

Ref No.: GEN/WEL/SG/0008.3/5167499400

Date: 19/11/2024

To,

Mr. Md Asharaful Sk S/O MD MAHIMUDDIN SEKH R/O SULTANGANJ COLLEGE MORE SULTANGANJ KALIACHAK Malda - 732201 District: MALDA WEST BENGAL, India Contact Details 9932212960



Policy number: 5167499400

CKYC ID:

Subject: Risk assumption for Commercial Vehicle Secure (Goods Carrying Vehicle)

Dear Mr. Md Asharaful Sk,

We welcome you to Zurich Kotak General Insurance Company (India) Limited and thank you for choosing us as your preferred service provider.

This is with reference to your above mentioned Policy issued under Commercial Vehicle Secure (Goods Carrying Vehicle).

Enclosed please find the Policy Schedule outlining the details of your policy. Kindly note that the proposal is underwritten and policy is issued based on the information submitted to us by you, as well as acceptance of the terms and conditions. Policy schedule must be read in conjunction with the product brochure and policy wordings. Please visit https://www.zurichkotak.com/customer-support/downloads or scan above QR code for detailed policy wording.

We request you to carefully go through the same once again and in case of any disagreement, discrepancy or clarifications, please call us on our toll free number 1800 266 4545 or write to us at care@zurichkotak.com within 15 days from the date of this letter. Alternatively, you can also write to us at 401, 4th Floor, Silver Metropolis, Jai Coach Compound, Off Western Express Highway, Goregaon (East), Mumbai - 400063. Mumbai , Maharashtra

Please note that the information provided by you will be verified at the time of claim and the captioned Policy shall be treated as void in case of any untrue or incorrect statement, misrepresentation, non-description or non-disclosure in any form whatsoever made by you or by your agent, on your behalf, at any stage.

In case where premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

As a valued customer, we would like to provide regular updates on your policy through email and SMS. We therefore request you to keep us updated of any change in your contact details.

Assuring you of our best services at all times.

Thanking you,

Yours sincerely,

For Zurich Kotak General Insurance Company (India) Limited

**Authorised Signatory** 







# **Commercial Vehicle Secure (Goods Carrying Vehicle)**

Comprehensive Policy

# **Certificate cum Policy Schedule**

Policy / Certificate No: 5167499400

For any assistance please call 1800 266 4545 or visit www.zurichkotak.com



# **INSURED DETAILS**

Name: Mr. Md Asharaful Sk

Address: S/O MD MAHIMUDDIN SEKH R/O SULTANGANJ

COLLEGE MORE SULTANGANJ KALIACHAK Malda - 732201 District: MALDA WEST BENGAL(19), India

Place of Supply: WEST BENGAL

Supply State Code: 19 Phone: NA

Mobile: 9932212960

Email: SAKIRULSEKH2960@GMAIL.COM

GSTIN:

#### **POLICY DETAILS**

**Policy Issuing Office:** White House Office Space No 2B(1) 2Nd Floor 119 Kolkata West Bengal 700016.

Period of Insurance:

From: 20/11/2024 00:00 to: 19/11/2025Midnight

Policy issued on: 19/11/2024

Cover Note No: NA

Hypothecated to: CHOLAMANDALAM INVESTMENT &

FINANCE CO LTD

## **VEHICLE DETAILS**

Registration Number	Manufacturer	Model	Variant	Year of Manufacture	RTO Location	Engine Number	Vehicle Chassis/ Trailer Chassis No.	Seating Capacity	Gross Vehicle Weight
WB65C4682	MAHINDRA AND MAHINDRA	BOLERO	PICK-UP FB 1.25T BSIV	2017	MALDA	TBH1K94972	MA1ZU2TBKH1K75275	2	2975

IDV of Body (in ₹)	IDV of Chassis (in ₹)	Non - Electrical Accessories fitted to the Vehicle (in ₹)	Electrical & Electronic Accessories fitted to the Vehicle (in ₹)	Trailer (in ₹)	CNG / LPG Kit (in ₹)	Total Value of the Vehicle (in ₹)
86,000	3,64,000	0	0	0	0	4,50,000

