



Staff -
Rs = 150/-



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	n/a. 151804@newindia.co.in / 02426233070
PAN No	AAATP2302E	S.Tax Regn. No	AAACN4166CST178
GSTIN/UIN	NA / NA	GSTIN	27AAACN4166C32P
		SAC	897139 (Other non-life insurance services excl RI)

Policy Details

Policy Number	15180448206800000179	Business Source Code	
Period of Insurance	From: 09/03/2021 04:05:26 PM To: 08/03/2022 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-21	Agent/Bancassurance	
Prev. Policy no.		Phone No	NA / NA
Client Type	Non-Corporate	E-mail/Fax	/ /

Premium:	GST:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
₹ 241536	₹ 43476	₹ 285012	₹1	RUPEES TWO LAC EIGHTY-FIVE THOUSAND TWELVE ONLY	1518048120000000 8217 - 09/03/21

Special Conditions Limit of Hospitalisation expenses shown above is the combined limit for all the hospitalisation extensions put together.

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	1827	PRAVARA RURAL EDUCATION SOCIETY	100000	100000	NA	0	AS PER STANDARD TERMS AND CONDITIONS

Special Conditions Limit of Hospitalisation expenses shown above is the combined limit for all the hospitalisation extensions put together.

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
₹241536	0	₹241536
₹21738		₹21738

Signature valid

Digitally signed by
the Insured
Date: 2021.03.09
12:00:00

Policy No. 15180448206800000179 generated by 34620 at 09/03/2021 18:13:14 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 NEW INDIA ASSURANCE CO. LTD.
(Government of India Undertaking)



CGST
IGST

0
0

21738
0

IN WITNESS WHEREOF the undersigned duly authorized hereto set his hand

Place:-
Date:-

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 09/03/2021




Duly Constituted Attorney(s)

Tax Invoice No : 15180420P0010721

IRDA Registration Number: 190