

Policy No.: V8173854

Date : 16/02/2021

**Mr. SANJAY KUMAR**  
**GAYTRI PURAM,**  
**UKHALARSI,**  
**MURAD NAGAR,**  
**GHAZIABAD,**  
**UTTAR PRADESH, Pincode: 201001**  
**Telephone(Mob) : 9311207790**  
**Email Id : SANJAY0622@GMAIL.COM**  
Intermediary Name : SMC INSURANCE BROKERS PVT LTD-BRR  
FTW

**To renew SMS, REN to 9222211100**

Dear Mr. SANJAY KUMAR

Welcome to the Future Generali Experience.

We thank you for choosing Motor Secure insurance policy. Your Policy No. is **V8173854**. Motor Secure policy offers your vehicle and yourself protection against any unforeseen vehicle accidents and loss to third party property or life arising there from as per the coverage mentioned in the attached policy terms and conditions. We request you to kindly go through the same to acquaint yourself with the available coverage.

Our initiatives will provide you with the highest standards of service, convenience and quality in motor insurance.

In the unfortunate circumstances of an accident, you may notify us for a claim by sending an SMS MOTORCLAIM to 9222211100 (Standard SMS charges applicable) or by calling us at 1800-220-233/ 1860-500-3333/ 022-67837800 or email us at [fgcare@futuregenerali.in](mailto:fgcare@futuregenerali.in) or walk into any of our nearest offices.

It will always be our endeavour to constantly better your experience by innovating and evolving our basket of conveniences. We strive to deliver service which is personalized and is totally transparent. It is our aim to be with you in your time of need.

**The policy has been issued on the basis of the information provided by you. The extract of the information has been enclosed for your reference. We would request you to peruse the policy and satisfy yourself that it meets with your requirement fully.**

Please note : Transfer of benefits under this insurance policy is not automatic on the sale of the vehicle. The transferee must apply within 14 days from the date of transfer of vehicle in writing to the insurance company with full details in a duly signed fresh proposal form along with evidence of sale and transfer fees of ₹. 50/- + Goods and Service tax .

**\*\*NCB has been allowed 50% on the basis of your declaration of 'No Claims' in your expiring policy. In case, we find that this declaration is incorrect and/or false, all benefits under the Policy in respect of Section I of the policy will stand forfeited.**

We would like to assure you that the electronic copy of your policy is as authentic and valid as the physical copy and it can be used as a proof of insurance wherever required.

Once again, thank you for choosing to insure your vehicle with Future Generali and we look forward to being of service to you.

Assuring you of our best services at all times.

If undelivered, please return to:

**Future Generali India Insurance Company Limited**  
303-310, 3rd floor  
Kailash Building  
K.G. Marg  
Connaught Place  
Delhi, 110001

**For Future Generali India Insurance Co. Ltd.**



(Authorised Signatory)

Please review the communication address, email or contact nos. noted on this letter for correctness. In case of any change please contact our nearest branch or call our care lines mentioned above. This will ensure you do not miss out on 'Service Updates' and 'Renewal Reminders'.

Now you can buy Health, Personal Accident, Travel, Home, Motor insurance & also renew your Future Generali Private Car Insurance policy online. Visit us at [www.futuregenerali.in](http://www.futuregenerali.in)

For any service request please sms **SERVE** to 9222211100. To provide feedback on our service, kindly sms **HAPPY** or **UNHAPPY** to 9222211100. We will call you back.



# Tax Invoice

INSURED DETAILS			
<b>Policy Number</b>	: V8173854	<b>Address of Service Provider:</b> Off Code-12,Future Generali India Insurance Co Ltd, 303-310, 3rd floor, Kailash Building, K.G. Marg, Connaught Place, Delhi, Pincode - 110001	
<b>Invoice Number</b>	: 202007PNT0117211		
<b>Reverse Charge</b>	: No	<b>Area Code</b>	: Delhi Branch Office
<b>Name of Insured/Proposer</b>	: Mr. SANJAY KUMAR	<b>FGI State Code</b>	: 07
<b>Address</b>	: GAYTRI PURAM, UKHALARSI, MURAD NAGAR, GHAZIABAD, UTTAR PRADESH, Pincode- 201001	<b>FGI GSTIN Number</b>	: 07AABCF0191R1ZB
		<b>FGI PAN Number</b>	: AABCF0191R
<b>Place of Supply(State Code):</b>	09	<b>Intermediary Name \ Code:</b> SMC INSURANCE BROKERS PVT LTD \ 60051687	
<b>GSTIN / UIN Number</b>	: -	<b>Date of Issue / Invoice Date</b>	: 16/02/2021
<b>Period of Insurance</b>	: From 12:00 hours of 17/02/2021 To Midnight of 16/02/2022	<b>HSN</b>	: 997134
		<b>Nature of Service</b>	: General Insurance Service

