





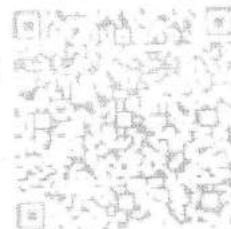
DL 1N 5349

DL 1N 7060





TRANSPORT DEPARTMENT, GNCT OF DELHI
STATE TRANSPORT DEPARTMENT RAJPUR ROAD/BURARI
FORM 38



[See Rule 62(1)]

CERTIFICATE OF FITNESS

(Applicable in the case of transport vehicles only)

Vehicle No DL1N5349 (Motor Cab) is certified as complying with the provisions of the Motor vehicles Act, 1988 and the rules made there under.

Certificate will expire on : 30-Nov-2017

Next Inspection Due Date :

Inspection Fee Receipt No : DL51R16120001282

Receipt Date : 01-Dec-2016

Chassis No : MBJ11JV4007369155

Engine No : 2KDU154832

Seating Capacity : 7 (Including Driver)

Registration No : DL1N5349

Manufacturing Year : 2012

Inspected on : 01-Dec-2016

Inspected by

: KAILASH NATH SONE

Type of Body

Category of Vehicle

Inspected by

Printed on

: SALOON

: LPV

: ANIL KUMAR

SCHDEVA

: 01-Dec-2016 13:42:54



Signature and Designation
of Issuing Authority
RAJPUR ROAD/BURARI

POLICY SCHEDULE

Certificate & Policy Number : VC00121189000100

Period of Insurance : From 00:00:00 Hrs of 27/11/2016 To Midnight of 26/11/2017

Name and Address of the Insured:

CARZONRENT INDIA PVT. LTD.
E-1, 9TH FLOOR,
VIDEOCON TOWER,
JHANDEWALAN EXTN.
NEWDELHI 110055
Business or Profession business

IntermediaryCode BR119001

**IntermediaryName Aon Global
Insurance Brokers Pvt Ltd**

Contact

Carrying on or engaged in the business or occupation of and no other for the purposes of this Insurance

The Vehicle

Registration Mark & Number	Engine Number & Chassis Number	Make & Model	Type Of Body	Cubic Capacity	Year of Manufacture	Maximum licensed carrying capacity including Driver	IDV (Insured's Declared Value) (in Rs.)
DLIN5349	2KDU154832 MBJ11JV4007369155	Toyota Innova GX	Closed	2494	2013	7	738,715.00

Geographical Area : India

Name of Registration Authority : NEWDELHI ,

LIMITATIONS AS TO USE: As per Motor Vehicles Rules, 1989

DRIVER:

Any person including the Insured:

Provided that a person driving holds an effective driving licence at the time of the accident and is not disqualified from holding or obtaining such a licence.

Provided also that the person holding an effective learner's licence may also drive the vehicle may also drive the vehicle when not used for the transport of passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of The Central Motor Vehicles Rules 1989.

LIMITS OF LIABILITY:

Under Section II-1(i) of the Policy - Death of or bodily injury

Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988

Under Section II-1(ii) of the Policy - Damage to Third Party Property

Rs.7,50,000/- in respect of any one claim or series of claims arising out of one event

Personal Accident Cover for Owner - Driver under Section IV : Capital Sum Insured (CSI) : Rs. 2,00,000 / -

Deductible under Section -I : Rs 1,000.00/-

Additional Towing Charges opted for Rs.0.00 (in addition to the limit already provided under standard package policy)

NO CLAIM BONUS

The insured is entitled for a No Claim Bonus (NCB) on the Own Damage Section of the policy, if no claim is made or pending during the preceding year(s), as per the following table:

Period of Insurance	% of NCB on OD premium
The preceding year	20
Preceding Two consecutive years	25
Preceding Three consecutive years	35
Preceding Four consecutive years	45
Preceding Five consecutive years	50

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

Signed at : on : 18/01/2017

For Royal Sundaram General Insurance Co. Limited



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Authorised Signatory

To prefer a claim in the event of accidental damage to your vehicle, JUST CALL US @ From 08.00 to 20.00 Hrs Monday – Saturday - (Karnataka) – 9845511123, Tamilnadu- 9940611123-(Kerala)- 9995311123- Andra - 99493 11123, North - 99102 11123, East - 98313 11123 and Maharashtra- 98190 11123, Gujarat-99741 11123. For Mon - Sat 8.00 pm to 8.00 am / Sunday and Holidays - 24 Hrs".99404 41414