# PREMIUM COMPUTATION TABLE (IN ₹)

Section I		Section II	
Own Damage		Liability	
Basic Own Damage	2,389.05	Basic TP Including TPPD Premium	16,049.00
Add:		Legal Liability to Paid Driver and/or Conductor and/or Cleaner	100.00
Cover for Lamps Tyres Tubes Mudguards Bonnet Side parts	358.36	(IMT 28)	100.00
Less:		Total Liability Premium (B)	16,149.00
No Claim Bonus Percent 45%	1,075.07		
Total Own Damage Premium (A)	1,672.34	Section III	
<u> </u>		Personal Accident	
		Total Personal Accident Premium (C)	0.00
Taxable value of Services (A+B+C)			17,821.34
CGST 9%			159.51
CGST 6%			962.94
SGST 9%			159.51
SGST 6%			962.94
Total Premium (in ₹ )			20,066.00
**GST amount represent 18% on OD component (Section I) and 12% on Liabi	lity (Section II) and is	split into equal proportion wherever applicable	

Geographical Area	INDIA	Additional Excess ₹	0 C	ompulsory Deductible ₹	500
No. of Claims for Depreciation	n Cover	Voluntary Deductibl	e for Depreciation Cover ₹	Total Deduc	tible ₹ 500

# **INTERMEDIARY DETAILS**

Intermediary Code 3 6 0 1 7 7 0 0 0 0 Intermediary Name CERTIGO INSURANCE BROKERS PRIVATE LIMITED

Intermediary's Mobile No. 6 2 9 1 7 3 2 3 0 2 Intermediary's Landline No. 6 2 9 1 7 3 2 3 0 2



#### **CUSTOMER DECLARATION FOR CNG/ PNG KIT**

I/ We agree and undertake to immediately inform the Company in case of change on account of addition of CNG/PNG kit and obtain necessary endorsement in the Policy.

#### **DISCLAIMER**

For complete details on terms and conditions governing the coverage and NCB please read the Policy Wordings. This document is to be read with the Policy Wordings (which are also available on the Company website i.e. www.zurichkotak.com). Please refer to the claim form for necessary documents to be submitted for processing the claim.

#### **PUC DECLARATION**

This policy has been issued subject to valid Pollution Under Control (PUC) Certificate/Fitness Certificate disclosed to our representative / declared by You prior to commencement of risk under this policy and further undertaking to renew and maintain a valid PUC throughout the duration of the Policy.

#### **LIMITS OF LIABILITY**

Under Section II - 1(i) of the policy -> Death of or bodily injury: Such amounts is necessary to meet their requirements of Motor Vehicles Act, 1988. Under Section II - 1(ii) of the policy -> Damage to Third Party Property ₹ 7,50,000; PA Cover under Section III: for Owner Driver CSI ₹ 0

## LIMITATIONS AS TO USE

Goods Carrying Vehicle: The policy covers use only under a permit within the meaning of the Motor Vehicles Act, 1988 or such a carriage falling under subsection (3) of Section 66 of the Motor Vehicles Act, 1988. The policy does not cover use for: a) Organized racing b) Pace Making c) Reliability trials d) Speed testing.

#### **DRIVER'S CLAUSES**

Any person including the insured: Provided that a person driving hold an effective Driving License at the time of accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learners' License may also drive the Vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor vehicles Rules 1989.

## **NO CLAIM BONUS SCALE**

Number of Claims	% of Discount on Own Damage Premium
No claim made or pending during the preceding full year of insurance	20%
No claim made or pending during the preceding 2 consecutive years of insurance	25%
No claim made or pending during the preceding 3 consecutive years of insurance	35%
No claim made or pending during the preceding 4 consecutive years of insurance	45%
No claim made or pending during the preceding 5 consecutive years of insurance	50%

## **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 Policy 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.

Subject to I.M.T. Endt.Nos. & Memorandum 21, 28, A.3, 7, 23 Printed/herein/attached hereto Under Hire Purchase Agreement with NA



TΔX		

Service Tax/GST Registration No.	1 9 A A F C K 7 0 1 6 C 1 Z Q	Category	: General Insurance Services	
SAC Code	997134	Description	Motor Vehicle Insurance Services	
Invoice Number	5167499400			

## **DECLARATION**

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.

