

The New India Assurance Co.Ltd.

THE NEW INDIA ASSURANCE CO. LTD., (BO-1) (671001)

Tel. No.: 08212423272//

Email: /nia.671001@newindia.co.in/

TWO WHEELER Package Policy

Policy Number: 67100131150100039629

Vehicle: ROYAL ENFI/BULLET

Period of Cover

From: 15/03/2016

To: 14/03/2017

Insured Details

YASHWANTH.M.R. .

To: S/O. RAMACHANDRA.M.V.,# 312, 13TH MAIN, 3RD CROSS,,SARASWATHIPURAM, MYSORE,,MYSORE,KARNATAKA, 570009

For Insurance Renewals contact

M.PUTTASWAMY F.NO.44.

Tel. No.: / / 9901218957

Email: /

For Claims contact our Claims Hub

Tel. No.:

Email:







POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Two Wheeler Package Policy

	Insured's Details	Policy Details		
Insured's Name:	YASHWANTH.M.R	Policy number:	67100131150100039629	
Customer ID:	PO20244614	Period of cover:	15/03/2016 12:00:01 AM to 14/03/2017 11:59:59 PM	
Insureds Address:	S/O. RAMACHANDRA.M.V.,# 312, 13TH MAIN, 3RD CROSS,,SARASWATHIPURAM, MYSORE., MYSORE,KARNATAKA, 570009	Registration no.	KA-09-EX-7488	
Prev. Policy no.	67100131140100040700	Make/Model:	ROYAL ENFI/BULLET	
Email:	yashu_150@yahoo.co.in	Receipt no.	10000089150200046954 - 13/02/16	
Phone Number :	/ / 9731919456	Fax Number :	NA / NA	

	Issuing office	New India Contact			
Address	THE NEW INDIA ASSURANCE CO. LTD., (BO-1) (671001), NAZARBAD BRANCH, MYSORE, NO.73,I FLOOR,MADHVESH COMPLEX, MALAI MAHADESHWARA ROAD, NAZARBAD, , KARNATAKA, 570010.	Agent / Corp. Agent / Broker / Banc Assurance/ Referral Code - Name	M.Puttaswamy F.No.44 (NIA1D7818332)		
		Phone no	/ / 9901218957		
Phone no	08212423272	Fax no.	/		
Fax no.	08212430914 / NA	Email	/		
Email	nia.671001@newindia.co.in	Development officer level Name/Code	K.L.SRIDHAR - (1D7822234)		
Claim Contact	THE NEW INDIA ASSURANCE CO. LTD., (BO-1) (671001)	Claim Contact Detail	NAZARBAD BRANCH, MYSORE,NO.73,I FLOOR,MADHVESH COMPLEX,,MALAI MAHADESHWARA ROAD, NAZARBAD,;08212423272//		

Policy Details

		Details	
Geographical Area / Zone:	India/B	Year of manufacture:	2013
Name of the Financier:		Chassis no./Engine no.:	ME3U3S5CODC238806/U3S5CO DC238806
Type of fuel:	Petrol	Cubic capacity (cc):	350
Type of body:	Metal	Variant:	CLASSIC 350cc
Seating capacity including Driver:	2	Colour:	Black
Automobile Association membership:	none	Name of registration authority:	Mysore
Cover Note No/Cover Note Issue Date:	1		

IDV (in `)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
69361	0	0	0	0	69361

Schedule of Premium

Own Damage	Liability		
Basic OD Cover		Basic TP Cover	
		Compulsory PA cover for Owner Driver	
NCB(35%)			
OD Premium in `	477	TP Premium in `	604

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Net Premium in `:	1081
Service Tax in `:	157
Total Payable in `:	1238

Limitations as to use	Limits of Liability		
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	Limit of the amount the Company's Liability Under Section II 1(i) in respect of any one accident: as per the Motor Vehicles Act, 1988. Limit of the amount of the Company's Liability Under Section II 1(ii) in respect of any one claim or series of claims arising out of one event: Up to `1,00,000		
	For individual covers (OD) in:	69361	
	Imposed excess in `:	0	
	Voluntary excess in `:	0	
	Compulsory excess in `:	100	

Persons or classes of persons 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 requirement of Rule 3 of the Central Motor Vehicles Rules, 1989.

PA cover for Owner Driver

Name of Nominee	Age of Nominee			Relationship to the Nominee
NA	NA	NA	NA	NA

PA cover for named persons

Name	CSI Opted(`)	Nominee	Relationship
none	0	NA	NA

In witness where of this policy has been signed at Mumbai on this 13/02/2016 WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO

This policy is subject to the Terms, conditions and exceptions applicable to Package/Liability policy attached/available on the web site http://newindia.co.in; IMT Endorsement Number(s) printed herewith attached 22.

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 Vehicles Act, 1988 is recoverable from the insured: see clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited.

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 XI of M.V. Act, 1988.NIA S.T.REGN No: AAACN4165CST178.

For and on behalf of The New India Assurance Company Limited

1 Maring

Date of Issue: 13/02/2016

(MR. UDAYAKUMAR S) [Branch Manager]

Duly Constituted Attorney(s)





COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office : THE NEW INDIA ASSURANCE CO. LTD., (BO-1) (671001)

Address : NAZARBAD BRANCH, MYSORE

NO.73,I FLOOR, MADHVESH COMPLEX,

MALAÍ MAHADÉSHWARA ROAD, NAZARBAD,,570010

MYSORE

Phone : 08212423272

Email : nia.671001@newindia.co.in

Fax : 08212430914

Collection Number : 10000089150200046954

Collection Date : 13/02/2016 Business Source Code : 1D7822234

Received with thanks from YASHWANTH.M.R. ..

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount`	A/C Code	Sub A/C Code
67100131150100039629	Bank-100000	1238.00	9100.100000	BA00013647-100000-9100

Total = ` 1238.00

Your Payment/Adjustment Details are as under -

Mode	Amount `	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/ APD Balance
EPG Credit Advice	1238.00	QR110 07755	N.A.	N.A.	N.A.	6710011510083376	N.A.

Total = ` 1238.00

Utilization details of the Collected Amount :

Premium Serv		Service Tax		Stamp Duty		Excess Amount
1081.00		157.00		0.00		0
SI no.	Agency Code		Agency Name			Department Code
1	NIA1D7818332		M.PUTTASWAMY F.NO.44.		3	31

For The New India Assurance Company Limited

Revenue Stamp

LAMES

(MR. UDAYAKUMAR S) [Branch Manager]

Cashier's Initial Authorized Signatory

NIA S.T.REGN No: AAACN4165CST178.

Date of Issue: 13/02/2016

Note -

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- 1. Please quote the Policy Number, Collection Number and date in all future correspondence. .
- 2.NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

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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/constructive total loss) the first ` 100 (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 3 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.