PREMIUM COMPUTATION TABLE

Policy No.	INSURED'S DECLARED VALUE in Rs					
VC00121189000100	For the Vehicle	For trailers	Non electrical accessories	Electrical/ Electronic accessories	Value of CNG kit	Total Insured's Declared Value
	738,715.00	0.00	0.00	0.00	0.00	738,715.00
A. OWN DAMAGE			B. LIABILITY			
Basic premium on Vehicle and Accessories			Basic premium including premium for TPPD			
Vehicle & Non Electrical Accessories	Rs.	43,584.00	Vehicle		Rs.	11,144.00
Electrical & Electronic accessories @ 4% (Endt. IMT-24)	Rs.	0.00	Discount for Statutory TPPD		Rs.	0.00
Bi-fuel kit (CNG) @ 4% / Inbuilt CNG Kit -Endt. IMT-25	Rs.	0.00	Passenger Liability Premium		Rs.	7,098.00
Total	Rs.	43,584.00	Bi-fuel kit (CNG) Endt. IMT-25		Rs.	0.00
			Hire or Rewards Endt. IMT-44		Rs.	0.00
			Total		Rs.	18,242.00
Add:			Add:			
a) Trailer	Rs.	0.00	Personal Accident Benefits			
b) Overturning Risk	Rs.	0.00	a) Under Section IV		Rs.	0.00
c) Geographical Area Extn. (Endt. IMT-1)	Rs.	0.00	b) PA to Paid Driver/ Cleaners (IMT 17)		Rs.	0.00
d) Driving Tution – 60% of OD	Rs.	0.00	Legal Liability			
e) Fibre glass Tanks	Rs.	0.00	c) To Paid Driver/ Cleaner (IMT 40)		Rs.	50.00
f) Addl Pre-Tyres & Mudguards	Rs.	0.00	d) Legal Liability Employee(IMT 29)		Rs.	0.00
g) Towing Charges	Rs.	0.00	e) NFPP - Employees (IMT 37)		Rs.	0.00
h) for any other extra			f) NFPP-NonEmployees(IMT 37 A)		Rs	0.00
Sub Total (Additions)	Rs.	0.00	f) for any other extra			
Less:			Sub Total (Additions)		Rs.	50.00
i) Discount for Anti-theft Devices (Endt. IMT-10)	Rs.	0.00				
j) Discount for Voluntary Deductible of Rs.0 (IMT 22 A)	Rs.	0.00				
k) Deduct 35.00% NCB	Rs.	-15254.00				
Sub Total (Deductions)	Rs.	-15,254.00	TOTAL LIABILITY PREMIUM (B)		Rs.	18,292.00
Add:			PACKAGE PREMIUM (A + B)		Rs.	46,622.00
0.00 % Underwriter Loading	Rs.	0.00	Add: 0.00 % Underwriter Loading		Rs.	0.00
Add: Additional Cover for Package Policies			Less : Special Discount		Rs.	0.00
1) Depreciation Waiver Clause (RSMOAC501)	Rs.	0.00				
2) Windshield Glass Clause (RSMOAC502)	Rs.	0.00				
TOTAL OWN DAMAGE PREMIUM (A)	Rs.	28,330.00	NET PREMIUM		Rs.	46,622.00
			Add: Service Tax		Rs.	6,527.00
			Add: Educational Cess			233.00
			TOTAL PREMIUM PAYABLE		Rs.	53,615.00
Subject to IMT Endt. Nos. & Memorandum 7/22/38/40			Printed herein /attached hereto			
Under Hire Purchase / Hypothecation /Lease Agreement with			HDFC BANK LTD.			
Date and signature of proposal 25/11/2016			Day of 18/01/2017			
In Witness whereof this Policy has been signed at			Receipt No & Date NEWDELHI			
In lieu of Cover Note No.			Date			
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”.						
Consolidated Stamp Duty Paid to Govt of TamilNadu						

For Royal Sundaram General Insurance Co. Limited



Authorised Signatory

For Legal interpretation, English version will hold good.

