



युनाइटेड इंडिया इंश्यूरेंस कंपनी लिमिटेड
UNITED INDIA INSURANCE COMPANY LTD.
Registered & Head Office : 24, Whites Road, Chennai 600 014



UNITED INDIA INSURANCE COMPANY LIMITED

CERTIFICATE OF INSURANCE

MOTOR INSURANCE - GCV PUBLIC CARRIERS MOTORIZED 3 WHEELERS AND MOTORIZED PEDAL CYCLES LIABILITY ONLY POLICY

(FORM 51 OF CENTRAL MOTOR VEHICLE RULES 1989)

Policy No.	0115003125P111812291		Certificate Number		0115003125P111812291																										
Customer Id	23515137915		Issuing Office Address		Code 011500																										
Name of the Insured	MR VELUSAMY A		UNITED INDIA INSURANCE CO.LTD., 826, TARapore Towers,																												
Address of the Insured	INTHIRA GANDHI PURAM PUNJAI KALAMANGALAM GANAPATHIPALAYAM		ANNA SALAI, MOUNT ROAD																												
	ERODE		600002																												
Business/Occupation	638153		CHENNAI																												
	ERODE		TAMIL NADU																												
Mobile No. - *****0108			Telephone (44) 28521027																												
Effective date of commencement of Insurance for the purpose of Act from 10:48 Hrs on Insured's Declared Value ₹ 0 23/10/2025																															
Date of Expiry of the Insurance Midnight on 22/10/2026																															
Particulars of Vehicle Insured																															
Registration No.	Vehicle	Trailer (if any)	Obsolete Vehicle	Engine No.	Chassis No.	Make/Model	Type of Body	Year of Mfg	HP/Cubic Capacity	GVW																					
TN - 38 - AM - 9801			No	D36028809	T05176674D07	Force / 3 W MINIDOR(II) DI PICKUP BSII null	Open	2007	499	1350																					
Registration Authority	Geographical Area	Financier					Seating Capacity		Public / Private																						
TN38 COIMBATORE NORTH	INDIA						3		Public																						
Amount in words: Five thousand one hundred fifty-nine rupees only																															
Persons or classes of persons entitled to drive:- Any person including insured : Provided that a person driving hold an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.																															
Note:- The policy does not cover liability for death, bodily injury or damage as excluded in section 150 (2) (ii) and (iii); (b) and (c) of the Motor Vehicles Act, 1988.																															
Limitations as to use The policy covers use only under a permit within the meaning of Motor Vehicles Act, 1988 or such a carriage falling under Subsection 3 of Section 66 of the Motor Vehicles Act, 1988. The policy does not cover use for: a) Organized Racing b) Pace Making c) Reliability Trials d) Speed Testing																															
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Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto 28

I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with provisions of Chapter X & XI of M.V Act, 1988.

Date of Issue: 23/10/2025

Amount Subject to Reverse Charges-NIL

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.

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE

IGNORE IF ALREADY UPDATED.

The genuineness of the policy can be verified through "Verify Your Policy" link at

www.uiic.co.in.

For and On behalf of
United India Insurance Co. Ltd.

Duly Constituted Attorney



युनाइटेड इंडिया इंश्यूरेंस कंपनी लिमिटेड
UNITED INDIA INSURANCE COMPANY LTD.
 Registered & Head Office : 24, Whites Road, Chennai 600 014



MOTOR INSURANCE - GCV PUBLIC CARRIERS MOTORIZED 3 WHEELERS AND MOTORIZED PEDAL CYCLES LIABILITY ONLY POLICY

SCHEDULE

Policy Number : 0115003125P111812291
 Geographical Area : India(A)
 Insured Name/ID : MR VELUSAMY A/23515137915
 Insured address :

INTHIRA GANDHI PURAM PUNJAI KALAMANGALAM GANAPATHIPALAYAM ERODE
 City: ERODE District: ERODE
 State: TAMIL NADU Pincode: 638153
 Telephone: *****0108

Previous Policy Number :
 Insurance Start Date & Time : 23/10/2025 10:48 (hours)
 Insurance expiry Date & Time : 22/10/2026 midnight
 Policy Issuing Office Address :

UNITED INDIA INSURANCE CO.LTD., 826, TARAPORE TOWERS, ANNA SALAI, MOUNT ROAD ,GST No.: 33AAACU5552C1ZQ
 City: CHENNAI District: CHENNAI
 State: TAMIL NADU Pincode: 600002
 Telephone:(44) 28521027

Business Channel Code: BRC0001039000002134

Dealer Name: Agent Name: **POLICYBAZAAR INSURANCE BROKERS_3134**
 Dealer Code: Land Line No.:1800 2585970,Mobile:1111011110