Received with thanks from a sum of ₹ 1,404.00 towards Premium on the above mentioned policy.

PARTICULARS	TAX(%)	PREMIUM ( ₹ )
Gross Premium		1,190.00
Add : IGST	18%	214.20
Add : Cess		-
<b>Total (Rounded to nearest rupee)</b>		1,404.00

## NOTE :

- In case of payment by cheque, in the event of dishonour of cheque for any reason whatsoever, insurance cover provided under this receipt automatically stands cancelled from the inception irrespective of whether a separate communication is sent or not.
- Excess amount, if any, will be adjusted against subsequent policies, or will be refunded on demand.

For FUTURE GENERALI INDIA INSURANCE CO. LTD.



(Authorised Signatory)

**Note: This document is digitally signed by Sharada Ramakrishnan, Authorised Signatory of Future Generali India Insurance Company Limited on 16/02/2021**



### Future Secure Two Wheeler Insurance Policy

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE - Form 51 of the Central Motors Vehicles Rules, 1989				
<b>Policy Servicing :</b> Off Code-12, Future Generali India Insurance Co Ltd, 303-310, 3rd floor, Kailash Building, K.G. Marg, Connaught Place, Delhi, Pincode- 110001., Tel No: 011-42660300				
<b>Policy No.</b>	: V8173854	<b>Period of Insurance</b>	: From 12:00 hrs of 17/02/2021 To Midnight of 16/02/2022.	
<b>Insured</b>	: Mr. SANJAY KUMAR	<b>Covernote No</b>	: - Dated: Zone: B	
<b>Address</b>	: GAYTRI PURAM, UKHALARSI, MURAD NAGAR, GHAZIABAD, UTTAR PRADESH, 201001	<b>Intermediary Name/Code</b>	: SMC INSURANCE BROKERS PVT LTD / 60051687	
		<b>Telephone(Mob,Hom)</b>	: 9650399615/9650399615	
		<b>Email ID</b>	: syednayab@smcinsurance.com	
<b>GSTIN Number :</b>	-	<b>FGI GSTIN Number</b>	: 07AABCF0191R1ZB	
INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION				
Registration No., RTA Location	Make/Model of Vehicle	Engine No.	Chassis No.	
UP14CV3014 GHAZIABAD	HERO PASSION PRO	HL31618	MBLHA10BSFHL29449	
Year of Manufacture	Cubic Capacity	Type of Body	Seating Capacity	Premium
2015	100	Saloon	2	1,404.00
<b>DRIVERS CLAUSE :-</b> 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 Vehicles Rules, 1989.				
<b>LIMITATIONS AS TO USE -</b> As per Motor Vehicle Rules, 1989 :- The Policy covers use of the vehicle for any purpose other than: a) Hire or Reward, b) Carriage of goods (other than samples or personal luggage), c) Organized racing, d) Pace making, e) Speed testing, f) Reliability Trials, g) Any purpose in connection with Motor Trade.				
Geographical Area : INDIA				
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.				
For full details on coverage, terms, conditions and exclusions, please refer the standard policy wordings attached with this schedule.				
IMPORTANT - 1) All other Terms, Conditions and Exclusions as per attached Policy Wordings. 2) In case of payment by cheque, in the event of dishonor of cheque for any reason whatsoever, insurance cover provided under this document automatically stands cancelled from the inception irrespective of whether a separate communication is sent or not.				
**NCB has been allowed 50 % on the basis of your declaration of 'No Claims' in your expiring policy. In case, we find that this declaration is incorrect and/or false, all benefits under the Policy in respect of Section I of the policy will stand forfeited.				
Warranted that the *Vehicle insured herewith has a valid Pollution Under Control (PUC) Certificate as on the inception date of the policy. (*Not applicable for Electric Vehicles and New Non- Electric Vehicles).				
LIMITS OF LIABILITY				
Under Section II-I (i) : Death of or bodily injury - Such amount as is necessary to meet the requirements of Motor Vehicles Act, 1988		Under Section II-I (ii) : Damage to Third Party Property- ₹ 100000 /- in respect of any one claim or series of claims arising out of one event.		
Under Section III : PA Owner – Driver as per premium computation table		Compulsory Deductible Under Sec I - ₹ 100.00		
Hypothecation Agreement with:- NIL				
SPECIAL CONDITIONS – NIL				
ADDITIONAL EXCESS – NIL				
The nominee for Compulsory PA to owner driver cover is 01) Mrs Renu, aged :40 Years, Relationship : Wife, Nomination % : 100%				