Service Tax No. AABCR7106GST001

PAN Number : AABCR 7106G

To prefer a claim in the event of accidental damage to your vehicle, JUST CALL US @ From 08.00 to 20.00 Hrs Monday – Saturday - (Karnataka) – 9845511123, Tamilnadu- 9940611123-(Kerala)- 9995311123- Andra - 99493 11123, North - 99102 11123, East - 98313 11123 and Maharashtra- 98190 11123, Gujarat-99741 11123. For Mon - Sat 8.00 pm to 8.00 am / Sunday and Holidays - 24 Hrs".99404 41414

CERTIFICATE OF INSURANCE
Passenger Carrying Vehicle

Policy No. **VC00121189000100**

Certificate No. **VC00121189000100**

Particulars of Vehicle insured:

Registration Mark & Number	Engine Number & Chassis Number	Make & Model	Year of Manufacture	Type of Body	Cubic Capacity	Maximum licensed carrying capacity including Driver	Net Premium (in Rs.)
DL1N5349	2KDU154832 MBJ11JV4007369155	Toyota Innova GX	2013	Closed	2494	7	53,615.00

Geographical Area : India

Name of Registration Authority : NEWDELHI

Name & Address of the Insured : **CARZONRENT INDIA PVT. LTD.
E-1, 9TH FLOOR, VIDEOCON TOWER,
JHANDEWALAN EXTN.
NEWDELHI
110055**

Effective date & time of Commencement of Insurance for the purpose of Act : From **00:00:00** hrs on **27/11/2016**

Date of expiry of the Insurance : **Midnight** on **26/11/2017**

Persons or Classes of Persons entitled to drive:

Any person including Insured:

Provided that a person driving holds an effective driving licence at the time of the accident and is not disqualified from holding or obtaining such a licence.

Provided also that the person holding an effective learner's licence may also drive the vehicle when not used for the transport of passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of The Central Motor Vehicles Rules 1989.

LIMITATIONS AS TO USE:

The Policy covers use only under a Permit within the meaning of the Motor Vehicles Act, 1988 or such a carriage falling under Sub-section 3 of Section 66 of the Motor Vehicles Act, 1988.

The Policy does not cover use for

- Organised racing,
- Pace Making
- Reliability trails
- Speed testing
- Use whilst drawing a trailer except the towing (other than for reward) of any one disabled Mechanically propelled vehicle.

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 the Motor Vehicles Act, 1988.

Signed at on : 18/01/2017

For Royal Sundaram General Insurance Co. Limited



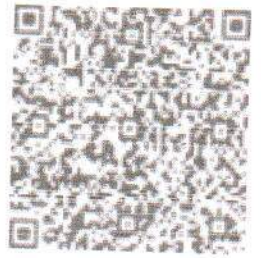
Authorised Signatory

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To prefer a claim in the event of accidental damage to your vehicle, JUST CALL US @ From 08.00 to 20.00 Hrs Monday – Saturday - (Karnataka) – 9845511123, Tamilnadu- 9940611123-(Kerala)- 9995311123- Andra - 99493 11123, North - 99102 11123, East - 98313 11123 and Maharashtra- 98190 11123, Gujarat-99741 11123. For Mon - Sat 8.00 pm to 8.00 am / Sunday and Holidays - 24 Hrs".99404 **41414**

TRANSPORT DEPARTMENT, DELHI

RAJPUR ROAD/BURARI



RENEWAL OF AUTHORISATION CERTIFICATE

1. National Permit Authorization No
2. Name Of The Permit Holder
3. Address
4. Registration Mark of the Vehicle
5. Maker/Model
6. Date of Registration
7. Chassis Number
8. Engine Number
9. Type of Vehicle :
10. GVM(in Kgs)
11. Unladen Weight(in Kgs)
12. Seating Capacity

DL/51/AUTH/AI/2016/22887
CARZONRENT INDIA PVT LTD
E-4 JHANDEWALAN EXTN RANI JHANSI ROAD NEW
DELHI, Delhi -110055
DL1N5349
TOYOTA KIRLOSKAR MOTOR PVT LTD/INNOVA
01-DEC-2012
MBJ11JV4007369155
2KDU154832
Motor Cab
2300
1655
7

