

DEVELOPMENT HOUSE, 24 Park Street , Kolkata -700016 (www.magmahdi.com) IRDA REG NO. 149 DATED 22nd MAY,2012

CIN: U66000WB2009PLC136327
In case of any query, assistance or claims, please contact us at 1800 266 3202

UIN: IRDAN149RP0003V01201213
PRIVATE CAR LIABILITY ONLY

Date: 11/11/2024

To, Mr PRASANTA PAUL S/O DHIRENDRA NATH PAUL119 DUMDUM ,ROAD MOTIJHEEL SOUTHDUMDUM M KOLKATA WEST BENGAL 700074 Mobile:9007013767



Agent/ Intermediary Name and Code: CERTIGO INSURANCE BROKERS PRIVATE LIMITED BRC0000519

Sub: Risk Assumption Letter

Dear Sir /Madam,

Thank you for choosing Magma-HDI General Insurance Company Limited as your preferred General Insurance Company. Please find enclosed Policy No. P0025200004/4190/100082, which has been issued based on the details furnished to us as below:

Insured & Vehicle Details							
Name of Insured	Mr PRASANTA PAUL						
Period of Insurance	13/11/2024 TO 12/11/2025						
Vehicle Make/Model	MARUTI / ALTO K10 VXI AMT (O)						
RTO	BANGAON						
Vehicle Registration No.	WB 28 0586						
Vehicle Registration Date	05/11/2015						
Engine No.	K10BN7583855						
Chassis No.	MA3EZDE1S00189575						
Reason for not opting PA Cover of Owner Driver :							
1) Do not hold a valid driving license							

The information received from you is reproduced in the proposal attached with this Risk Assumption Letter and your proposal has been processed accordingly.

Coverage of risk is subject to realisation of the full premium post which, insurance coverage under the policy would commence. In case the premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

If you require any changes in the certificate of insurance cum policy schedule, you are requested to inform us by either writing to us at customercare@magma-hdi.co.in or calling our toll free helpline on 1800 266 3202. Absence of any communication from you in this regard within a period of 20 days of date of this letter, would mean that the issued policy is in order and as per your proposal. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered as null and void without the same.

Dear Customer, Magma HDI general Insurance Company may be storing your AML/KYC details and might require you to update the information submitted from time-to-time, in accordance with and requirements under the Master Guidelines on Anti-Money Laundering/ Counter Financing of Terrorism (AML/CFT), 2022 issued by the Insurance Regulatory Development Authority of India.

Thanking You, Regards

For Magma HDI General Insurance Co Ltd.

Mayork Tankan Authorised Signatory

Policy Number: P0025200004/4190/100082







DEVELOPMENT HOUSE, 24 Park Street , Kolkata -700016 In case of any query, assistance or claims, please contact us at 1800 266 3202 UIN: IRDAN149RP0003V01201213

PRIVATE CAR LIABILITY	ONLY
ATE OF INSURANCE CUM SCHE	DILLE /TAX INVOICE

BER, 24 PARK STREET ,KOLKATA -700016 ,WEST BENGAL , PH: (1800) 2663202 Policy Servicing Office 4TH FLOOR, ANUJ CHA

CERTIFIC

Policy No P0025200004/4190/100082

Mr PRASANTA PAUL Insured Address

S/O DHIRENDRA NATH PAUL119 DUMDUM ,ROAD MOTIJHEEL SOUTHDUMDUM M

KOI KATA

WEST BENGAL 700074

Mobile:9007013767 9007013767 Contact Number

RAJATSARKAR100@GMAIL.COM Email ID:

Unregistered GST Numbe

Period Of Insurance

Agent No.: Agent Contact No.: Email ID:

00:00 Hrs of 13/11/2024 To Midnight of 12/11/2025

BRC0000519 9109447500

info.certigoinsurance@gmail.com

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION									
Registration No. & RTA Location	Trolley Serial ID	Trolley Chassis No.	Year of Manufacture	Type of Body	Make/Model of Vehicle	Engine no	Chassis no	СС	SEATING CAPACITY
WB 28 0586/ BANGAON			2015	SALOON	MARUTI/ ALTO K10 VXI AMT (O)	K10BN7583855	MA3EZDE1S00189575	998	5

LINDILI I				
LIABILITY(B)	₹			
Basic - TP	2,094.00			
LL to Paid Driver IMT 28	50.00			
Sub Total	2,144.00			

Premium Computation					
Total Liability Premium	2,144.00				
CGST @ 9%	192.96				
SGST @ 9%	192.96				
TOTAL	2,530.00				

Disclaimer: The Exclusions in this policy are as specified in the pre inspection report ID

LIMITATIONS AS TO USE - As per Motor Vehicles Rules, 1989.

