

Ref No.: GEN/WEL/SG/0008.3/5161780900

Date: 15/11/2024

To,
Mr. Hindal Ghosh
LICHUBAGAN ITACHUNA MANDARAN
PANDUA HOOGHLY
Hooghly - 712147
District: HOOGHLY

WEST BENGAL, India Contact Details 9143295656

Policy number: 5161780900 CKYC ID: 60081066915804

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

Dear Mr. Hindal Ghosh,

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

TO DOWNLOAD

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: 5161780900

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



INSURED DETAILS

Name: Mr. Hindal Ghosh

Address: LICHUBAGAN ITACHUNA MANDARAN PANDUA

HOOGHLY Hooghly - 712147 District: HOOGHLY WEST

BENGAL(19), India

Place of Supply: WEST BENGAL

Supply State Code: 19 Phone: NA

Mobile: 9143295656

Email: BICKYSINGS668@GMAIL.COM

GSTIN: 19BPRPG2068D1ZR

POLICY DETAILS

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

Period of Insurance:

From: 15/11/2024 00:00 to: 14/11/2025Midnight

Policy issued on: 15/11/2024

Cover Note No: NA

Total Deductible ₹

500

Hypothecated to: INDUSIND BANK 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
NEW	TATA	INTRA V30	PICKUP CLB BSVI	2024	HOOGHLY	15CR09JVXS A5696	MAT535355RYJ37776	2	2565

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 ₹)
0	8,00,000	0	0	0	0	8,00,000

PREMIUM COMPUTATION TABLE (IN ₹)

Section I		Section II		
Own Damage		Liability		
Basic Own Damage	4,297.60	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	644.64	Legal Liability to Paid Driver and/or Conductor and/or Cleaner	50.00	
Total Own Damage Premium (A)	4,942.24	(IMT 28)	50.00	
<u> </u>	-	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)			21,091.24	
CGST 9%			453.80	
CGST 6%			962.94	
SGST 9%			453.80	
SGST 6%			962.94	
Total Premium (in ₹)			23,925.00	
**GST amount represent 18% on OD component (Section I) and 12% on Liab	ility (Section II) and i	s split into equal proportion wherever applicable.		
	_			
leographical Area INDIA Additional	Excess ₹	0 Compulsory Deductible ₹		

INTERMEDIARY DETAILS

No. of Claims for Depreciation Cover

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

Voluntary Deductible for Depreciation Cover ₹



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



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	5161780900		

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 15 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	Description (Please refer to applicable Policy Clause Number in next column)			Policy Clause Numb	
1	Product Name	Commercial Vehicle Secure (Goods Carrying Vehicle)				
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN152RP00	IRDAN152RP0008V04201516			
3	Structure	State basisIndemnityFixed Bene	of Sum/Limit Insured			
4	Interests Insured	Commercial Ve	hicle Secure (Goods Carrying Vehicle) is designed to ercial Vehicles	provide insuranc	ce 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.	the insured ver	nicle.	
		Section	Coverage	Sum I	nsured	
		Section I	Loss of Or Damage to The Vehicle Insured		below table	
		Section II	Liability to Third Parties		Court Order	
		Section III	Towing Disabled Vehicle	INRXX	XXX	
		Section IV	Personal Accident Cover for Owner-Driver	INR 15	5,00,000/-	
			red Value (IDV) of the Vehicle (INR) al Accessories fitted to the vehicle (INR)		INR 8,00,000 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 8,00,000	
		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	constructive Total Loss y may at its own option repair reinstate or replace the very repair may pay in cash the amount of the loss or damage 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 Tot asonable costs of repair and/or replacement of parts to edified. I motor vehicle is assessed as being unrepairable and I Company shall grant the Policyholder the option to reta 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 ca date 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 or ance policy covering the wreck effective the date of dama vehicle shall be treated as a CTL if the aggregate cost of ms and conditions of the policy, exceeds 75% of the IDV	nd the liability of sured's Declared less the value of all Loss/cash-los est/damaged submence a wreck in the wreck and on competitive ancel the Own Due statutory Motoregistration of the original a statuto age.	f the Company shall d Value (IDV) of the of the wreck. ss of the vehicle - oject to depreciation as e. a 'total loss' or l accept a 'cash loss' quotes procured by bamage insurance or Third Party Liability ne wreck and submit ry Motor Third Party	
	-	Illustration of ID	<u> </u>		he 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 eshall 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 said proposal shall be conditions precedent to any liability of this Policy.	the Company to make any payment under			
11	Admissibility of Claim	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 Tollow) 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.			
		Once the claim is registered, the customer support executive w Number.	ill provide you with a Claim Reference			
		You will need to submit relevant documents to us such as - Driv accordance 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.	l 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 documents required is mentioned in the claims form which can www.zunchkotak.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	
		Social ment of dialing	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	For resolution of any query or grievance, Insured is may call toll free number 1800 266 4545 or may vole and toll free number 1800 266 4545 or may vole and told free number 1800 266 4545 or may vole and told free number 1800 266 4545 or may vole and told free free free free free free free fre	Policy Wording - Grievance Redressa	
14	Obligations of the Policyholder/	brought to the notice of the insurer immediately Non-disclosure of material information may affe Disclosure of other material information during	to the already declared information the same shall be ect 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 : 202411150030210 Proposal for : New Policy