Validity of this Authorization

From: 03-DEC-2016 To: 02-DEC-2017

10. Number and Description of Permit already held

- a). Permit No
- b). Validity of Permit

CC/ALL/DL/04916/03122012
From: 03-DEC-2012 To: 02-DEC-2017

Date: 18-NOV-2016



REGN . NO : DL1N 5349

REG. DT: 01/12/2012
CH. NO : MBJ11JV4007369155
E NO : 2KDU154832

O SNo : 01
MFG CD : TOYOTA
COLOUR : SILVER
CLASS : RENT C

NAME : CARZONRENT INDIA PVT LTD
SW/D OF : NA
ADDRESS: E-4 JHANDEWALAN EXTN RANI JHANSI
ROAD
NEW DELHI
DELHI

110055

MODEL : INNOVA
BODY : SALOON
WHEEL BASE : 2750
MFG.DT. : 10/2012
FUEL : DIESEL
REG.UPTO : 30/11/2027
TAX UPTO : 31/10/2022

NO. OF CYL : 4
UNLADEN WT : 001655
SEATING C : 7
STANDING C : 00
CU.CAP : 2494

Registering Authority
AR TAXI UNIT BURARI



Signature

प्रदूषण नियंत्रित प्रमाण पत्र POLLUTION UNDER CONTROL CERTIFICATE

परिवहन विभाग दिल्ली सरकार
TRANSPORT DEPARTMENT GOVT. OF NCT OF DELHI
D311002247

संख्या :
S. No.

DL1N5349

प्रमाणित किया जाता है कि
इस वाहन का धुम्र घनत्व
स्तर केन्द्रीय मोटर वाहन नियम,
1989 के नियम 115 (2) (ग) में
निर्धारित स्तर के अनुसार है।

मुक्त त्वरण विधि द्वारा निर्धारित धुम्र घनत्व सीमा 65% HSU
Prescribed Smoke Density Limit Acceleration 2.45 l/M

1088

3098

प्रमाणपत्र संख्या :

P.U.C.C. No. toyota
DL

वाहन पंजी० संख्या :

Vehicle Reg. No. RENT CAB

मेक

Make

car

मॉडल

Model

वर्ग

Category

12/2012

वर्ष

Year

DIESEL

BS-4

ईंधन

Fuel

05-12-2015

दिनांक

Date

09:47:34 AM

समय

Time

04-12-2016

वैधता

Valid upto

यदि आपकी कोई शिकायत
या टिप्पणी है तो कृपया पीछे छपे
प्रारूप के अनुसार

In case of any
Complaint, please send
your response as per form
given overleaf.

हस्ताक्षरकर्ता :

Authorised Signatory

नाम

Name :



अधिकृत केन्द्र कोड
Authorised Centre Code

D 3 1 1

Bhagwati Filling Station
Jharoda Majra, Main Burari Road,
Opp. Transport Authority, Delhi -84

MOTOR INSURANCE COVER NOTE

PASSENGER CARRYING VEHICLE

IRDA Reg no-115

Cover Note No.: **PCV 12421071**
Not Valid if issued after 31st December 2015.

Customer Copy

The Insured, described in form '52' referred to below, having proposed for insuranc in respect of the Motor Vehicles(s) described therein and having paid the sum of Rs. _____ as premium, the risk is hereby held covered under the terms of the Company's usual form ofPolicy applicable thereto (Subject to any Special Conditions mentioned below) unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the premium otherwise payable for such insurance shall be charged for the time the Company had been at risk.

Class of Vehicle: Please refer overleaf to establish your vehicle class.

Make of Vehicle TOYOTA	Model of Vehicle INNOVA	Year of Manufacturing 2013	Cubic Capacity 2500	Seating capacity & Licensed Passenger carrying capacity 8	Insured's Declared Value (IDV) Chassis Rs. 820794/- Body Rs. DELHI	Accessories	Date of Registration
Premium: Rs. 70594/-	GVW	R.T.O. Authority	Date of Purchase				
Engine No.: 2KDU154832	Type of Business: <input type="checkbox"/> New <input type="checkbox"/> Roll Over <input type="checkbox"/> Renewal <input type="checkbox"/> Used						
Chassis No.: MTBJ111V4007369155	Value of Trailer, if any Rs.						
Additional Risks, If any:		Trailer Chassis No.:					
Special Conditions: (Details of hypothecation/hire purchase/lease)							

Your policy will be dispatched at the below mentioned address. If the below address is incorrect or incomplete please call us at the call centre number mentioned below or email us at customersupport@icicilombard.com. Your correct and complete address will help us to reach you faster.