The Policy covers use of the vehicle for any purpose other than: a) Hire or Reward, b) Carriage of goods (other than samples or personal luggage), c) Organized racing, d) Pace making, e) eed testing, f) Reliability Trials, g) Any purpose in connection with Motor Trade

DRIVERS CLAUSE

Any person including the Insured

Provided that a person driving holds an effective driving license at the time of the accident and is not disgualified from holding or obtaining such a license;

rovided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules,

LIMITS OF LIABILITY

Damage to Third Party Property Rs. 750000/- in respect of any one claim Under Excess in respect of each and every claim under Sec I of Under In respect of any one Under Under PA Owner - Driver as Section II-I (i) Section II-I (ii) Section III: Compulsory: Voluntary: Total: 1otor Vehicle Act or series of claims arising out of one computation table

Subject to I.M.T Endorsement Nos. IMT 28

Pollution Under Control(PUC)

Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate at the time of issuance of policy.

I/We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of chapter X and chapter XI of M.V. Act, 1988

Premium Collection Details :- [Collection No - ReceiptDate - Amount] : P/200004/25/100653149- 11/11/2024 , ₹ 2530

Premium Amount in Word's (?) :- Two Thousand Five Hundred Thirty Only

In case of Claims, please contact us at 1800 266 3202

Consolidated Stamp Duty on the issue of General Insurance Policies Paid vide G.O No. 1289, dated 09.08.2024

GST Number of MHDI - 19AAGCM1685C1ZG GST Invoice Number - POL1911250001351

GST Invoice Date - 11/11/2024 Accounting Code for Service - 997134, Motor vehicle insurance services

Place of Supply: WEST BENGAL (19)

Date of Issue: 11/11/2024 : Kolkata

Whether Tax is payable on Reverse Charge - No UIN: IRDAN149RP0003V01201213

This is a valid Tax invoice in terms of Sub-rule 2 of Rule 54 of CGST Rule 2017. Further, being an Insurance Company, issuing of e-invoice and QR Code are not applicable on us in terms of Notification No 13 and 14 of 2020 dated 21st March 2020 issued from Central Board of Indirect Taxes and Customs. 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 we are not required to prepare an invoice in terms of the provisions of the said sub-rule

IMPORTANT NOTICE

The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation English version will be good. Please note that any misrepresentation, non disclosure or withholding of material facts will lead to cancellation of policy ab initio with forfeiture of premium and non consideration of claim, if any.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 31st October of the next financial year. For Complete details of coverage , terms, conditions & exclusion please refer the standard policy wording attached with this schedule

- 2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.

 3) This document is digitally signed, hence counter signature / stamp is not required.
- This document is digitally signed, hence counter signature / stamp is not required. For detailed terms & conditions please refer our website www.magmahdi.com