**Policy No : V8173854** **Period Of Insurance : From 12:00 hrs of 17/02/2021 To Midnight of 16/02/2022**
**INSURED'S DECLARED VALUE**

For Vehicle -₹	For Non Elec Accessories - ₹	For Side Car-₹	For Elec Accessories- ₹	For Bi-Fuel Kit (CNG/LPG) - ₹	Total Value-₹
30,735	-	-	-	-	30,735

**SCHEDULE OF PREMIUM**

PARTICULARS	₹	₹
<b>A-OWN DAMAGE</b>		
Basic Premium on Vehicle	216.38	
**Less : No Claim Discount 50%	108.19	
Total Own Damage Premium (A) (rounded off)		108.00
<b>B-LIABILITY</b>		
Basic Premium including Premium for TPPD	752.00	
Add : Compulsory PA to Owner-Driver Rs. 15 lacs	330.00	
Total Liability Premium (B)		1,082.00
Total Annual Premium (A+B)		1,190.00
Total Premium for the Policy Period		1,190.00
Goods and Service Tax		214.20
Total Premium (rounded off)		1,404.00

**Class of Vehicle: Two Wheelers** **Subject to Endorsement Nos. 22 ,15 ,**

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. Act, 1988.

**For FUTURE GENERALI INDIA INSURANCE CO. LTD.**

**Receipt No : Y2369130**
**Date of Issue : 16/02/2021**
**Place of Issuance : Mumbai\***


\*Address as mentioned below

( Authorized Signatory )

**Note: This document is digitally signed by Sharada Ramakrishnan, Authorised Signatory of Future Generali India Insurance Company Limited on 16/02/2021**

**For registration of your Motor Claims SMS MOTORCLAIM to 9222211100 (Standard SMS charges applicable)**

The stamp duty of Rs. 0.50/- paid by Letter Of Authorisation No. CSD/227/2021/301/21, Dated 25/01/2021. Mudrank - 2017/C.R.97/M-1, dated 09/01/2018.

Product UIN : IRDAN132RP0016V01200708

**Infectious Disease / COVID-19 Exclusion**

Notwithstanding any provision to the contrary, this Reinsurance / Insurance excludes any loss, damage, liability, expense, fines, penalties or any other amount directly or indirectly caused by, in connection with, or in any way involving or arising out of any of the following –including any fear or threat thereof, whether actual or perceived – :

- ♦ Any infectious disease, virus, bacterium or other microorganism (whether asymptomatic or not); or
- ♦ Coronavirus (COVID-19) including any mutation or variation thereof; or
- ♦ Pandemic or epidemic, as declared as such by the World Health Organization or any governmental authority.

Dear SANJAY KUMAR,

We wish to inform you that the Insurance policy number V8173854 has been issued on the basis of the information and declaration given by you, the transcript whereof is mentioned below. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back within a period of 15 days from date of your receipt of this transcript or the policy start date whichever is earlier, failing which it will be deemed that you are satisfied with the correctness of the details mentioned below. Please be informed that this Policy shall be construed to be void ab initio/invalid in the event we find that you have not disclosed material or correct information required for the purpose of providing the below insurance cover and in case of any claim arising under the policy in such a scenario, we shall be under no obligation whatsoever to settle such claim to you and the premium paid by you under this policy shall stand fully forfeited.