(Use Block Letters) **Form 52 (India) (See Rule 142 (I) Of Central Motor Vehicle Rules 1989)**

1. Registration mark and number and description of the vehicle Insured DL IN 5349		CORRESPONDENCE ADDRESS (Where the Vehicle Is Normally Kept)	
2. Name: CHANDRASEKANT INDIRA PV LTD			
Flat/Building: E-1, 9TH FLOOR			
Street/Road/Sector: VIDHAN MANDAL			
Area/Village/Taluka: LAHNDWALAN EXIM			
Landmark: NEW DELHI			
City: DELHI		City:	
State: DELHI		State:	
Mobile No.: 8860 631264		Email:	
3. Effective date and time of commencement of insurance for the purpose of the Act Time: 26/11/2015		Date: 26/11/2015	
4. Date of expiry of insurance Midnight of: 26/11/2016		Vehicle Sub-class:	
5. Compulsory Personal Accident Cover for owner driver Do you have a Valid Driving Licence? <input type="checkbox"/> YES <input type="checkbox"/> NO		Policy Class:	
6. Persons or classes of persons entitled to drive Any person including Insured: Provided that a person driving holds an effective driving licence at the time of the accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective learners licence may also drive the vehicle and such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules 1989.		Name of the Nominee & Age: Relationship: Number of persons in vehicle (if more than one): Relationship to the nominee:	
7. Any Limitations as to use of the Motor Vehicle		Please refer to the reverse side for limitations.	

This cover note is valid for a period of sixty days from the date of issue.

Date of issue: _____

I/We hereby certify that this Cover Note is issued in accordance with the provisions of chapter XI of the Motor Vehicles Act, 1988.

N.B.: THIS COVER NOTE IS NOT VALID TO CONSIDERATION BEING RECEIVED IN CASH.
In the event of dishonour of cheque, insurance cover provided under this document automatically stands Cancelled from inception irrespective of whether a separate communication is sent or not.

Consent
Authorised Signatory

Registered Office: ICICI Lombard House, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai - 400 025.
Mailing Address: ICICI Lombard General Insurance Company Limited, 4th Floor, Interface 11, Office No. 401 & 402, New Linking Road, Malad (W) Mumbai 400 064.

TO REGISTER A CLAIM

CALL OUR TOLL FREE NUMBER
1800 2666

OR
SMS "CLAIM" TO 575758 TO
RECEIVE A CALL FROM OUR EXECUTIVE

You can also email us at customersupport@icicilombard.com or make a claim by giving immediate notice in writing to the company.

Sr. No. TPT/2014-15/ 0920731

Form 38

[See Rule 62 (1)]

TRANSPORT DEPARTMENT

Govt. of National Capital Territory of Delhi

Inspection Unit, Burari

Delhi - 110084

CERTIFICATE OF FITNESS

(APPLICABLE IN THE CASE OF TRANSPORT VEHICLES ONLY)

It is certified that the Vehicle for which details are given below is complying with the provisions of the Motor Vehicles Act, 1988 and the rules made thereunder.

The certificate will expire on

Inspection Receipt Number

04-12-2016

Receipt Date

BR668772

Vehicle Number

05-12-2015

Chassis Number

DL1N 5349

Engine Number

MBU11JV4007369155

Type of Body

2KDU154832

Wheelbase: 2750

Seating Capacity including Driver

SALOON

Manufacturing Year

8 + 1 (D)

Category of Vehicle

2000 (Gross Wt in Kgs)

PUC Number

RENT CAB
BHARATI

Fuel: DIESEL

Remarks if any

D3119774

Date of Issue

AITP

Tax Clearance Number

05-Dec-2015

Tax Clearance Date

Certificate of Fitness Sr. No.

