



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Private Car Liability Policy

UIN Number - IRDAN190RP0001V01200203

Policy Number :35240031250200010102

POLICY ISSUING OFFICE: DO-352400 (352400), HOSPITAL ROAD MANDI , DIST - MANDI , , HIMACHAL PRADESH , 175001. PHONE NUMBER:01905223367 FAX NUMBER:0190522336 / NA Email:nia.352400@newindia.co.in	BUSINESS CHANNEL/CPSC User: NAME:Mr. ASHOK GAUTAM - (DE00003651) Mr. Rohan S/O Shri Satish Kumar - (NIAAG00154086), PHONE NUMBER: / 8219256164 LAND/FAX NUMBER:/ EMAIL: /	CLAIM CONTACT: Mandi Non Suit Claim Hub (359003) ADDRESS: HOSPITAL ROAD, MANDI (H.P) -175001 , , HIMACHAL PRADESH , 175001. PHONE NUMBER: 123456 / MOBILE NUMBER: Email: ch359003@newindia.co.in
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INSURED DETAILS

Insured Name	KAILASH CHAND DOGRA	Customer ID	POC9505291 (PAN No :AEKPD9844B)
Insured Address	S/O TULSI RAM DOGRA,VILL DALLI PO KANDROUR TEH SADAR BILASPUR,HP 174001, BILASPUR KUTCHERY ,HIMACHAL PRADESH, 174001	Contact Number	/ / XXXXXX8736
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	18/02/2026 02:30:53 PM to 17/02/2027 11:59:59 PM	Receipt Number	10000089250200737389 - 18/02/26
Previous Insurer	Not available	Previous Policy Number	NA

VEHICLE DETAILS

Registration Number	HP-69-6806	Chassis no./Engine Number	VVWD11600BT055111/CL N160299
Make / Model	VOLKSWAGEN/VENTO	Variant:	DIESEL STYLE
Year of manufacture	2011	Type of body / Type of Fuel	Sedan/Diesel
Colour	C WHITE	Cubic capacity(cc) /Wattage(kW):	1598cc
Seating capacity including Driver	5	Name of registration authority	HIMACHAL PRADESH
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none
FASTag ID:			

INSURED DECLARED VALUE (in Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value
0	0	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) (+)Legal Liability Premium for Paid Driver for 1 person(IMT - 28)	7897 275 50
Calculated OD Premium	0	Calculated TP Premium	8222
Total OD Premium	0	Total TP Premium	8222

Policy No. : 35240031250200010102 Document generated by AG\_0157095 at 2026/02/18 14:31:06.

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 grievance, 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 <https://newindia.co.in>.



Net Premium in Rs		8,222
GST in Rs		1,480
Total Payable in Rs		9,702
Total Payable in Rs(in words):	RUPEES NINE THOUSAND SEVEN HUNDRED TWO ONLY	
GSTIN(Issuing Office)	02AACN4165C1Z3	
SAC	997134 (Motor vehicle insurance services)	
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 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 1(ii) in respect of any one claim or series of claims arising out of one event: Up to Rs. 7,50,000		
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.		
For all vehicles - The policy does not cover liability for death, bodily injury or damage as excluded in section 150 (2) (ii) and (iii); (b) and (c) of the Motor Vehicles Act, 1988.		

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
none	0	NA	none	none

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 8,222
SGST	9	740
CGST	9	740
IGST	0	0

In witness where of this policy has been signed at DO-352400 on this 18-FEB-26WARRANTED 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 Liability Only policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 22,28.

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.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 1lakh or a claim for refund of premium exceeding Rs 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company website.

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.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 18/02/2026



(Mr. VIRENDER SINGH THAKUR)  
[CHIEF BIZ. MANAGER]

Duly Constituted Attorney(s)

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.

Tax Invoice No : 35240025P0015829

<b>IRDA Registration Number: 190</b>
<b>NIA PAN NUMBER: AAACN4165C</b>