



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

UIN NUMBER - IRDA/NL-HLT-NIA/P-H/V.1/355/13-14

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

Policy Details

Policy Number	: 15180448226800000269	Business Source Code	
Period of Insurance	: From:09/03/2023 12:00:01 AM To: 08/03/2024 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/CPSC User	: M/S. PRAVARA INSTITUTE OF RESEARCH & EDUCATION, - (2D11723547)
Date of Proposal	: 09-Mar-23	Agent/Bancassurance	:
Prev. Policy no.	: 15180448216800000544	Phone No	: NA / NA
Client Type	: Non-Corporate	E-mail/Fax	: pirem@pravara.ren.nic.in, / /

Premium:	GST:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
₹ 299,574	₹ 53,922	₹ 3,53,496	₹1	RUPEES THREE LAC FIFTY-THREE THOUSAND FOUR HUNDRED NINETY-SIX ONLY	1518048122000000 7363 - 17/03/23

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	2266	PRAVARA RURAL EDUCATION SOCIETY	100000	100000	NA	NA	HOSPITALIZATION IS REQUIRED FOR MIN 24 HOURS.DRIVING LICENSE IS COMPULSORY IN CASE OF ROAD ACCIDENT INVOLVING MOTOR VEHICLE.POLICE PAPER IS COMPULSORY IN CASE OF ROAD ACCIDENT CLAIM.

Special Conditions	Limit of Hospitalisation expenses shown above is the combined limit for all the hospitalisation extensions put together.
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Signature Not Verified
Digitally signed by JAGAT KAYEE PANIGRAHI
Date: 2023.05.03

Policy No. : 15180448226800000269 Document generated by 39622 at 03/05/2023 13:40:29 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 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>.



The Policy Shall be subject to RAASTA AAPATTI KAVACH POLICY (Group (Unnamed)) policy clauses attached herewith

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹299574
SGST	9	26961
CGST	9	26961
IGST	0	0

IN WITNESS WHEREOF the undersigned duly authorized hereinto set his hand

Place:-
Date:-

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 03/05/2023

Duly Constituted Attorney(s)

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C