In Witness whereof this Policy has been signed for and behalf of White House Office Space No 2B(1) 2Nd Floor 119 Kolkata West Bengal 700016. at Mumbai this 19 day of November of 2024

Stamp Duty of ₹ 0.50 is paid as provided under Article 47(B) of Indian Stamp Act, 1899 and included in Consolidated Stamp Duty Paid to the Government of Maharashtra Treasury vide Order of Addl. Controller Of Stamps, Mumbai at General Stamp Office, Fort, Mumbai - 400001., vide this Order No. (LOA/ENF-2/CSD/98/2024/Validity Period Dt. 24/09/2024 To Dt. 31/12/2026 (O/w.No. 4576)/Date: 23/09/2024).

For Zurich Kotak General Insurance Company (India) Limited

**Authorised Signatory** 

This document is digitally signed, hence counter signature / stamp is not required.



# **CUSTOMER INFORMATION SHEET**

This document provides key information about your policy. Please refer to the policy document for detailed terms and conditions.

SI NO	Title	<b>Description</b> (Please refer to applicable Policy Clause Number in next column)			Policy Clause Numb	
1	Product Name	Commercial Ve	hicle Secure (Goods Carrying Vehicle)			
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN152RP00	008V04201516			
3	Structure	<ul><li>State basis</li><li>Indemnity</li><li>Fixed Bene</li></ul>	of Sum/Limit Insured			
4	Interests Insured	Commercial Ve	hicle Secure (Goods Carrying Vehicle) is designed to percial Vehicles	provide insurance	cover to Goods	
5	Sum Insured / Motor Insured Declared Value Scope	this policy which The IDV of the v manufacturer's	eclared Value (IDV) of the vehicle will be deemed to be a is fixed at the commencement of each policy period for rehicle (and accessories if any fitted to the vehicle) is to listed selling price of the brand and model as the vehicle val and adjusted for depreciation.	r the insured vehi be fixed on the ba	cle. sis of the	
		Section	Coverage	Sum In	sured	
		Section I	Loss of Or Damage to The Vehicle Insured		elow table	
		Section II	Liability to Third Parties		Court Order	
		Section III	Towing Disabled Vehicle	INR XXX	XX X	
		Section IV	Personal Accident Cover for Owner-Driver	INR 15,	00,000/-	
			red Value (IDV) of the Vehicle (INR) al Accessories fitted to the vehicle (INR)		INR 3,64,000 INR 0	
		Electrical & El	ectronic Accessories fitted to the vehicle (INR)		INR 0	
		Trailer (INR)			INR 0	
		CNG / LPG Ki	t (INR)		INR 0	
		Total Value of	the Vehicle (INR)		INR 4,50,000	
		The Compan accessories on texceed:  a. For total loss vehicle (inclub.) b. For partial losactual and reper limits specified by the company of the insurance podocumentary liability insurance of the company of the comp	y may at its own option repair reinstate or replace the very may pay in cash the amount of the loss or damage at a constructive total loss/cash-loss of the vehicle - the Inding accessories thereon) as specified in the Schedule sees, i.e. losses other than Total Loss/Constructive Totasonable costs of repair and/or replacement of parts loseified.  I motor vehicle is assessed as being unrepairable and had company shall grant the Policyholder the option to retain eing the IDV less the assessed value of Salvage based vincluding any submitted by or through the insured). Of a 'cash-loss' settlement, the Company is entitled to callete of damage. Additionally, the Company can cancel the licy after requiring the insured to either cancel the road evidence in original thereof or alternatively evidence in cance policy covering the wreck effective the date of dama vehicle shall be treated as a CTL if the aggregate cost of the sand conditions of the policy, exceeds 75% of the IDV may be a considered to the conditions of the policy, exceeds 75% of the IDV may be a conditions of the policy, exceeds 75% of the IDV may be accessed as a conditions of the policy, exceeds 75% of the IDV	nd the liability of sured's Declared less the value of al Loss/cash-loss ost/damaged subjumence a wreck i.e in the wreck and of on competitive of ancel the Own Date statutory Motor registration of the original a statutory age. If retrieval and / or	the Company shall  Value (IDV) of the the wreck.  of the vehicle - ect to depreciation as  a 'total loss' or accept a 'cash loss' juotes procured by mage insurance Third Party Liability wreck and submit y Motor Third Party	
	-	Illustration of ID	<u> </u>		e age of the vehicle.	
			Example: Ex-showroom price of the vehicle is	INR 10,00,000.		
						I



