

## Go Digit General Insurance Ltd.

Digit Two-Wheeler Policy - Bundled



UIN No.: IRDAN158RP0009V02201819

Name	TIRTH HASMUKHLAL SHAH	Vehicle Registration No.	GJ09DF8609
		Partner Name:	Direct
Address	A 21 KALIDEVI PARK DOLAT VILAS,MAHAVIRNAGAF	3	1011868
	TA HIMATNAGAR,SABARKANTHA-383001	Partner Code:	
Mobile	xxxxxxxxx0059	Partner Mobile No.	7433003226
Email	ixxxxxxx1@gxxxl.com	Partner Email	support@godigit.com
Aadhar No		For Claims contact us at	1800-258-5956

### YOUR POLICY DETAILS

Policy No.	D013326315 / 22022020 <b>Policy Issue Date</b> 22-	-Feb-2020 <b>Invoice No.</b> IA060557891	Invoice Date
Period of Poli	cy Own Damage Cover and Add On(s) if Opted	d Third Party Liability Cover	PA Owner Driver
From	22-Feb-2020 12:42:15	22-Feb-2020 12:42:15	22-Feb-2020 12:42:15
То	21-Feb-2021 23:59:59	21-Feb-2025 23:59:59	21-Feb-2021 23:59:59
Compulsory Deductible	100	NCB % (Current Policy)	
Voluntary Deductible	(₹) 0.00	Additional Excess (₹)	Polito,
Coverages O <sub>I</sub>	oted Digit Two-Wheeler Policy – Bundled		200
Add On(s) Op	ted		2 cke

### YOUR VEHICLE DETAILS

RTO Location	Sabarkantha,GUJARAT	Make	HONDA	Model/Veh	
Engine No.	W0331653	Chassis No.	W331610	Variant (Si Type)	ub- ACTIVA/5G STD (BSIV)
				Year of Regn/Year	of
Body Type	Scooter	Fuel Type	Petrol	Mfg.	/2019
				Odometer	
Seating Capacit	ty 2	Cubic Capacity	110 CC	Reading (k	(M)

## YOUR VEHICLE IDV

Year	Vehicle IDV	Non-Electrical Accessories IDV	Electrical Accessories IDV	CNG/LPG IDV	Total IDV	PA Owner Driver
Year 1	55061		0V		55061	1500000
Year 2	0	0	0 00	0	0	
Year 3	0	0	0 20	0	0	
Year 4	0	0	016	0	0	
Year 5	0	0	0	0	0	

OWN DAMAGE PREMIUM [A] (₹)	OPK	LIABILITY PREMIUM [B] (₹)	
Own Damage Premium <sub>(₹)</sub>	0.00	Basic Third-Party Liability (₹)	3077.00
Add-Ons Premium (₹)	7/0,	PA cover for Owner-Driver (₹)	330.00
NCB Discount Amount (₹)	·00,	Legal Liability to Employees (₹)	
2.8		Legal Liability to Paid Driver (₹)	
		PA cover for 2 unnamed passengers each (₹)	
6.30		PA cover for Paid Driver (₹)	
Total OD Premium (₹)	0.00	Total Act Premium (₹)	3407.00
Net Premium (₹)		3407.00	
CGST @ 9% = (₹306.63) + SGST/UTGST	@ 9% = (₹306.63)	613.26	

$^{2}\mathcal{O}_{i}$
Note: The above total OD premium is inclusive of all applicable loading / discounts viz (automobile association memberships, voluntary excess, anti-theft
handicap person, driver tuition, fiber glass, CNG/LPG unit, imported vehicle etc., wherever applicable).
managed person, and or taken, their glass, or to Er e and imported temperature approaches.

4020.26

Imp note: Own Damage cover shall end on completion of first year of this comprehensive bundled policy. The policy will continue as a third party cover governed by standard wordings of Act only till the end of remaining period of policy

If the "Own Damage Cover" under your policy is cancelled during the policy period, then your policy shall be governed by the standard terms and conditions of "Act only" policy for the Third Party Cover during the remaining period of policy

# **ENDORSEMENT**

Final Premium

(₹)

Invoice Number	Invoice Date	Net Premium	lgst	Cgst	Sgst	Utgst	Cess	Gross Premium
IA011459859	2020-02-22	4536.00	0.00	408.00	408.00	0.00	0.00	5352.00
IA031464219	2021-02-22	0.00	0.00	0.00	0.00	0.00	0.00	0.00

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UIN No.: IRDAN158RP0009V02201819