For Magma HDI General Insurance Co. Ltd. Mayonk Tankin

Authorised Signatory

Policy Number: P0025200004/4190/100082

CUSTOMER INFORMATION SHEET

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

Sr No T	itle	Description								
	Product Name	(Please refer to the Policy Clause Number in next column) PRIVATE CAR LIABILITY ONLY			lumn)					
	Policy Number	P0025200004/4190/100082								
	Jnique Identification Number (UIN)	UIN: IRDAN149RP0003V01201213								
	illotted by IRDA Structure	Indemnity								
5 1	interests Insured	Vehicle Third Party liability Third party property Damage								
6 5	Sum Insured / Motor Insured Declared	Vehicle Total IDV:	otal IDV:							
V	Value Scope Policy Coverage	*IDV illustration as shown in the CIS As mentioned in policy schedule								
	only Coverage	As niemoned in policy Schedule LL to Paid Driver IMT 28 Basic - TP Damage to Third Party Property Rs. 750000								
	Add-on Cover									
9 L	oss Participation	We will not pay the amount mentioned GENERAL EXCEPTIONS (Applicable to a								
10 E	Exclusions	Each vehicle should be used only for the vehicle is used for other purposes or drough and the vehicle is used for other purposes or drough and the vehicle is used to the vehicle is unrelated to these issues	e purpo iven by not cov mage, o	oses lis some ered or liabi	sted in the RC. We won't cover a one who isn't an approved driver lity related to war, invasion, civil	. Check the driver's clause for details.				
	Special Conditions and Warranties (if iny)	Please read the policy wording and the policy schedule together. The words and expressions mean the same whether it appears in either of the document Immediately inform us if the insured vehicle meets with an accident or there is a situation for which you would want to claim. Be transparent and submit all communications that you may receive from a third party. If you suspect any legal action related to your claim do inform us in advance We will manage the claim process on your behalf. Do provide any information that we may need We can either repair, replace, or pay the cash value for the vehicle or its parts. The amount we will pay is limited to: (a) For a total loss: the vehicle's Insured Declared Value (IDV) minus the value of the wreck. (b) For partial losses: the reasonable repair or replacement costs, minus depreciation. Please maintain and protect the vehicle. Leaving it unattended after a break down or using in damaged condition can cause further damage which will not be paid. We expect you will allow us to speak to the drive and your employees if required This policy can be cancelled by you any time buy giving us a 7 days' notice in advance. We will refund the premium that you had paid after collecting short period charges. In the rare event, if required we can also cancel the policy but by sending a 7 days' notice. We will refund the premium after deducting the amount for the period your policy was active. If you will try to claim under other polices for the same incident, we will share the cost proportionately You and the other party can agree to resolve any disputes about this policy through arbitration, following the rules of the Arbitration and Conciliation Act, 1996. (This doesn't apply to retail customers.) You must follow all the terms and conditions and provide truthful information in the proposal form. If not followed the Company is not obligated to make any payments. If you are the only person insured by the policy and you pass away, the policy won't end right away. It will remain								
		b) Proof of ownership of the vehicle c) The original Policy *You need to inform us in writing as soon as an accident or loss happens. *We must have a chance to inspect the damaged vehicle before any repairs are started. *If your vehicle meets with an accident or gets damaged, do not drive it in the same condition to avoid further damage. Also, don't leave it unattended without securing it adequately to prevent further loss. INDICATIVE LIST OF DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT Accident Claims *Duly signed claim form *Registration Certificate* of the vehicle Driving license* of the driver at the time of accident *Police panchanama / FIR, if accident reported to the police								
		Original estimate of repairs KYC documents Fitness certificate of the vehicle (for commercial vehicles) Road permit of the vehicle (for commercial vehicles) Goods receipt/ Lorry Receipt of the vehicle (for commercial vehicles) FIR in case of Riots, Strike & Malicious acts. It is mandatory Original repair invoice with payment receipt after repairs have been completed Theft of Entire Vehicle Claims Duly signed Claim Form FIR Copy RTO transfer papers* (Form 28, 29 and 30) and Form 35/NOC signed by financier, if applicable Letter of subrogation KYC documents NOC from financier, if hypothecation exists Copy of intimation letter to RTO on the vehicle theft Original policy document Non traceable certificate Original vehicle registration certificate All original keys of the vehicle/service book/original purchase invoice								
12 A	Admissibility of Claim	*Original documents to be shown when requested by the company if we need any more documents that can assist the claim process, we will seek your help on getting those We will process your claim within 7 days after receiving all the necessary documents. If we decide to deny your claim, we will do so within 7 days of the Survey Report or any additional reports, following the IRDAI Regulations 2017 and any updates to these regulations.								
		Sample Claim Calculation Process for Motor Repair Loss			Jan LUSS					
		Di	T-	Tay						
			Price	Tax	*Di-ti (D)					
		Parts Allowed			*Depreciation (D)	Total Assessed Value (V)				
			(P)	(T)	D1					
		Parts Allowed Replaced Parts M Replaced Parts R	(P)	(T)		Total Assessed Value (V) M1=A1+B1-D1 M2=A2+B2-D2				
		Replaced Parts M	(P) A1	(T) B1	D1	M1=A1+B1-D1				

