



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Two Wheeler Liability Only Policy

UIN Number - IRDAN190RP0002V01200203

Policy Number : 76130131200200023804

POLICY ISSUING OFFICE: VATAKARA BRANCH (761301), 1ST FLOOR , IKKON BUILDING 2 , ABOVE UNION BANK OF INDIA. , EDODI, VATAKARA , KERALA , 673101. PHONE NUMBER:04962523097 / 04962523537 FAX NUMBER:NA / NA Email:nia.761301@newindia.co.in	BUSINESS CHANNEL/CPSC User: NAME: DIRECT BUSINESS NA NA - (2D5603140) Rajan N.K - (NIA2D5600354), PHONE NUMBER: / 9947356921 / 9947356921 LAND/FAX NUMBER:/ EMAIL: /	CLAIM CONTACT: VATAKARA BRANCH (761301) 1ST FLOOR , IKKON BUILDING 2,ABOVE UNION BANK OF INDIA.,EDODI, VATAKARA;04962523097/04962523537/
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INSURED DETAILS

Insured Name	KAMALA .	Customer ID	PO86941094 (PAN No :NA)
Insured Address	KOYYALUMMAL(HO) NARIPPATTA(PO) VATAKARA,,, KALLACHI ,KERALA, 673506	Contact Number	/ / 8078159211
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	28/01/2021 12:00:01 AM to 27/01/2022 11:59:59 PM	Receipt Number	10000089200100507171 - 27/01/21
Previous Insurer	Liberty General Insurance Limited	Previous Policy Number	2012500301197003311000 0

VEHICLE DETAILS

Registration Number	KL-18-P-9791	Chassis no./Engine Number	ME4JF504FFT484456/JF50 ET2485350
Make / Model	HONDA/ACTIVA 3G	Variant:	ACTIVA 3G (109 CC)
Year of manufacture	2015	Type of body / Type of Fuel	Metal/Petrol
Colour	BLACK	Cubic capacity(cc) /Wattage(kW):	109cc
Seating capacity including Driver	2	Name of registration authority	VATAKARA
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none

INSURED DECLARED VALUE (in Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
0	0	N/A	N/A	N/A	0

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium	0	Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000)	752 275
Calculated OD Premium	0	Calculated TP Premium	1027
Total OD Premium	0	Total TP Premium	1027
Net Premium in Rs			1027
GST in Rs			194
Total Payable in Rs			1221
Total Payable in Rs(in words):	RUPEES ONE THOUSAND TWO HUNDRED TWENTY-ONE ONLY		
GSTIN(Issuing Office)	32AAACN4165C4ZX		

Policy No. : 76130131200200023804 Document generated by AG_0149800 at 2021/01/27 17:08:22.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on <https://www.newindia.co.in/portal/policyFeedbackGen>.

For redressal of your grievances, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



SAC	997139 (Other non-life insurance services excl RI)
Limitation as to use: The policy covers use for any purpose other than: a) Hire or reward b) Organized racing, OR c) Speed testing	
Limits of Liability: 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 Rs. 1,00,000	
For individual covers (OD) in Rs:0	Compulsory excess in Rs:NA
Imposed excess in Rs:0	Voluntary excess in Rs:0
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 with the Insured	Name of the Appointee (if Nominee is a minor)	Relationship to the Nominee
ASHOKAN	58	SPOUSE	NA	NA

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
none	0	NA	NA

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 1027.00
SGST	9	92
CGST	9	92
IGST	0	0
KERALA FLOOD CESS	1	10

In witness where of this policy has been signed at VATAKARA BRANCH on this 27/01/2021 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 22,25.

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.

Date of Issue: 27/01/2021

For and on behalf of The New India Assurance Company Limited

(Mr. ATHUL K S)
[BRANCH MANAGER]

Duly Constituted Attorney(s)

Tax Invoice No : 76130120P0026439

IRDA Registration Number: 190

