

## CERTIFICATE CUM POLICY SCHEDULE

ORIGINAL FOR RECIPIENT / DUPLICATE FOR SUPPLIER

TAX INVOICE/CERTIFICATE CUM POLICY SCHEDULE

(FORM 51 OF THE CENTRAL MOTOR VEHICLES RULES, 1989)

|                      |                                                                                      |                            |                                                                                                         |
|----------------------|--------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------|
| Policy Type & UIN    | Bundled Motor Policy- 3 Yr TP + 1 Yr OD (Private Vehicle) & IRDANI15RP00021V02202122 | Proposal No & Date         | N0069015255 / 20-Jan-2026 12:33                                                                         |
| Policy No            | 3001/MI-16471244/00/000                                                              | Period of Insurance        | Own Damage 20-JAN-2026 12:38 to 19-JAN-2027 23:59<br>Third Party 20-JAN-2026 12:38 to 19-JAN-2029 23:59 |
| Policy Issued On     | 20-Jan-2026 12:38                                                                    | Vehicle Identification No. | MA3NFG81STA484193                                                                                       |
| Insured Name         | Miss Abida Parveen                                                                   | Geographical Area          | India                                                                                                   |
| Invoice No           | 180126252890                                                                         | GST No & State             | NA   Jammu and Kashmir                                                                                  |
| Insured Address      | B.P.O BLOCK SAMOTE, W.NO 11, SURANKOT, PUNCH, SAMOTE, JAMMU AND KASHMIR-185121       | Accounting Code of Service | 997134                                                                                                  |
| Insured State & Code | Jammu and Kashmir - 01                                                               | Place of Supply            | Jammu and Kashmir                                                                                       |
|                      |                                                                                      | GSTIN of Customer          | GSTUNREGISTERED                                                                                         |

## MOTOR VEHICLE DETAILS

|                     |                                  |                      |                                |
|---------------------|----------------------------------|----------------------|--------------------------------|
| Make                | Maruti Suzuki                    | Seating Capacity     | 5                              |
| Model - Variant     | MARUTI IGNIS DELTA 1.2L 5MT BS6  | Type of Body / Color | Hatchback   PEARL ARCTIC WHITE |
| Registration No     | NEW                              | Fuel Type            | Petrol                         |
| Year of Manufacture | 2026                             | RTO Location         | POONCH   JK-12                 |
| Engine - Chassis No | K12MN4913337 - MA3NFG81STA484193 | Zone                 | B                              |
| Cubic Capacity      | 1197                             | FASTag ID            |                                |

## Insured Declared Value(₹)

|           |        |                              |   |                          |   |               |   |             |        |
|-----------|--------|------------------------------|---|--------------------------|---|---------------|---|-------------|--------|
| Vehicle ₹ | 555275 | Non Electrical Accessories ₹ | 0 | Electrical Accessories ₹ | 0 | CNG/LPG Kit ₹ | 0 | Total IDV ₹ | 555275 |
|-----------|--------|------------------------------|---|--------------------------|---|---------------|---|-------------|--------|

## Schedule of Premium(Amount in ₹)

| OWN DAMAGE SECTION (A)                                              |        | LIABILITY SECTION (B)                                                                                                                                               |           |
|---------------------------------------------------------------------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Vehicle                                                             | ₹ 5493 | Basic Third Party Liability                                                                                                                                         | ₹ 10640   |
| Basic Premium                                                       | ₹ 5493 | Compulsory PA Cover Premium [1 Year ]/Sum Insured 15 lakhs)                                                                                                         | ₹ 350     |
| Deductibles                                                         |        | P.A Cover to Unnamed Passengers 5 Person of Rs100000 each (IMT-16)                                                                                                  | ₹ 750     |
| Anti-Theft Device (IMT-10)                                          | ₹ 137  | Legal Liability (WC) to Driver (IMT-28)                                                                                                                             | ₹ 150     |
| Sub-Total Deductibles                                               | ₹ 137  | Net Liability Premium (B)                                                                                                                                           | ₹ 11890   |
| Depreciation Reimbursement (IRDANI15RP0006V01201819/A0021V01201819) | ₹ 2221 | Total Premium (A+B)                                                                                                                                                 | ₹ 21272   |
| Engine Guard (IRDANI15RP0006V01201819/A0025V01201819)               | ₹ 500  | CGST @9%                                                                                                                                                            | ₹ 1914.48 |
| Key Replacements (IRDANI15RP0006V01201819/A0026V01201819)           | ₹ 250  | SGST @9%                                                                                                                                                            | ₹ 1914.48 |
| Cover for Consumables (IRDANI15RP0006V01201819/A0022V01201819)      | ₹ 500  | Gross Premium Paid                                                                                                                                                  | ₹ 25101   |
| Return to Invoice (IRDANI15RP0006V01201819/A0023V01201819)          | ₹ 555  | Point of Sale - NX Competent Kashmir Automobiles Private Limited                                                                                                    |           |
| Net own Damage Premium (A)                                          | ₹ 9382 |                                                                                                                                                                     |           |
|                                                                     |        | Notes:-                                                                                                                                                             |           |
|                                                                     |        | 1. Policy Insurance is subject to realisation of premium.                                                                                                           |           |
|                                                                     |        | 2. Consolidate stamp duty paid to State Exchequer.                                                                                                                  |           |
|                                                                     |        | 3. Policy is subject to a compulsory Deductible of Rs. 1000 (IMT-22)                                                                                                |           |
|                                                                     |        | 4. Voluntary excess Rs. 0                                                                                                                                           |           |
|                                                                     |        | 5. Subject to Endorsements IMT 10,16,28                                                                                                                             |           |
|                                                                     |        | 6. OD Premium rates are different for NCB/Non-NCB class of customer. In case of change from NCB to Non-NCB, the recoverable amount may be more than the NCB amount. |           |
|                                                                     |        | 7. This policy provides the benefit of "Roadside Assistance" from below vendor:-                                                                                    |           |
|                                                                     |        | Vendor Name:- Global assure, Contact No:- 18005720197                                                                                                               |           |