Depreciation %	15%	20%	30%
IDV	INR 8,50,000	INR 8,00,000	INR 7,00,000

Note: The above Illustration is as per the depreciation slabs mentioned in the policy wording for the age of the vehicle.

#### 6 Policy Coverage

The coverages available under this policy are listed in below and will be applicable as mentioned in the Policy Schedule.

Policy Wordings -Section I, Section II,

Policy Wordings -

General Exclusions (Applicable to all

Sections of the Policy)

Section III, Section IV

#### Section I: Loss of Or Damage to The Vehicle Insured

Cover for any Partial or Total Loss or Damage to the vehicle due to natural calamities such as - Fire, explosion, self-ignition or lightning, earthquake, flood, typhoon, hurricane, storm, tempest, inundation, cyclone, hailstorm, frost landslide, rockslide etc. Or man - made calamities such as burglary, theft, riot, strike, malicious act, accidental external means, terrorist activity, any damage in transit by road, rail, inland waterway, lift elevator or air, etc.

#### Section II: Liability to Third Parties

Covers legal liability for third party property damage and third-party bodily injury (including death) due to an accident.

#### Section III: Towing Disabled Vehicle

The policy shall be operative whilst the insured vehicle is being used for the purpose of towing any one disabled mechanically propelled vehicle and the indemnity provided by Section II of this policy shall subject to its terms and limitations be extended to apply in respect of liability in connection with such towed vehicle

#### Section IV: Personal Accident Cover for Owner-Driver

Personal Accident Cover is provided to the Owner-Driver whilst driving the vehicle including mounting into/ dismounting from or traveling in the insured vehicle as a co-driver. Additionally, other passengers and paid drivers can also be covered by opting for the same- limited to the carrying capacity of the vehicle, excluding the

8	Loss Participation	Deductible
		Additional Excess: INR 0
		Compulsory Deductible: INR 500
		Voluntary Deductible: INR 0
		Voluntary Deductible for Depreciation Cover: INR 0
		Total Deductible: INR 500

### 9 Exclusions

GENERAL EXCEPTIONS (Applicable to all Sections of the Policy)
The Company shall not be liable under this Policy in respect of

The Company shall not be liable under this Policy in respect of

- Any accidental loss or damage and/or liability caused sustained or incurred outside the geographical area:
- 2. Any claim arising out of any contractual liability;
- Any accidental loss damage and/or liability caused sustained or incurred whilst the vehicle insured herein is
- a. Being used otherwise than in accordance with the 'Limitations as to Use'. Or
- b. Being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.

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- a. Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss
- b. Any liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission.
- Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.
- 6. Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war) civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequence of any of the said occurrences and in the event of any claim hereunder the insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.