Policy Number: P0025200004/4190/100082

			Labour Allowed	Price		*D	epreciation (D)	Total Assessed Value (V)		
			Labour 1	(P) a1	(T) b1		d1	L1=a1+b1-d1		
			Labour 2	a2	b2		d2	L2=a2+b2-d2		
			Labour 3	a2	b3		d3	L3=a3+b3-d3		
				Fotal Lat		net	us	L = L1+L2+L3		
				iotai Läl	oui C	USL		L - LI+LZ+L3		
			Compulson, Ballan E	c		۸.	nor Policy	С		
			Compulsory Policy Exces				per Policy			
			Voluntary Policy Excess				ed by Insured	V		
			Spot Repair / Towing Cha	rge	As	per policy !	Section 1. Point 3, 4	Т		
		•Denr	To eciation %	tal Insu	rer Liat	bility		Total Liability = M+L+T-C-V		
		Depre •Salva We w	ciation will apply according to Se age	tly from	you.	. , We'll handl	le the disposal ourselv	policy terms. es. If you want to keep the salvage,		
			Here's how you can reach us: 24/7. Feel free to contact us w				Toll Free No- 1800 266	5 3202		
			Website				https://www.magmah	idi.com/		
			Email				customercare@magma	a-hdi.co.in		
13	Policy Servicing - Claim Intimation and		Ask MIRA				Chat with us at www.magmahdi.com Or			
.5	Processing		4				WhatsApp on 7208976789			
			F. C. i. Cili							
			For Senior Citizens				Namaskar@magma-ho			
			Social media				Facebook and LinkedI	n		
		www. https:	Office Address: To know your nearest branch visit www.magmahdi.com >> Contact Us >> Locate Us https://www.magmahdi.com/more/contact-us?f=b. For redressal of grievance you may contact:							
		Level 1: Grievance Redressal Officers at our branches available at www.magmahdi.com >> Contact Us >> Grievance Redressal https://www.magmahdi.com/documents/d/magma-hdi/branch-grievance-officer-list								
		Level	2: gro@magma-hdi.co.in							
	Grievances Redressal and Policyholders		Level 3: Raise a complaint with the Insurance Regulatory and Development Authority (IRDAI) Call us on our toll-free number 1800 266 3202 To register complaint online log on to www.bimabharosa.irdai.gov.in							
14	Protection	Level 4: If you are still dissatisfied with the resolution offered by us you have the option to contact the Office of the Insurance Ombudsman								
		To know the guidelines, log on to www.cioins.co.in/About								
		To check list of Insurance Ombudsman Offices, log on to www.cioins.co.in/Ombudsman								
		www.	To know about our policy on Protection of Policy Holder's Interest log on to www.magmahdi.com >> Legal >> Protection Of Policyholder's Interest Policy Your policy will be canceled if you omit any key information on the proposal form.							
15	Obligation of Policyholder	If you need to update or change any important information about your policy, please contact our Customer Service at 1800 266 3202 or email us at customercare@magma-hdi.co.in.								
Vehicle Age at t	rice of vehicle: Rs. 10 Lakh the time of renewal: 5 years basis age of vehicle: 50%									
	tal Loss (CTL): sidered CTL if the aggregate cost of retrieval or rep eciation is applied for TL/CTL claims	pair exc	eeds 75% of its IDV.							
			Declaration by the Polic	y Holde	<u>er</u>					
✓ I have re	ead and confirm having noted the details.									
Place: KOLKATA										
Date: 11/11/20	<u>24</u>							(Cinnahum as the Belle Lett		
								(Signature of the Policyholder		
For detailed or	olicy terms and conditions please refer to the polic	v wordii	ngs available on www magmahd	i.com o	r conta	act us on to	ll free number 1800 26	Digital Acknowledgement Recei		
pt	, , , , , , , , , , , , , , , , , , ,	,	J. E.EEE.S On MANAGEMENT		-5.10	511 10		· · · · · ·		