## Nominee Details

|               |                     |      |    |           |         |
|---------------|---------------------|------|----|-----------|---------|
| Nominee Name: | JAMEEL HUSSAIN SHAH | Age: | 36 | Relation: | Brother |
|---------------|---------------------|------|----|-----------|---------|

## Financier Details

|                 |          |                 |                          |                   |                  |
|-----------------|----------|-----------------|--------------------------|-------------------|------------------|
| Financier Type: | Financed | Financier Name: | J AND K GRAMEEN BANK LTD | Financier Branch: | Sumnikote poonch |
|-----------------|----------|-----------------|--------------------------|-------------------|------------------|

## Payment Details

|               |             |                           |             |            |                    |         |       |
|---------------|-------------|---------------------------|-------------|------------|--------------------|---------|-------|
| Payment Mode: | Credit Card | Cheque No/Transaction No: | 80985862877 | Bank Name: | ICICI BANK LIMITED | Amount: | 25101 |
|---------------|-------------|---------------------------|-------------|------------|--------------------|---------|-------|

**Limitations as to use:** 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.

**Driver:-** 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.

**Limits of Liability:-** Under Section II-I (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 - i(ii) of the Policy - Damage to Third Party Property - Rs.750000 - (as per IMT 20)in respect of any one claim or series of claims arising out of one event. Cover for Owner - Driver under section III (CSI) Rs 1500000 - Deductible under section-I: Rs 1000/Compulsory Deductible Rs 1000 Imposed Deductible Rs. 0 and Voluntary Deductible Rs 0)

**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: 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.

**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 hold good.

**For information on ombudsman you may visit website :** <https://www.cicins.co.in/Ombudsman>:- 1/ 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.



We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

For ICICI LOMBARD GENERAL INSURANCE CO  
LTD

Gaurav Arora

Authorised Signatory

Policy Issuing Office: Hall No. 301 & 302- Third Floor- Bahu Plaza- Jammu- Jammu & Kashmir 180004  
GSTIN: 01AAACI1904G220, CIN No.: State Name: Jammu and Kashmir

This Policy is issued and serviced by Maruti Suzuki Insurance Broking Private Limited  
Direct Broker (General) IRDAI License No. 428, valid till 01 February 2027, Mail ID: support@msibpl.co.in, Contact: 33774477 (Prefix 011/022/033/044)

For Policy Terms and Conditions Log on to : [www.marutisuzukiinsurance.com](http://www.marutisuzukiinsurance.com), [www.icicilombard.com](http://www.icicilombard.com)

Endorsement Schedule

|                            |                                                                |                           |                               |
|----------------------------|----------------------------------------------------------------|---------------------------|-------------------------------|
| Endorsement No.            | ED000000001630489                                              | Endorsement Date & Time   | 21-JAN-2026 15:55:36          |
| Policy No.                 | 3001/MI-16471244/00/000                                        | SACPA Policy No.          |                               |
| Risk Inception Date        | 20-JAN-2026                                                    | Policy Type               | 1 year OD & 3 years TP policy |
| Invoice No.                | 180126252890E03                                                | Policy Expiry Date        | 19-JAN-2029                   |
| Accounting Code of Service | 997134                                                         | Endorsement Category      | Non-Premium                   |
| Insured Address            | B.P.O BLOCK SAMOTE W.NO 11 , SURANKOT , PUNCH<br>Samote 185121 | Insured Name              | Abida Parveen                 |
| Place of Supply            | Jammu and Kashmir                                              | Insured State Name & Code | Jammu and Kashmir-14          |
| Type of Endorsement        | Non-Premium                                                    | GSTIN of Customer         | UNREGISTERED                  |
| Total Endorsement Charges  | 0                                                              |                           |                               |

At the request of the insured, it is hereby declared and agreed that the following items under the withstanding policy has been changed / altered.  
Notwithstanding anything herein to the contrary contained, at the request of the insured, it is hereby declared and agreed that under the within mentioned policy

THE CORRECT

| Endorsement On | New Value         | Old Value                  |
|----------------|-------------------|----------------------------|
| Address 2      | POONCH            | W.NO 11 , SURANKOT , PUNCH |
| Landmark       | PUNCH             |                            |
| Pincode        | 185111            | 185121                     |
| Locality       | other             | Samote                     |
| State          | Jammu and Kashmir | Jammu and Kashmir          |

And not as stated therein.  
Subject to fulfillment of conditions. If any mentioned in remarks.  
  
*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 ICICI LOMBARD GENERAL INSURANCE CO LTD  
Remarks: change in address



Gaurav Arora

Authorized Signatory