

Ref No.: GEN/WEL/SG/0008.3/5169072300

Date: 20/11/2024

To,
Mr. Dhananjay Sharma
SICK LANE KARL MARX SARANI
SOUTH EASTERN RAILWAY
KOLKATA
Kolkata - 700043
District: KOLKATA
WEST BENGAL, India
Contact Details 9830544955



Policy number: 5169072300 CKYC ID: 50061508534945

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

Dear Mr. Dhananjay Sharma,

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: 5169072300

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



# INSURED DETAILS

Name: Mr. Dhananjay Sharma

Address: SICK LANE KARL MARX SARANI SOUTH EASTERN

RAILWAY KOLKATA Kolkata - 700043 District: KOLKATA

WEST BENGAL(19), India

Place of Supply: WEST BENGAL

Supply State Code: 19 Phone: NA

Mobile: 9830544955

Email: MPG770038@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: 20/11/2024

Cover Note No: NA

Hypothecated to: MAHINDRA AND MAHINDRA

FINANCIAL SERVICES INDIA LTD

# VEHICLE DETAILS

Registration Number	Manufact	turer	Model	Variant	Year o Manufact	 RTO Location	Engine Number		Chassis/ hassis No.	Seating Capacity	Gross Vehicle Weight
NEW	MAHIND AND MAHIND		BOLERO	MAXX PICKUP HD 1.7 LX	2024	ALIPORE	TTR4H23758	MA1RE2T	TKR6H29195	2	3480
IDV of Bo (in ₹)	dy	IC	oV of Chassis (in ₹)	Non - Elect Accessories fitt Vehicle (i	ed to the	ectrical & Electronic essories fitted to the Vehicle (in ₹)	Trail (in		CNG / L (in	.PG Kit ₹)	Total Value of the Vehicle (in ₹)
0			9,61,589	0		0	0		C	)	9,61,589

# PREMIUM COMPUTATION TABLE (IN ₹)

Section I		Section II	
Own Damage		Liability	
Basic Own Damage	3,367.48	Basic TP Including TPPD Premium	16,049.00
Add:		LL to Employed / paid driver / Conductor / cleaner	50.00
Cover for Lamps Tyres Tubes Mudguards Bonnet Side parts 505.12		Legal Liability to Paid Driver and/or Conductor and/or Cleaner	50.00
Total Own Damage Premium (A) 3,872.60		(IMT 28)	00.00
		Total Liability Premium (B)	16,149.00
		Section III	
		Personal Accident	
		Total Personal Accident Premium (C)	0.00
Taxable value of Services (A+B+C)			20,021.60
CGST 9%			357.53
CGST 6%			962.94
SGST 9%			357.53
SGST 6%			962.94
Total Premium (in ₹ )			22,663.00
**GST amount represent 18% on OD component (Section I) and 12% on Liabil	lity (Section II) and is	split into equal proportion wherever applicable.	

Geographical Area INDIA Additional Excess ₹ 0 Compulsory Deductible ₹ 500

No. of Claims for Depreciation Cover Voluntary Deductible for Depreciation Cover ₹ Total Deductible ₹ 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, 39, A.3, 7, 23 Printed/herein/attached hereto Under Hire Purchase Agreement with NA



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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	5169072300		

## **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 20 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 nex	t column)	Policy Clause Number			
1	Product Name	Commercial Vel	nicle Secure (Goods Carrying Vehicle)					
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN152RP00	008V04201516					
3	Structure	<ul> <li>Indemnity</li> </ul>	State basis of Sum/Limit Insured ndemnity Fixed Benefit					
4	Interests Insured		Commercial Vehicle Secure (Goods Carrying Vehicle) is designed to provide insurance cover to Goods carrying Commercial Vehicles					
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 the 'SUI is fixed at the commencement of each policy period for the instruction accessories if any fitted to the vehicle) is to be fixed listed selling price of the brand and model as the vehicle insurval and adjusted for depreciation.	on the basis of the				
		Section	Coverage	Sum Insured				
		Section I	Loss of Or Damage to The Vehicle Insured	Refer below table				
		Section II	Liability to Third Parties	As per Court Order				
		Section III	Towing Disabled Vehicle	INR XXXXX				
		Section IV	Personal Accident Cover for Owner-Driver	INR 15,00,000/-				
		Insured Decla	red Value (IDV) of the Vehicle (INR)	INR 9,61,589				
		Non - Electric	al Accessories fitted to the vehicle (INR)	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 9,61,589				
		The Compan accessories on texceed:  a. For total loss vehicle (inclub. For partial los actual and reper limits spectif a damaged write-off the settlement (but the Company d. In the event defective the documentary liability insurante of the company of the company of the company liability insurante of the company liability insurant	y may at its own option repair reinstate or replace the vehicle of or may pay in cash the amount of the loss or damage and the I / constructive total loss/cash-loss of the vehicle - the Insured's ding accessories thereon) as specified in the Schedule less theses, i.e. losses other than Total Loss/Constructive Total Loss, asonable costs of repair and/or replacement of parts lost/damedified.  I motor vehicle is assessed as being unrepairable and hence a Company shall grant the Policyholder the option to retain the weing the IDV less the assessed value of Salvage based on controlleding any submitted by or through the insured). Of a 'cash-loss' settlement, the Company is entitled to cancel the date of damage. Additionally, the Company can cancel the statulicy after requiring the insured to either cancel the road registrate evidence in original thereof or alternatively evidence in original thereof or alternatively evidence in original thereof or salvage as a CTL if the aggregate cost of retrievems and conditions of the policy, exceeds 75% of the IDV of the	Declared Value (IDV) of the evalue of the wreck. (cash-loss of the vehicle - aged subject to depreciation as wreck i.e. a 'total loss' or reck and accept a 'cash loss' nepetitive quotes procured by e Own Damage insurance tory Motor Third Party Liability tion of the wreck and submit a statutory Motor Third Party				
		Illustration of ID	<u></u>					
			Example: Ex-showroom price of the vehicle is INR 10	,00,000.				
			al Vehicle Secule (Goods Carrying Vehicle Years IRDAN152RP					



