalan no 43 and 47 dt. 01/02/14 Total Rs. 30000/- vide receipt No. 55519 and 19520 dt. 01/02/2014 and the stamp duty under the policy is Rs.



THE NEW INDIA ASSURANCE CO. LTD.
(Wholly owned by the Govt. of India)



CGST 9
IGST 0

39324
0

IN WITNESS WHEREOF the undersigned duly authorized hereinto set his hand

For and on behalf of
The New India Assurance Company Limited

Place:-
Date:-



Date of Issue: 31/01/2018

Tax Invoice No : 1518044868000088

IRDA Registration Number: 190



Policy No.: 15180448178800000088 Document generated by 35564 at 31/01/2018 11:07:07 Hours.

Regd. & Head Office: New India Assurance Bldg., 67 M.G. Road, Fort, Mumbai - 400 001, TOLL FREE No. 1 800 209 1415.

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>.



ADJUSTMENT VOUCHER

Issuing Office : RAHURI BRANCH 151804 (151804)
Address : SITAPLAZA COMPLEX,
NAGAR MANMAD ROAD
RAHURI, 413705
RAHURI
Phone : 02426233069
Email : nia.151804@newindia.co.in
Fax : 02426233070
Collection Number : 15180481170000004462
Collection Date : 31/01/2018
Business Source Code : 2D11723547
PAN No of Payer : AAATP2302E

Received with thanks from PRAVARA RURAL EDUCATION SOCIETY.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount	A/C Code	Sub A/C Code
15180448176800000088	Cash Deposit Account-151804	515580.00	5076.151804	CD0000230677

Total = ₹ 515580.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Advance Premium Deposit	515580.00	N.A.	N.A.	N.A.	N.A.	1518041710010733	33422.00

Total = ₹ 515580.00

Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
436932.00	78648.00	0.00	0
SI no.	Agency Code	Agency Name	Department Code
1	NA	M/S. PRAVARA INSTITUTE OF RESEARCH & EDUCATION,	4B

For The New India Assurance Company Limited

Date of Issue: 31/01/2018

Cashier's Initial

Note -

1. Please note the Policy Number, Collection Number and date in all future correspondence.
2. NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the instalment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

Tax Invoice No : 1518044868000088

IRDA Registration Number: 190



Signature Net
Verified
Digitally signed
by Suresh
Vasavada
Date 31/01/2018
11:07:57 IST

Policy No. : 15180448176800000088 Document generated by 35568 at 31/01/2018 11:07:57 Hours.

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