For complete list of exclusions including Section-wise exclusions, refer the policy wordings



10	Special Conditions and Warranties (if any)	Special Conditions		Policy Wording - Conditions
		Explain obligations of the Policyholder		
		•The insured shall take all reasonable steps to safeguard the ve in efficient condition and the Company shall have at all times free any part thereof or any driver or employee of the insured. In the e shall not be left unattended without proper precautions being tak the vehicle be driven before the necessary repairs are effected at damage to the vehicle shall be entirely at the insured's own risk.  •The due observance and fulfillment of the terms, conditions and relate to anything to be done or complied with by the insured and the prepared to be done or complied with a sale like any likely its of	e and full access to examine the vehicle or vent of any accident or breakdown, the vehicle ten to prevent further damage or loss and if my extension of the damage or any further dendorsements of this Policy in so far as they determine the truth of the statements and answers in	
		the said proposal shall be conditions precedent to any liability of this Policy.	the Company to make any payment under	
11	1. Notice shall be given in writing to the Company immediately upon the occurrence of any accidental loss or damage in the event of any claim and thereafter the insured shall give all such information and assistance as the Company shall require.  2. No admission offer promise payment or indemnity shall be made or given by or on behalf of the insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the insured the defence or settlement of any claim or to prosecute in the name of the insured for its own benefit any claim for indemnity or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the insured shall give all such information and assistance as the Company may require.  3. In the event of the death of the sole insured, this policy will not immediately lapse but will remain valid for a period of three months from the date of the death of insured or until the expiry of this policy (whichever is earlier).			
		• Sample claim calculation process		
		Mr. ABC has Commercial Vehicle Secure (Goods Carrying Vehic The claim amount (for Own Damage Section) for this vehicle will		
		Details	Amount (INR)	
		Vehicle Repair Cost	50,000	
		Amount assessed by surveyor	48,000	
		Depreciation applicable (Part Depreciation: Metal as per age, plastic 50%, Glass nil)	5,000	
		Compulsory deductible	1,000	
		** The above claim calculation is subject to change as per Add o conditions	on covers opted and policy terms and	
12	Policy Servicing - Claim Intimation and ProcessingÂ	Toll free / IVRS number of the insurer: 1800 266 4545 (8 AM Tole Website / Email: www.zurichkotak.com/ care@zurichkotak.com Details of designated company officials to be contacted in time zkgi.motorclaimservices@zurichkotak.com  Details of procedure to be followed for cashless service (In careimbursement of claim	n e of claim:	
		In case of cashless process, please follow the below mentioned	d process	
		Call our 12 hours helpline with details of accident and policy/co	ver note number.	
		<ul> <li>Once the claim is registered, the customer support executive w Number.</li> </ul>	ill provide you with a Claim Reference	
		You will need to submit relevant documents to us such as - Drivaccordance with the Policy terms and conditions.	ving license, RC copy, Policy copy etc. in	
		We will arrange for an inspection in		
		- 24 hours, if a claim is reported on a working day		
		- Next working day, if a claim is reported on Sunday or Public holi	iday	
		On cashless facility confirmation, the vehicle would be repaired would be made directly to the garage.	d at a cashless garage and the payment	
		•You will only have to pay the deductible as mentioned in the poli informed by the surveyor.	icy and the depreciation value, salvage etc. as	
		In case of reimbursement process, you will have to submit docul Company Ltd., and we will make the payment within 7 days of co of documents required is mentioned in the claims form which co www.zufichkorak.com	ompletion of documentation. The detailed list	



		Appointment of surveyor	Immediate after intimation	
		Survey report submission	15 days	
		Claims canaluded by the incurer	within 7 days after receipt of final	
		Claims concluded by the insurer	survey report	
			Within 7 days after receipt of final	
		Settlement of claims	survey report and/or the last relevant	
		Sottomont of diames	and necessary document as the case	
			may be	
		Escalation Matrix when TAT is not satisfied		
		Level 1	regional.motorclaims@zurichkotak.com	
		Level 2	zonal.motorclaims@zurichkotak.com	
		Level 3	head.motorclaims@zurichkotak.com	
113	Grievance Redressal and Policyholders protection	ressal For resolution of any query or grievance, Insured may contact the respective branch office of the Company or		Policy Wording - Grievance Redressa
14	Obligations of the Policyholder/	brought to the notice of the insurer immediately Non-disclosure of material information may aff Disclosure of other material information during	to the already declared information the same shall be extract the claim settlement.	