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, Section III, Section IV

Policy Wordings -

General Exclusions (Applicable to all

Sections of the Policy)

## 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

B 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

- 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.

4.

- 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 vein efficient condition and the Company shall have at all times free any part thereof or any driver or employee of the insured. In the exhall not be left unattended without proper precautions being take the vehicle be driven before the necessary repairs are effected and 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 said proposal shall be conditions precedent to any liability of		
11	Admissibility of Claim	this Policy.  1. Notice shall be given in writing to the Company immediately up damage in the event of any claim and thereafter the insured sh	Policy Wording - Conditions	
		as the Company shall require.  2. No admission offer promise payment or indemnity shall be mad without the written consent of the Company which shall be entit in the name of the insured the defence or settlement of any clai insured for its own benefit any claim for indemnity or otherwise conduct of any proceedings or in the settlement of any claim ar information and assistance as the Company may require.  3. In the event of the death of the sole insured, this policy will not period of three months from the date of the death of insured or earlier).		
		Sample claim calculation process		
		Mr. ABC has Commercial Vehicle Secure (Goods Carrying Vehicl The claim amount (for Own Damage Section) for this vehicle will	be calculated as below:	
		Details Vehicle Repair Cost	Amount (INR) 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	
		Total Claim payable  ** The above claim calculation is subject to change as per Add oconditions	n 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 TC 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 ca reimbursement of claim	se of Motor Insurance) as well as for	
		In case of cashless process, please follow the below mentioned		
		<ul> <li>Call our 12 hours helpline with details of accident and policy/cov</li> <li>Once the claim is registered, the customer support executive wi Number.</li> </ul>		
		You will need to submit relevant documents to us such as - Drivi accordance with the Policy terms and conditions.		
		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 holid		
		On cashless facility confirmation, the vehicle would be repaired would be made directly to the garage.		
		•You will only have to pay the deductible as mentioned in the polic informed by the surveyor.		
		In case of reimbursement process, you will have to submit docur Company Ltd., and we will make the payment within 7 days of co of documents required is mentioned in the claims form which ca www.zunchkorak.com.	mpletion of documentation. The detailed list	



		Turn Around Time (TAT) for claims settlement		
		Appointment of surveyor	Immediate after intimation	
		Survey report submission	15 days	
		Claims concluded by the insurer	within 7 days after receipt of final survey report	
		Settlement of claims	Within 7 days after receipt of final survey report and/or the last relevant 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	
13	Level 3 head.motorclaims@zurichkota		te an e- mail at care@zurichkotak.com.  The Insured may contact the Grievance Officer of the case if the Insured is not satisfied with the solution the control of seniorgrievanceofficer@zurichkotak.com/  Stactory you may approach Insurance Regulatory and Bima Bharosa Portal: https://bimabharosa.irdai.gov.in.  The Insured may contact the Grievance Regulatory and Bima Bharosa Portal: https://bimabharosa.irdai.gov.in.  The Insured may contact the Grievance Regulatory and Bima Bharosa Portal: https://bimabharosa.irdai.gov.in.  The Insured may contact the Grievance Regulatory and Bima Bharosa Portal: https://bimabharosa.irdai.gov.in.  The Insured may contact the Grievance Regulatory and Bima Bharosa Portal: https://bimabharosa.irdai.gov.in.	Policy Wording - Grievance Redressal
14	Obligations of the Policyholder/	in the proposal form and other connected documen	the already declared information the same shall be at the claim settlement. The policy period.  It shall mean all relevant information sought by the company ts to enable it to take informed decision in the context of e, Usage of the Vehicle, Claim details (accident date, spot	

# **Declaration by the Policy Holder**

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

Place

Date Signature of the Policy 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.

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- 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.