23,925.00 Premium Amount (Inclusive of all applicable taxes)

Type of cover: Comprehensive Policy

	Registration No.		Registration No.		Registration No.		Registration No.		Vehicle M	ake/Model/Variant	Type of body	Fı	iel Type
			TATA /INTRA V30/PICKUP CLB BSVI				Diesel						
	Year of Manufacture	II	DV of Body	IDV of Chassis	Engine Number	Chassis Number	Gross Vehicle Weight (GVW) (for Goods Carrying Vehicle) / Cubic Capacity/KW						
	2024		0	8,00,000	15CR09JVXS A5696	MAT535355RYJ37776	2565						

Special conditions:

PROPOSER / OWNER'S DETAILS

Title and Name of the Insured:		Mr. Hindal Ghosh						
2 Insured Permanent Address*			S/O MUKUL GHOSH,MANDARAN,LICHUBAGAN,PANDUA HOOGHLY ITACHUNA District: HOOGHLY 712147 WEST BENGAL(19), India					
If Correspondence Addr Permanent Address,ple		LICHUBAGAN ITA	ACHUNA MANDARAN P	ANDUA HOOGHLY	Hooghly - 712147 District: HOOGHLY WEST BENGAL, India			
3.Phone	4.1	Mobile *	9143295656	5.Email ID*	BICKYSINGS668@GMAIL.COM			
6.Gender Male	7.1	Date Of Birth *	10/09/1988	8.Nationality	Indian Resident			
Proposal Date & Time:	15/11/2024	15:56						
Policy Start Date:	15/11/2024	00:00						

Limitations as to use (GCV):

Policy End Date:

(Comprehensive)

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)

14/11/2025 at midnight

- 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	and RTO Location Date of Registration Fuel		Lease / Hire / Hypothecation (Name and address of concerned parties)	Color of Vehicle	No of Wheels
HOOGHLY	15/11/2024	Diesel	INDUSIND BANK 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	8,00,000	0	0	0	0	8,00,000

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. □Road Side Assistance	 6. ☐Key Replacement Sum Insured 	Deductible? No
7. □NCB Protect	 Additional PA Cover for Owner Driver 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	
	Per day benefit Select	

RISK INCLUSION / EXCLUSION

1. *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 Briver								
2. Do you wish to include Personal Accident cover for the Named passenger? No Same CSI Opted (Rs) *Nominee Name F								
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 Person)								
Frease give details memoried 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 s	tatutory 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 Conduct	or and/or Cleaner (IMT 28) ▽ Y	es ☐No If Yes, no of				
B) Legal Liability to Employee (IMT 29) ☐ Yes	▼ No If Yes, no. of Person: (C) Unnamed Passengers ☐Ye	s ✓ 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) I 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 lacs.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.								
PREVIOUS INSURANCE DETAILS								
1. Name and address of the previous insurer								
2. Previous Policy Type	2. Previous Policy Type 3. Previous Policy Number 4. Existing bonus %							
5. Period of Insurance	Го							
6. Details of Claims made:								

Whether you are entitled to No Claim Bonus? $\hfill \square \, Yes \, \, \hfill \square \, NO$



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: 21573351813 Payment Amount: 23,925.00 Payment/Transaction Date: 15/11/2024

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 5656 on 15/11/2024 or as submitted by you in the physical proposal form.



TAX INVOICE



Details of Receiver (Billed To)		Details of Supplier (billed by)			
GSTIN/UIN	19BPRPG2068D1ZR	Name :	Zurich Kotak General Insurance Company (India) Limited		
Customer ID	1018118845	GSTIN:	19AAFCK7016C1ZQ		
Customer Name	HINDAL GHOSH	Pan Number :	AAFCK7016C		
Email ID	BICKYSINGS668@GMAIL.COM	CIN:	U66000MH2014PLC260291		
Contact No	9143295656	Address:	White HouseOffice Space No 2B(1)2Nd Floor 119Kolkata West Bengal 700016.		
Address	LICHUBAGAN ITACHUNA MANDARAN , PANDUA HOOGHLY, HOOGHLY, 712147, WEST BENGAL, India	Date of Invoice	15/11/2024		
IMD Code	3601770000	Invoice No	5161780900		
Receipt No	1202501344051	Proposal No	202411150030210		
-		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		5042.24	5042.24	9%	453.80	9%	453.80
Total		21091.24	21091.24		1416.74		1416.74
Total Invoice Value (In Figure)	23,925.0						23,925.00
Total Invoice Value (In Words) Twenty Three Thousand Nine Hundred Twenty Five Thousand Nine Hundred Twenty					Twenty Five		
Whether Tax Payable on	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."