# **Declaration by the Policy Holder**

I have read the above and confirm having noted the details.

Place

Signature of the Policy Date Holder

- Note:
  i. Please visit https://www.zurichkotak.com/documents/customer-support/downloads for product related documents including CIS
- ii. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail



## Transcript cum Proposal Form - Commercial Vehicle Secure (Goods Carrying Vehicle)

#### Important Information for the Insured:

- 1. This is a transcript of the details declared by you on the e-proposal and shall be the basis of underwriting of the policy. Request you to carefully review the complete information provided under this transcript and get back to us within 15 days of issuance of this document, in case there is any discrepancy found.
- 2. The policy is subject to receipt of complete premium and the risk under the Policy shall commence only from the date as specified in the policy schedule.
- 3. This document has to be read in conjunction with the policy schedule/document.
- 4. Refund, if any, with regard to the premium paid, would be processed in the same source / account (net banking / credit card / debit card) from where the premium payment has been originally made subject to policy terms and conditions.
- 5. The policy is subject to the underwriting guidelines of the Company and the details as declared by the Insured under the e-proposal.
- 6. Online premium payment should be made by the policyholder himself. No third party payment should be made using this mode of payment.
- 7. The Policyholder/ Insured has fully understood the terms and conditions of the Policy including all the features available thereunder.

Proposal No : 202411190040545

Proposal for : Rollover Policy

20,066.00 Premium Amount (Inclusive of all applicable taxes)

Type of cover: Comprehensive Policy

Registration No.	Vehicle Make/Model/Variant	Type of body	Fuel Type
WB65C4682	MAHINDRA AND MAHINDRA /BOLERO/PICK-UP FB 1.25T BSIV		Diesel

Year of Manufacture	IDV of Body	IDV of Chassis	Engine Number Chassis Number		Engine Number Chassis Number (G		Gross Vehicle Weight (GVW) (for Goods Carrying Vehicle) / Cubic Capacity/KW
2017	86,000	3,64,000	TBH1K94972	MA1ZU2TBKH1K75275	2975		

Special conditions:

## PROPOSER / OWNER'S DETAILS

1. Title and Name	e of the Insured:	Mr. Md Asharaful	Sk					
0 l	*	S/O MD MAHIMU	S/O MD MAHIMUDDIN SEKH R/O SULTANGANJ COLLEGE MORE SULTANGANJ KALIACHAK District: MALDA 732201					
2. Insured Permanent Address*		WEST BENGAL(1	WEST BENGAL(19), India					
If Correspondence	e Address different fro	m S/O MD MAHIMU	DDIN SEKH R/O SULTA	ANGANJ COLLEGE	MORE SULTANGANJ KALIACHAK Malda - 732201 District:			
Permanent Addre	ess,please provide*:	MALDA WEST BE	ENGAL, India					
3.Phone		4.Mobile *	9932212960	5.Email ID*	SAKIRULSEKH2960@GMAIL.COM			
6.Gender	Male	7.Date Of Birth *	01/03/1984	0 N-4:	Indian Resident			
6.Gender Male 7.Date Of Birth * 01/03/1984 8.Nationality Indian Resident				Indian Resident				

 Proposal Date & Time:
 19/11/2024
 12:34

 Policy Start Date:
 20/11/2024
 00:00

 Policy End Date:
 (Comprehensive)
 19/11/2025 at midnight

## Limitations as to use (GCV):

Goods Carrying Vehicle: The policy covers use only under a permit within the meaning of the Motor Vehicles Act, 1988 or such a carriage falling under subsection (3) of Section 66 of the Motor Vehicles Act, 1988. The policy does not cover use for: a) Organized racing b) Pace Making c) Reliability trials d) Speed testing.

**Driver's Clauses:** Any person including insured: Provided that a person driving hold an effective Driving License at the time of accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective Learners' License may also drive the Vehicle and that such a person satisfies the requirement of Rule 3 of the Central Motor Vehicle Rules, 1989.