9.61.589

7. The Policyholder/ Insured has fully understood the terms and conditions of the Policy including all the features available thereunder.

Vehicle Make/Model/Variant

Proposal No : 2024112	00040726
Proposal for : New Pol	icy
22,663.00	Premium Amount (Inclusive of all applicable taxes)

Type of cover: Comprehensive Policy

Registration No.

NEW		DRA AND MAHINDRA MAXX PICKUP HD 1.7 LX	Diesel		Diesel
Year of Manufacture	IDV of Body	IDV of Chassis	Engine Number	Chassis Number	Gross Vehicle Weight (GVW) (for Goods Carrying Vehicle) / Cubic Capacity/KW

Type of body

TTR4H23758

**Fuel Type** 

3480

MA1RE2TTKR6H29195

Special conditions:

2024

## PROPOSER / OWNER'S DETAILS

1. Title and Name of the Insured:		Mr. Dhananjay S	Mr. Dhananjay Sharma					
2. Insured Permanent Address*		SICK LINE KAR	L MARX SARANI WEST	PORT KOLKATA K	OLKATA District: KOLKATA 700043 WEST BENGAL(19), India			
f Correspondence Address different from Permanent Address,please provide*:		SICK LANE KAI BENGAL, India	RL MARX SARANI SOUT	H EASTERN RAIL\	NAY KOLKATA Kolkata - 700043 District: KOLKATA WEST			
3.Phone		4.Mobile *	9830544955	5.Email ID*	MPG770038@GMAIL.COM			
6.Gender	Male	7.Date Of Birth *	02/04/1988	8.Nationality	Indian Resident			
Proposal Date &	Time: 20/11/202	V4 11:07						

Proposal Date & Time: 20/11/2024 11:07

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
ALIPORE	20/11/2024	Diesel	MAHINDRA AND MAHINDRA FINANCIAL SERVICES INDIA LTD KOLKATA		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)
0	9,61,589	0	0	0	0	9,61,589

# **OPTIONAL ADD-ON COVERS**

1. ☐ Depreciation Cover#	2. ☐ Engine Protect	#If Depreciation cover is selected: Voluntary Deductible offered under the				
3. ☐ Return to Invoice	4. ☐ Consumable Cover	"Depreciation Cover", which would be applied over and above the Compulsory				
5 EBaad Cida Assistance	<ol><li>6. ☐ Key Replacement</li></ol>	Deductible? No				
5. ☐ Road Side Assistance	Sum Insured					
7. FNCB Protect	8. Additional PA Cover for Owner Driver					
7. I NOB Protect	Sum Insured					
<ol><li>☐ Hospital Cash Benefit</li></ol>	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 ilisuleu	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)	f Relationship to the Nominee			
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 As Per Seating Capacity  C. S.							
Please give details mentioned aside:							
# The maximum CSI available per person is ₹	2,00,000, each in multiples of ₹	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 (1)	ou wish to cover legal liability?	A) Paid Driver and/or Condu	ctor and/or Cleaner (IMT 28) 🗹 Y	es □No If Yes, no of			
B) Legal Liability to Employee (IMT 29) TYes	No If Yes, no. of Person: C	i) Unnamed Passengers ☐Y	'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.							
	PREVIOL	JS INSURANCE DETAILS					
. Name and address of the previous insurer							
Previous Policy Type 3. Previous Policy Number 4. Existing bonus %							

1. Name and address of the previous insurer		
2. Previous Policy Type	3. Previous Policy Number	4. Existing bonus %
5. Period of Insurance	То	
6. Details of Claims made:		

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: 21617040357

Payment Amount: 22,663.00

Payment/Transaction Date: 20/11/2024

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 4955 on 20/11/2024 or as submitted by you in the physical proposal form.



# **TAX INVOICE**



Details of Receiver (Billed	Details of Receiver (Billed To)		by)
GSTIN/UIN		Name :	Zurich Kotak General Insurance Company (India) Limited
Customer ID	1018158074	GSTIN:	19AAFCK7016C1ZQ
Customer Name	DHANANJAY SHARMA	Pan Number :	AAFCK7016C
Email ID	MPG770038@GMAIL.COM	CIN:	U66000MH2014PLC260291
Contact No	9830544955	Address:	White HouseOffice Space No 2B(1)2Nd Floor 119Kolkata West Bengal 700016.
Address	SICK LANE KARL MARX SARANI, SOUTH EASTERN RAILWAY, KOLKATA, KOLKATA, 700043, WEST BENGAL, India	Date of Invoice	20/11/2024
IMD Code	3601770000	Invoice No	5169072300
Receipt No	1202501366597	Proposal No	202411200040726
		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		3972.6	3972.6	9%	357.53	9%	357.53
Total		20021.6	20021.6		1320.47		1320.47
Total Invoice Value (In Figure)							22,663.00
Total Invoice Value (In Words)		Twenty	Two Thousand	Six Hundre	d Sixty Three		
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."