

LIBERTY GENERAL INSURANCE LIMITED

PRIVATE CAR PACKAGE POLICY CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

IMPORTANT 1) The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque.

2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.

3) In the event of misrepresentation, fraud or non-disclosure of material facts, the company reserves the right to cancel the policy from inception. Policy issuing office: 10TH FLOOR, TOWER A, PENINSULA BUSINESS PARK, GANPATRAO KADAM MARG, LOWER PAREL, MUMBAI, MAHARASHTRA-

400013 Phone: +91 22 6700 1313 Fax: +91 22 06700 1606 Policy Servicing office: 1ST FLOOR,, SCO - 174/175,, Sector 9C, CHANDIGARH, CHANDIGARH-160009 PH: +91 172 6700 1313 Fax: +91 22 06700

1606 Policy No. 201120050220700193600000

Geographical Area India

ANIL CHANDAK **Insured**

HO.NO. 1B 114, NIIT Address

FARIDABAD,,HARYANA,FARIDABAD,FACTO

RY AREA FARIDABAD-121001

Contact Number (M) + 8744063335NA / HARYANA

GSTIN No/State UIN CODES:

IRDAN150RP0035V01201213 **RTO Location**

> **POSP Name** POSP Code Aadhar/PAN No

Period of Insurance

Policy Issued on

ECovernote Date

Covernote No

POSP Contact Number

SMC INSURANCE BROKERS PVT LTD

Agent Code IMD1002342 Agent Contact No 180026663666

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION

Year of Chassis No. | Make/Model/Type | CC/HP/GVW **Licensed Carrying** Registration Engine No. **Trailer** Trailer Chassis No. Mark & No. Manufacture of Body capacity including Driver | Registration No. MARUTI/ERTIGA/V HR-51-AR-8378 2012 1853190 O106671 1248 NA NA DI/Muv

IDV (INSURED'S DECLARED VALUE)

IDV Of Vehicle **Side Car Non Electrical Accessories Electrical & Electronics Accessories Bi-Fuel kit(CNG/LPG)** Total Value Year **Trailers** 245,353.00 0 0.00 0.00 0.00 245,353.00 1

Section I - OWN DAMAGE (A) Own Damage Premium on Vehicle and accessories **Third Party Premium Basic Cover Basic Cover** Basic OD 2466.53 DISCOUNTS UNDER OWN DAMAGE SECTION No claim bonus 25% 616.63 TOTAL OWN-DAMAGE PREMIUM (A) 1,849.90

Basic TP 3,221.00 PA BENEFITS TOTAL LIABILITY PREMIUM (B) 3,221.00 Section III - PA OWNER-DRIVER (D) PA Owner-Driver (D) 375.00 Net Premium (A+B+D)Taxable Value 5,446.00 **IGST (18%)** 980 TOTAL POLICY PREMIUM 6,426.00

Section II - LIABILITY (B)

From 00:00 Hrs of 24/07/2020 To Midnight of 23/07/2021

Zone: Zone B

23/07/2020

23/07/2020

FARIDABAD

201120050220700193600000

Hire Purchase/Lease/Hypothecated with :NA

LIMITATIONS AS TO USE -The Policy covers use of vehicle for any purpose other than: a) Hire or Reward b) Carriage of goods(other than sample of personal luggage) c) Organized racing d) Pace Making e) Speed Testing f) Reliability Trial g) Use in connection with motor trade.

DRIVERS CLAUSE

Agent Name

Persons or Classes of Person entitled to drive: Any person including the insured provided that a person driving holds 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 and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

LIMITS OF LIABILITY

Deductible under Compulsory Deductible: Under Section II-I(i) Such amount necessary to Under Section II-I(ii) 7,50,000.00 P.A. cover for 15,00,000.00 Rs 1000/- Voluntary of the policy(Death section - I meet the requirements of of the policy(Damage owner-Driver under Excess: Rs:0 Imposed of or bodily injury): section-III: CSI motor vehicle Act, 1988. to third party Excess: Rs 0/. property) Additional Excess: Rs

Subject to I.M.T Endorsement Nos. IMT 22,

NOMINATION DETAILS

TOWN WITHOUT BETHER	4.11		
Name of the Nominee	Relationship with Insured	Name of Appointee (if nominee is minor)	Relationship with the Nominee
NISHA CHANDAK	SPOUSE	NA ~~	NA

I/We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of chapter X and chapter XI of M.V.

In witness whereof this Policy has been signed at Mumbai on 23/07/2020

Receipt No:

In case of claim ,Please contact us at: Toll Free No -18002665844, Email id - care@libertyinsurance.in Insurance is the subject matter of solicitation.

Date of Issue :23/07/2020 Place: CHANDIGARH

dated 29/04/2020 issued by Main Stamp Office, Mumbai. ** Not Applicable for the State of Jammu

Consolidated Stamp duty has been paid as per letter of Authorization no. CSD/08/2020/1355/2020

Branch GSTIN: 27AABCL9950A1ZL SAC Code:997134 Description of Service:General Insurance Service

Place of Supply: HARYANA/06 IRDA Regn. No. 150

CIN No. U66000MH2010PLC209656

Tax is not payable under reverse charge by the recipient.

For Liberty General Insurance Limited

Authorised Signatory

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 be good.