### STATUTORY WARNING PROHIBITION OF REBATES (Under Section 41 of Insurance Act 1938)

- 1) No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property, in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer.
- 2) Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to ₹ 1,000,000/-



# VEHICLE DETAILS

Registration Authority and RTO Location	Date of Registration	CNG/LPG/Bi Fuel	Lease / Hire / Hypothecation (Name and address of concerned parties)	Color of Vehicle	No of Wheels
MALDA	21/12/2017	Diesel	CHOLAMANDALAM INVESTMENT & FINANCE CO LTD		4

*Insured Declared Value of the Vehicle (in INR)	IDV of Chassis (in INR)	*Non - Electrical Accessories fitted to the Vehicle (in INR)	*Electrical & Electronic Accessories fitted to the Vehicle (in INR)	*Trailer (in INR)	*CNG / LPG Kit (in INR)	*Total Value (in INR)
86,000	3,64,000	0	0	0	0	4,50,000

# **OPTIONAL ADD-ON COVERS**

1. ☐ Depreciation Cover#	2. ☐ Engine Protect	#If Depreciation cover is selected: Voluntary Deductible offered under the
<ol><li>☐Return to Invoice</li></ol>	<ol> <li>Consumable Cover</li> </ol>	"Depreciation Cover", which would be applied over and above the Compulsory
5. □Road Side Assistance	<ol><li>6. ☐ Key Replacement</li></ol>	Deductible? No
5. I Road Side Assistance	Sum Insured	
7. □NCB Protect	<ol><li>Additional PA Cover for Owner Driver</li></ol>	
7. LINCB PIOLECL	Sum Insured	
9. ☐Hospital Cash Benefit	10. ☐EMI Protect	
Max No. of days Select	Monthly Amount	
Per day benefit Select	No of EMIs Select	
11. ☐ Additional Towing Charges	12. ☐Loss of Income	
Sum Insured	Max No. of days Select	
Julii ilisuled	Per day benefit Select	

# **RISK INCLUSION / EXCLUSION**

*Personal Accident Cover of INR 15,00,000     for the Owner Driver	*Nominee Name and Age	*Relationship	*Name of Appointee (if nominee is a minor)	Relationship to the Nominee		
ioi the Owner Driver						
2. Do you wish to include Personal Accident	Name	CSI Opted (Rs)	*Nominee Name	Relationship		
cover for the Named passenger? No Please give details mentioned aside:						
3. Do you wish to include Personal Accident cover for the Un-named Passengers / hirer / pillion passenger? No Please give details mentioned aside:  No. of Persons As Per Seating Capacity  C. S. I. (Per Per						
Please give details mentioned aside:						
# The maximum CSI available per person is ₹	2,00,000, each in multiples of ₹	f 10,000.				
4. Do you wish to restrict Third Party Property	Damage of ₹ 7.5 Lakh to the st	atutory TPPD liability limit of	₹ 6,000/- only? No			
5. Legal liability against Third Party Risks: Do y person (2)	rou wish to cover legal liability?	A) Paid Driver and/or Conduc	ctor and/or Cleaner (IMT 28) 🗹 Y	es □No If Yes, no of		
B) Legal Liability to Employee (IMT 29) ☐ Yes I	▼No If Yes, no. of Person: C	C) Unnamed Passengers ☐Ye	es  No If Yes, no. of Person:	0		
Compulsory Personal Accident (PA) Cover for owner-driver (PA Cover for Owner –Driver is compulsory for individual vehicle owners)  hereby declare that the Owner Driver does not require Compulsory Personal Accident Cover as  _  Owner Driver has a separate existing Personal Accident cover against Death and Permanent Disability (Total and Partial) for Sum Insured of atleast 15 acs. Tenure years     to      _  The Vehicle to be insured is not owned by an individual  _  The Owner Driver does not have an effective driving license.  Note: Where the owner driver owns more than one vehicle, compulsory PA cover can be granted for any one vehicle as opted by him/her). Personal Accident cover for owner driver is compulsory for Sum Insured of 15 lacs for Two-wheeler, Private Car and Commercial Vehicles. Compulsory PA Cover for Owner Drivers cannot be granted where the vehicle is owned by a company, a partnership firm or a similar body corporate.						
	PPE #01	IS INCURANCE DETAILS				

