

LIABILITY ONLY POLICY - PRIVATE CAR

Certificate of Insurance cum Policy Schedule

POLICY DETAILS

Insured Name: PUSHPENDRA KUMAR
Address: BABEDI KABRAI, Banda,

Uttar Pradesh

Pincode: 210427 GSTIN: N/A

Period of Insurance: 1 Jul 20 (00:00 hrs) to 30

Jun 21 (23:59 hrs)

Policy Issuance Date: 1 Jul 20

Policy Number: BBTA00252594510/00
Nominee: FATHER, Father, 52

Owner Number: **7705937777**

Previous Policy Expiry Date: N/A

VEHICLE DETAILS

Registration Number: UP95D0020
Make/Model: TATA SUMO
Registration Year: 2009
Manufacturing Year: 2009
Fuel Type: Diesel
Engine No: ZJ00335
Chassis No: N00344



PREMIUM DETAILS (₹)

| Premium Breakup | |
|-----------------------------|---------|
| Basic Third Party Liability | 7889.83 |
| Net Liability Premium (B) | 7889.83 |
| IGST (18%) | 1420.17 |
| Total Premium | 9310 |

Geographical Area: India Compulsory Deductible: ₹ 0 Voluntary Deductible: ₹ 0

No-Claim Bonus: **0** % Hypothecation: **None**

INTERMEDIARY DETAILS

| Name | Code | Contact | Email | Address |
|--|--------|---------------|-------|---|
| Advance india insurance broker Pvt limited | 131362 | 1800212071392 | 11 01 | DLF Qutab Enclave Ph-1, Gurugram, Haryana 122002 |

| POS Name | POS Contact | POS ID NO |
|----------|-------------|-----------|
| | | |

Acko General Insurance Ltd.

Unit No. 301, 3rd Floor, E Wing, Lotus Corporate Park, Off Western Express Highway,

Goregaon (E), Mumbai - 400063.

Email: hello@acko.com | Phone: 1800 266 2256 | www.acko.com

CIN: U66000MH2016PLC287385 | IRDAI Reg No. 157 |

UIN: IRDAN157P0002V01201718



Limitations As To Use:

The Policy covers use only under a permit within the meaning of the Motor Vehicle Act 1988 or such a carriage falling under Sub-Section (3) of Section 66 of the Motor Vehicle's Act 1988. The Policy does not cover use for: a) Organised racing b) Pace Making c) Reliability Trials d) Speed Testing e) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. **Persons or Class 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 when not used for the transport of passengers at the time of accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989. **Limits of Liability**. 1. 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. 2. Under Section II - 1(ii) of the policy -Damage to Third Party Property - Rs. 100000 3. P. A. Cover under Section III for Owner - Driver(CSI): Rs. 0.0 **Terms, Conditions & Exclusions:** As per the Indian Motor Tariff. A personal copy of the same is available free of cost on request & the same is also available at our website. Please note: Previous Policy document is required in case of claim within 30 days of the Acko Policy Start Date

I / We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with the provision of chapter X, XI of M. V.Act 1988. "The stamp duty of Rs. 0.50 paid by electronic medium vide Receipt/Challan no. 3677100201718 dated 26/10/2017 as prescribed in Government Notification Revenue and Forest Department No. Mudrank 2004/4125/CR/690/M-1, dated 31/12/2004. GSTN: 27AAOCA9055C1ZJ. 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". Disclaimer: The Policy shall be void from inception if the premium cheque is not realized. In the event of misrepresentation, fraud or non-disclosure of material fact, the Company reserves the right to cancel the Policy. The policy is issued basis the information provided by you, which is available with the company. In case of discrepancy/non recording of relevant information in the policy, the insured is requested to bring the same to the notice of the company within 15 days.

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Receieved with thanks from PUSHPENDRA KUMAR a sum of ₹ 9310 towards premium on CAR Insurance Policy

INSURED DETAILS

Insured Name: PUSHPENDRA KUMAR

Address: BABEDI KABRAI, Banda, Uttar

Pradesh

GST: N/A

Period of Insurance: 1 Jul 20 (00:00 hrs) to 30 Jun 21

(23:59 hrs)

Policy Number : **BBTA00252594510/00**

INTERMEDIARY DETAILS

Name: Advance india insurance broker Pvt limited

Code: **131362**

PREMIUM DETAILS (₹)

| IGST (18%) ₹ 1420.1 | Total Premium | ₹9310 |
|----------------------|---------------|-----------|
| | IGST (18%) | ₹ 1420.17 |
| Net Premium ₹ 7889.8 | Net Premium | ₹ 7889.83 |

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Dear PUSHPENDRA KUMAR,

We wish to inform you that the Insurance policy number **BBTA00252594510/00** has been issued on the basis of the information and declaration given by you, the transcript whereof is mentioned below.

Please be informed that this Policy shall be construed to be void ab initio/invalid in the event we find that you have not disclosed material or correct information required for the purpose of providing the below insurance cover and in case of any claim arising under the policy in such a scenario, we shall be under no obligation whatsoever to settle such claim to you and the premium paid by you under this policy shall stand fully forfeited.

POLICY DETAILS

Policy Number: **BBTA00252594510/00**

Period of Insurance: 1 Jul 20 (00:00 hrs) to 30 Jun

21 (23:59 hrs)

Policy Issuance Date: 1 Jul 20

CAR DETAILS

Car Number: UP95D0020
Make/Model: TATA SUMO
Fuel Type: Diesel
Registration Year: 2009
Manufacturing Year: 2009
Insured Declared Value (IDV): N/A
Accessories (IDV): 0

CAR OWNER DETAILS

Name: PUSHPENDRA KUMAR Email Address: nsdlanu@gmail.com

Mobile Number: **7705937777** Pincode: **210427**

NOMINEE DETAILS

Name: **FATHER** Relationship with Insured: **Father**

| Covers | Opted | Not Opted |
|-------------------|-------|-----------|
| Zero Depreciation | - | ✓ |
| Consumables | - | ✓ |

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