



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

Insured Name	: PRAVARA RURAL EDUCATION SOCIETY		
Insured's Details		Issuing Office Details	
Customer ID	: PO31667390	Office Code	: RAHURI BRANCH 151804 (151804)
Address	: A/P PRAVARANAGAR(LONI) TAL - RAHATA DIST - AHMEDNAGAR LONI B K MAHARASHTRA 413736	Address	: SITAPLAZA COMPLEX NAGAR MANMAD ROAD RAHURI, 413705
Phone No	:	Phone No	: 02426233069 / 02426233070
E-mail/Fax	: /	E-mail/Fax	: rah.151804@newindia.co.in / 02426233070
PAN No	: AAATP2302E	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: NA / NA	GSTIN	: 27AAACN4165C3ZP
		SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details		Business Source Code	
Policy Number	: 15180448176800000088	Dev.Off level/Broker/Corp. Agent	: M/S - PRAVARA INSTITUTE OF RESEARCH & EDUCATION, - (2D+1723547)
Period of insurance	: From: 11/01/2018 11:03:07 AM To: 10/01/2019 11:59:59 PM	Agent/Bancassurance	:
Date of Proposal	: 11-Jan-18	Phone No	: NA / NA
Prev. Policy no.	: PU0	E-mail/Fax	: / /
Client Type	: Non-Corporate		

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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Benefits under the Policy: GROUP UNNAMED							
Sl No.	No. of persons	Group Name	Sum Insured				Special Conditions(if any)
			Personal Accident	Hospitalization expenses			
				Road Accident	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 Shrinivas Vaidya  
Date: 2018.01.31

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.  
For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.

Consolidated Stamp fees paid by DD of Rs. 100000/- + 200000/- vide chalan no 48 and 47 dt. 01/02/14 Total Rs. 300000/- vide receipt No. 55519 and 19520 dt. 01/02/2014 and the stamp duty under the policy is Rs. \_\_\_\_\_





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For and on behalf of  
The New India Assurance Company Limited

Date:-

*Supri*

151804

Duly Constituted Attorney(s)

ANAND KUMAR ASSURANCE CO. LTD.

**IRDA Registration Number: 190**



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 MANIMAD ROAD  
RAHURI, 413705  
RAHURI  
Phone : 02426233069  
Email : nia.151804@newindia.co.in  
Fax : 02426233070  
Collection Number : 15180481170003004462  
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
Sl 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 Not  
Verified  
Digitally signed by  
Srinivasan  
Valasathan  
Date: 2018.01.31  
11:07:57+05'

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.