	NGHDA	

	PREVIOUS INSURANCE DETAILS					
Name and address of the previous insurer	LVGI-thth					
2. Previous Policy Type Comprehensive	3. Previous Policy Number	201330140923700089800000	4. Existing bonus 35 %			
5. Period of Insurance 20/11/2023	To 19/11/2024					
6. Details of Claims made: No						
Whether you are entitled to No Claim Bonus?	☑ Yes □NO					



## **DETAILS OF DEPRECIATION**

#### Table 1:Schedule of depreciation for arriving at IDV:

The Insured's declared value (IDV) of the vehicle will be deemed to be the 'Sum insured' and it will be fixed at commencement of each policy period for each insured vehicle

Age of The Vehicle % of Depreciation for fixing IDV		Age of The Vehicle	% of Depreciation for fixing IDV
Not exceeding 6 Months	5%	Exceeding 2 years but not exceeding 3 years	30%
Exceeding 6 months but not exceeding 1 year	15%	Exceeding 3 years but not exceeding 4 years	40%
Exceeding 1 year but not exceeding 2 years	20%	Exceeding 4 years but not exceeding 5 years	50%

**Note:** IDV of obsolete models of vehicles (i.e. Models which the manufacturers have discontinued to manufacture) and vehicles beyond 5 years of age will be determined on the basis of an understanding between the insurer and the insured.

## **PAYMENT DETAILS**

Payment Mode: PAYMENT AGGREGATOR Payment Reference No: 21609932849 Payment Amount: 20,066.00 Payment/Transaction Date: 19/11/2024

Bank Details:

I confirm that the premium is paid out of my legitimate sources of fund and the Company has the right to call for documents to establish sources of funds. The Company has the right to cancel the policy in case I am/have been found guilty by any competent authority or court of law of violating any law/regulation.

Intermediary Code: 3601770000

As verified using OTP sent on mobile number ending with 2960 on 19/11/2024 or as submitted by you in the physical proposal form.



# **TAX INVOICE**



Details of Receiver (Billed	i To)	Details of Supplier (billed	by)
GSTIN/UIN		Name :	Zurich Kotak General Insurance Company (India) Limited
Customer ID	1018142965	GSTIN:	19AAFCK7016C1ZQ
Customer Name	MD ASHARAFUL SK	Pan Number :	AAFCK7016C
Email ID	SAKIRULSEKH2960@GMAIL.COM	CIN:	U66000MH2014PLC260291
Contact No	9932212960	Address:	White HouseOffice Space No 2B(1)2Nd Floor 119Kolkata West Bengal 700016.
Address	S/O MD MAHIMUDDIN SEKH, R/O SULTANGANJ COLLEGE MORE SULTANGANJ KALIACHAK, MALDA, 732201, WEST BENGAL, India	Date of Invoice	19/11/2024
IMD Code	3601770000	Invoice No	5167499400
Receipt No	1202501363760	Proposal No	202411190040545
		Partner Application No	
State Code	19	State Code:	19
Place Of Supply Name	WEST BENGAL - 19	State Name	WEST BENGAL
		IRN	

HSN/SAC Description	HSN / SAC Code	Total Value of Supply (Rs.)	Taxable value of Supply (Rs.)	CGST Rate	CGST Amt (Rs.)	SGST Rate	SGST Amt (Rs.)
Motor Vehicle Insurance	997134	16049	16049	6%	962.94	6%	962.94
Services		1772.34	1772.34	9%	159.51	9%	159.51
Total		17821.34	17821.34		1122.45		1122.45
Total Invoice Value (In Figure)							20,066.00
Total Invoice Value (In Words)  Twenty Thousand Sixty Six							
Whether Tax Payable on a Reverse Basis or Not							No

For: Zurich Kotak General Insurance Company (India) Limited

Authorized Signatory

"I/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."