49.56 IA060557891 2022-03-09 42.00 0.00 3.78 3.78 0.00 0.00

OTHER DETAILS

OTHER DETAILS			
Previous Insurer		Previous Policy No.	
IMT - Endorsements	IMT-15,IMT-20,IMT-22,IMT-3,IMT-7	Previous Policy Expiry Date	
GSTIN/UIN No.	Unregistered	State Code	24
Receipt No.	RA062609726	Receipt Date	09-Mar-2022
Financier Details	VARDAN FINLEASE LTD	Nominee Details	
	Details provided for this endorsement are true ar hereby confirm that details being entered by me the customer/against documents. In the event of	for this endorsement are true and c	correct. I have verified these details with
	action against me, including legal action. Following are the financial endorsements change	es:	· Pr
	FirstName: TIRTH HASMUKHLAL		· 60:
	LastName: SHAH		
Other Details	Mobile Number: 9825650059		
	Email id: IG.MEMON1@GMAIL.COM		⊗.

Email id: IG.MEMON1@GMAIL.COM Street: A 21 KALIDEVI PARK DOLAT VILAS Location: MAHAVIRNAGAR TA HIMATNAGAR

Zipcode: 383001 City: SABARKANTHA State: GUJARAT

Registration Number: GJ09DF8609

Two the elei Package Policy. I Follow these rules like you follow the rules of the road.

Geographical Area: Any accidental loss, damage and/or liability caused, sustained or incurred within India shall be covered subject to Policy Terms and Conditions, unless specifically agreed and endorsed. Limitation as to use The policy covers use of the vehicle for any purpose other than hire or reward, racing, pace making, reliability trial, speed testing and use for any purpose in connection with the Motor Trade. Person or Class of persons entitled to drive: Any person including the insured 1) Provided that a person driving holds a valid & effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. 2) Provided also that the person holding a valid & 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 and any subsequent amendment as is a callegable. Limit of License and License (License and License (Li applicable. Limits of Liability: 1) Under Section I of the policy\_IDV as shown in the schedule. 2) 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 and any subsequent amendment as applicable. 3) Under Section II \_ 1 (ii) of the policy: Damage to Third Party Property(₹ 6000) 4) P.A. Cover for Owner Driver under Section III (CSI) (per annum) - (₹ 1500000)

### Bia Legal words

NCB Declaration: The premium has been charged and policy has been issued subject to NCB declared by you as an insured. In the event of NCB found wrongly declared at any point of time during policy period, all benefits and coverages under the Policy in respect of section I of the Policy will stand forfeited. If there is any disagreement, write to us within 7 days from the date of policy or before the start date of period of insurance whichever is earlier. PUC Declaration: The Policy has been issued subject to valid Pollution Under Control (PUC) Certificate disclosed by you as an insured on or before the date of commencement of the Policy. Cheque dishonor / Non-receipt of payment: If premium paid through Cheque, the policy is void ab-initio in case of dishonor of Cheque or non-receipt of payment. This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to coverages and exclusions specified in the motor vehicle tariff published by IRDAI. 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 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". Pre-existing Damages: All types of pre-existing damages or cost of repair of such damage will be excluded at the time of claim settlement. Violation of Motor Vehicle Act: This policy is issued in accordance with the provision of Chapter X and Chapter XI of MV act, 1988 and any subsequent amendment as applicable. Any violation will forfeit all benefits and coverages under the Policy. Important Notice: The company may cancel the policy by sending 7 days notice in case of fraud, misrepresentation, non disclosure of material fact or non co-operation of the insured. This policy is subject to the standard policy wordings, warranties and conditions applicable for this product us. If the Company does not receive the Vehicle Inspection report or the report is adverse, the Company, at its discretion, will cancel Policy as per the Motor Tariff Note: The terms and conditions detailed in this policy schedule as well as the policy document sent by Digit shall prevail in case of any dispute

In case of claim or any other query, please contact our 24-hour Call Centre at 1800-258-5956 or visit our website www.c 6 or email us at he

For & On Behalf of Go Digit General Insurance Ltd.

Prayeen Bhat

Proveen Bhot
Senior Vice President - Customer Experience
proveen.bhot@godigit.com
Authorized Signatory
Printed, Signatory
Printed, Signatory
Authorized Stomp Duty has been paid as per Letter of
Authorization No.67-B/04/2017-18 Date: 30th May 2017
issued by Department of Stamps and Registration ,
Bengaluru- 560009 - KARNATAKA.
Hey, our document is now digitally signed
Click <u>here</u> to view the certificate.
For instant resolution, you can ping us "Hi"
on WhatsApp at 702 606 1234

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