Future Secure Two Wheeler Insurance Policy - TRANSCRIPT/DECLARATION		
Sr No	Insured Details	
1	Insured Name	SANJAY KUMAR
2	Registration address of the Insured	GAYTRI PURAM, UKHALARSI, MURAD NAGAR, GHAZIABAD, UTTAR PRADESH, 201001
3	Communication address of the Insured	GAYTRI PURAM, UKHALARSI, MURAD NAGAR, GHAZIABAD, UTTAR PRADESH, Pincode :- 201001
4	Residence Telephone no	
5	Mobile no	9311207790
6	Email id	SANJAY0622@GMAIL.COM
Policy Details		
7	Policy Number	V8173854
8	Risk start time and date	17/02/2021/12:00
9	Risk end date	16/02/2022
10	Renewal NCB %	50%
Vehicle Details		
11	Make and Model of vehicle insured	HERO PASSION PRO
12	Registration No	UP14CV3014
13	Engine No	HL31618
14	Chassis No	MBLHA10BSFHL29449
15	Cubic Capacity	100
16	Year of Manufacturing	2015
17	RTO where vehicle is/will be registered	GHAZIABAD
18	Seating Capacity	2
19	Date of Registration / Purchase	01/02/2016
20	Usage of the vehicle	TW
21	Fuel Type	Petrol
22	Hypothecation/Lease/Hire Purchase	
23	Bank Name	
24	Vehicle * being insured has valid Pollution Under Control (PUC) Certificate as on inception date of policy. (*Not applicable for New Vehicle)	Yes
Previous Insurance Details		
25	Previous Insurer Name	IFFCO Tokio General Insurance Co. Ltd.
26	Expiring Policy No	MC905264
27	Expiring Policy Expiry Date	16/02/2021
28	No Claim Bonus % under expiring policy	45.00 %
29	Is there any claim in expiring policy	N
IDV Details		
20	Vehicle IDV on Renewal	₹.30,735
31	Electrical Accessories IDV	₹.0
32	Non Electrical Accessories IDV	₹.0
33	CNG IDV	₹.0
34	Add on Plan	Not Applicable
Third Party Coverages Opted		
35	Basic Premium including Premium for TPPD	Opted

36	Add:-Trailers	Not Opted
37	Less : Limit of Liability under sec II-1(ii)-₹. 6000	Not Opted
38	Add : Bi-Fuel Kit (CNG/LPG)	Not Opted
39	Add : Geographical Area Extn	Not Opted
40	Add : Compulsory PA to Owner-Driver ₹. 15 lacs	Opted
41	Add : PA to persons other than Owner/Driver (No. of persons 0)PA Limit ₹.0 per person.	Not Opted
42	Add : PA to Drivers/Cleaner/Conductors (No. of persons 0) PA Limit ₹ 0 per person.	Not Opted
43	PA to Named Persons other than Owner Driver As per Annexure attached	Not Opted
44	Add : Legal Liability to Paid Driver/Cleaner/Employees (No. of persons 0)	Not Opted
45	Add : Legal Liability to (No. of persons 0)	Not Opted
46	Add : Increased Limit of Liability under sec II-1(ii)-₹. 7.5lacs	Not Opted
<b>Own Damage Coverages Opted</b>		
47	Basic Premium on Vehicle	Opted
48	Add : Non-Electrical Accessories	Not Opted
49	Add : Electrical/Electronic Accessories	Not Opted
50	Add : Bi-Fuel Kit (CNG/LPG)	Not Opted
51	Add : Trailers	Not Opted
52	Add : Geographical Area Extn	Not Opted
53	Add : Embassy Loading	Not Opted
54	Add : Fibre Glass Tanks	Not Opted
55	Add : Driving Tutions	Not Opted
56	Add : Rallies	Not Opted
57	Less : Anti Theft	Not Opted
58	Less : Vehicles Specially Designed/Modified For Handicapped Persons	Not Opted
59	Less : Use confined to own premises	Not Opted
60	Less : Automobile Association Membership	Not Opted
61	Less : Vintage Car	Not Opted
62	Less : Voluntary Deductible-₹. 0	Not Opted
63	Add : Add-on Premium	Not Opted
<b>Nominee Details</b>		
64	Nominee Name	Mrs Renu
65	Nominee Relationship with Insured	Wife
66	Nominee Age in Y or M	40Y
67	Nominee %	100
68	Appointee Name	-
69	Relationship of Appointee with Nominee	-