VEHICLE DETAILS

Registration Number	TN - 38 - AM - 9801	Obsolete Vehicle & Chassis Number	No & T05176674D07	Gross vehicle Weight	1350
RTA Name	TN38 COIMBATORE NORTH	Vehicle Make & Model	Force / 3 W MINIDOR(II) DI PICKUP BSII null	Type Of Body	Open
Registration Date	06/06/2007	Cubic Capacity/Seating Capacity	499/3	AA Membership Name	
Engine Number	D36028809	Year Of Manufacture	2007	Geographical Extension	

INSURED DECLARED VALUE

Vehicle	Trailer	Electrical/Electronic Accessories	Non Electrical Accessories	CNG Kit	LPG Kit	Total	Co-Insurance Details
0	0	0	0	0	0	0	100%

OTHER DETAILS

Financier	Policy Subject to IMT Endorsements	Applicable Addon-covers/Services	Unique Reference Code
	28		

PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE:As narrated in the certificate of insurance attached herewith.

Name Of the CPA Nominee	Relation	Age	Name of the Appointee
NA	Spouse		NA

LIMITATIONS AS TO USE:As narrated in the certificate of insurance attached herewith.

LIMITS OF LIABILITY:As narrated in the certificate of insurance attached herewith.

EXCLUSIONS:(1)Any accidental Loss Or Damage and/or liability caused sustained or incurred outside the geographical area.(2)Any claim arising out of any contractual liability.(3)Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss.(4)Any liability of whatsoever nature directly or indirectly caused by or contributed to or by arising out of ionizing radiations or contamination by radioactivity from any nuclear fuel.For the purpose of this exception, combustion shall include any self sustaining process of nuclear fission.(5)Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.(6)Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or war like operations (whether before or after declaration of war), civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.

DEDUCTIBLES (Under Section I)							
PA Cover CSI	Owner Driver (Under Section IV)	Compulsory	500	Imposed	0	Voluntary	0

SCHEDULE OF PREMIUM

A-OWN DAMAGE PREMIUM		B-LIABILITY PREMIUM		TOTAL PREMIUM	
Gross OD(A)	₹ 0.00	B. Basic - TP	₹ 4,492.00	Premium(A+B)	₹ 4,867.00
		Total	₹ 4,492.00	CGST-Others(9%)	₹ 34.00
		Add :		SGST-Others(9%)	₹ 34.00
		Compulsory PA for Owner Driver	₹ 275.00	CGST-Basic TP(2.50%)	₹ 112.00
		LL to Paid Driver IMT 28	₹ 100.00	SGST-Basic TP(2.50%)	₹ 112.00
		Sub Total (Additions)	₹ 375.00	TOTAL PAYABLE PREMIUM	₹ 5,159.00
		Gross TP(B)	₹ 4,867.00	Stamp Duty	₹ 1.00
		Total Liability Premium	₹ 4,867.00	SAC Code	997134
				Invoice No & Date	3125I111812291 & 23/10/2025
				Receipt Number	10101150025115508157
				Receipt Date	23/10/2025
				Receipt Amount	₹ 5,159.00
				Payment Mode	
				Paying Party	MR VELUSAMY A

TERMS & CONDITIONS:As per the Indian Motor Tariff,personal copy of the same is available free of cost on request.Further the Indian Motor Tariff is also available and displayed at all United India Insurance company Offices and on Website www.uic.co.in

DISCLAIMER:The policy stands Cancelled or void in the event of Cheque Dishonored.The company can cancel the policy by sending 7 days notice in case of fraud,misrepresentation,nondisclosure of material fact or non co-operation of the insured.

IMPORTANT NOTICE:The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY".For Legal interpretation, English Version will hold good.In case of accident the insured must inform United India Insurance Co. Immediately to arrange spot survey.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date & Signature of Proposal : 23/10/2025

In Witness Whereof this policy has been signed at DO HULL DIVISION 011500 on this 23rd day of October ,2025

CONSOLIDATED POLICY STAMP
 DUTY PAID AS PER TAMILNADU
 GOVERNMENT G.O. (RT)
 No.260 dated 10.07.2025 FOR
 THE PERIOD FROM 01.04.2025
 TO 31.03.2026

For United India Insurance Company Limited

Duly Constituted Attorneys

Issuing Agent:
 Agent Location:

POLICYBAZAAR INSURANCE
 BROKERS_3134
 011500

Printed By : CUSTOMER @ 23/10/2025 12:00:44 PM
 Underwritten By - POLBRO002666 (BROKER)

Agent User Name:

POLBRO002666

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