TCR/HQ/2010/0402

31-10-2022

512150731



S.K. Chandra

Anil Kumar Sachdeva


Jaipur

STATE TRANSPORT AUTHORITY
TRANSPORT DEPARTMENT GNCT OF DELHI
All India Permit for Tourist Transport Operations
FORM 47
(See Rule 83 (2) of CMVR 1989
Authorisation for Tourist Permit

Authorisation No: AT/LPV/DL/03230/03122012

Dated: 26-11-2015

The authorisation is valid throughout the territory of India / in the State(s) of :-

1. Name of Permit Holder : CARZONRENT INDIA PVT LTD
Address of Permit Holder:  : E-4 JHANDEWALAN EXTN RANI JHANSI ROAD
NEW DELHI
DL 110055
2. Registration Mark of the motor vehicle and Maker : DL1N 5349 Reg. Date : 01-12-2012
: TOYOTA KIRLOSKAR MOTOR LTD
3. Year of manufacture : 2012
4. Engine number of the motor vehicle : 2KDU154832
5. Chassis number of the motor vehicle : MBJ11JV4007369155
6. Permit number of the motor vehicle : CC/ALL/DL/04916/03122012
7. Name of the permit issuing authority : (STA, DELHI)
8. Date expiry of the permit : 02-12-2017
9. Gross vehicle weight of the motor vehicle : 2300
10. Unladen weight of the motor vehicle : 1655
11. Seating capacity of in case of tourist vehicle : 6 + ONE
12. Period of validity of the authorisation From : 03-12-2015 to 02-12-2016

Printed On: 26-11-2015

Dealing/ Designation :
rchopra

Signature and designation with seal
of the Transport Authority



Jaipur
standing at Delhi

Ref. No. 3991646
Date: Dec 15, 2015

3991646-FIRST FLIGHT-7383-20-NI

B991Z2075879

CARZONRENT INDIA PVT. LTD
E-1,9TH FLOOR ,VIDEOCON TOWER
JHANDEWALAN EXTN
NEW DELHI
DELHI 110055
Mobile No: 8860631264

Sub: Risk Assumption Letter

Dear Sir/Madam,

Thank you for choosing ICICI Lombard General Insurance Company Limited (ICICI Lombard) as your preferred service provider.
Please find enclosed Policy No. **3004/96282950/01/000**, which has been issued based on the below mentioned details:

Insured & Vehicle Details

Name of Insured	CARZONRENT INDIA PVT. LTD
Period of Insurance	Nov 27, 2015 to Nov 26, 2016
Vehicle Make / Model	TOYOTA / INNOVA GX 7STR
RTO City	DELHI-NEW DELHI-C1-C4-2WD-4WD
Vehicle Registration No.	<u>DL-1N-5349</u> ✓
Vehicle Registration Date	Nov 27, 2013
Engine No.	2KDU154832
Chassis No.	MBJ11JV4007369155
Current Year NCB(%)	25%

Previous Policy Details

Previous Policy No.	3004/96282950/00/000
Previous Policy Period	Nov 27, 2014 to Nov 26, 2015
Previous Year NCB(%)	20%
Previous Insurer Name	ICICI LOMBARD
Previous Policy Type	Comprehensive Package

The information provided above is based on the information received from you and accordingly, the policy has been processed. Coverage of risk is subject to realisation of the full premium, post which, insurance coverage under the policy would commence. In case the premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

If you require any changes in the Certificate of Insurance cum Policy Schedule, you are requested to inform us by writing to customersupport@icicilombard.com or calling our 24 hour toll free helpline on 1800 2666. Absence of any communication within a period of 15 days of the date mentioned on this letter, would mean that the issued policy is in order and as per your proposal.

The information provided is merely illustrative and shall not be construed to be an evidence of existence of a contract of insurance. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered null and void without the same.

Sincerely,
For ICICI Lombard General Insurance Company Ltd.


Authorised Signatory

In case of a claim, immediately notify ICICI Lombard General Insurance Company Limited on the
Toll Free Number **1800 2666** or SMS "**CLAIM**" to **575758**

For quick reference during emergencies, we recommend that you save the policy details and the contact numbers 1800 2666(Toll Free)/09223622666(Chargeable)
on your easily accessible mobile handset.