On examination of the Policy, if you notice any mistake, please return the Policy to the Company immediately for correction. Any modification(s) in the policy resulting in additional premium, will be applicable from the inception of the policy and this has to be paid by you immediately to keep the policy coverage intact.

In case of Disagreement or objection or any changes with respect to information and contents mentioned hereinabove, please contact our Help Line numbers & register your objections/changes/disagreement to the contents of this transcript or you may also send us email or written correspondence at the below address within a period of 15 days from date of receipt of this transcript or the policy start date whichever is earlier.



## ENDORSEMENTS

(Attached to and forming part of policy)

### IMT.15. PERSONAL ACCIDENT COVER TO THE INSURED OR ANY NAMED PERSON OTHER THAN PAID DRIVER OR CLEANER

**(Applicable to private cars Including three wheelers rated as private cars and motorized two wheelers with or without side car [not for hire or reward])**

In consideration of the payment of an additional premium It rs hereby agreed and understood that the Company undertakes to pay compensation on the scale provided below for bodily Injury as hereinafter defined sustained by the insured person in direct connection with the vehicle insured or whilst mounting and dismounting from or traveling in vehicle Insured and caused by violent accidental external and visible means which independently of any other cause shall within six calendar months of the occurrence of such Injury result In:-

Details of Injury	Scale of Compensation
i) Death	100%
ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
iii) Loss of one limb or sight of one eye	50%
iv) Permanent Total Disablement from injuries other than named above	100%

#### Provided always that :-

(1) compensationshall be payable under only one of the items (i) to (iv) above In respect of any such person arising out of any one occurrence and total liability of the insurer shall not in the aggregate exceed the sum of Rs. ....\*during any one period of insurance in respect of any such person.

(2) no compensation shall be payable in respect of death or Injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) Intentional self Injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person Is under the influence of Intoxicating liquor or drugs.

(3) Such compensation shall be payable only with the approval of the insured named in the policy and directly to the injured person or his/her legal representative(s) whose receipt shall be a full discharge In respect of the Injury of such person.

Subject otherwise to the terms exceptions conditions and limitations of this policy.

\*The capital Sum Insured (CSI) per passenger is to be inserted.

### IMT.22. COMPULSORY DEDUCTIBLE

**(Applicable to Private Cars, three wheelers rated as private cars,all motorized two wheelers, taxis, private car type vehicle plying for public / private hire, private type taxi let out on private hire)**

Notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insured shall bear under Section 1 of the policy in respect of each and every event (including event giving rise to a total loss/constructivetotal loss) the first Rs. ....\* (or any less expenditure which may be incurred) of any expenditure for which provision has been made under this policy and/or of any expenditure by the insurer in the exercise of his discretion under Condition no ....\*\* of this policy.

If the expenditure incurred by the insurer shall include any amount for which the insured is responsible hereunder such amount shall be repaid by the insured to the insurer forthwith.

For the purpose of this Endorsement the expression "event" shall mean an event or series of events arising out of one cause in connection with the vehicle insured in respect of which indemnity is provided under this policy.

Subject otherwise to the terms conditions limitations and exceptions of this Policy.

\* (i) to insert amount as appropriate to the class of vehicle insured as per GR. 40 of the tariff.

(ii) in respect of a vehicle rated under the Tariff for Private Car and in respect of a motorized two wheeler not carrying passengers for hire or reward, if any deductible in addition to the compulsory deductible provided in this endorsement is voluntarily borne by the insured, the sum representing the aggregate of the compulsory and the voluntary deductibles is to be inserted.

\*\* to insert Condition no 3 in respect of a vehicle rated under Tariff for Private Car / Two wheelers or Condition no 4 in respect of a vehicle rated under the Tariff for Commercial Vehicles.