

Auto Secure - Standalone Own Damage Private Car Policy

Renewal Business--

Name : SIMITA CHAKRA FT RTY

Address : R/O UPL-080402 UPOHAR THE CONDOVILLE 2052

CHAK GARIA,PANCHASAYAR,,,KOLKATA KOLKATA,WEST BENGAL,700107.

Phone No: 9163390687

Dear SIMITA CHAKRABORTY,

We thank you for reposing your faith in us by renewing yourvehicle insurance policy. Your policy has been renewed as per youradvice and incorporates changes (if any) requested by you.

We are enclosing policy schedule cum certificate of insurance of your vehicle. You can access policy wordings, on our website www.tataaig.com. You may also reach us at our 24*7 helpline 1800 266 7780 in case you desire to have a printed copy of policy wording.

As our valued customer, you will continue to enjoy a host of value added benefits and give the extra protection that your vehicle needs.

We assure you of our best services at all times. Happy driving!

Date : 07/10/2024

Your Policy Details

Policy Number : 6202045201 01 00

Own Damage Policy Period: From 14/10/2024 to. Midnight of

13/10/2025

Premium Paid : ₹11,112.00

In case of an accident, notify us first

Benefits:



7000+ network garages



Less deductions on repair claims*



4 hr. TAT for claims inspection

*No salvage value deducted









Tata AIG General Insurance Co. Ltd., 7th and 8th Floor, Romell Tech Park, Cama Industrial Estate, Western Express Highway, Goregaon(E), Mumbai, Maharashtra 400063





Certificate Of Insurance and Policy Schedule Form 51 of the Central Motor Vehicle Rules, 1989

Agent Name: CERTIGO INSURANCE BROKERS PRIVATE LIMITED

Agent License Code: 808

Agent Contact No.: 9669003000

Policy Number: 6202045201 01 00 Policy Type: Auto Secure-Standalone Own Damage Private Car Policy Policy Code: 00/01/3184/05

Alternate Policy Number: Q300183623281

Name & Address of Insured Period of Insurance

Name: SIMITA CHAKRABORTY

Address: R/O UPL-080402 UPOHAR THE CONDOVILLE 2052 CHAK

GARIA, PANCHASAYAR, , , KOLKATA, KOLKATA, WEST

BENGAL, 700107

(Section - I Own Damage) From 00:01 Hours on 14/10/2024 To Midnight of 13/10/2025 .

Contact Number: 9163390687 **Customer Id**: 6146595917

GSTIN:

Place of Supply: WEST BENGAL

TOTAL OWN DAMAGE PREMIUM (A)

Section 1 Add On Covers ©

Add: Depreciation Reimbursement (TA 01)

Supply Code: 19

RTO LOCATION: KOLKATA Geographical Area: India ZONE : A

Hire Purchase / Hypothecation / Lease With:

Lessor GSTIN Number :

Contract / Ioan / Ref No. :

Registration Number	Make / Model / Body Type	Engine Number	Chassis Number	Mfg. Year	CC/K W	Trailer Registration No. / Chassis No.	Licensed carrying Capacity including driver
WB 06 X 7510	MARUTI/BREZZA ZXI PLUS PETROL/SLIV	K15CN702860 4	MA3RYHL1SNJ1 39205	2022	1462		5

Insured Declared Value (IDV) INR

YEAR	IDV_VECHILE	NONECC	ECC_ELECT_A	CNG_LPG	TRAILER	SIDE_CAR	TOTAL_IDV		
1	903312	0	0	0	0		903312		
		•	SCHEDUL	E OF PREMIUM	OF PREMIUM				
Section - I OWN DAMAGE (A)				Section - II ADDONS (B)					
Own Damage Premium on Vehicle & Accessories				NET PREMIUM ₹ 9,4			₹ 9,417.00		
				IGST @18%			₹ 1,695.00		
Basic OD	Basic OD Premium ₹ 5.931.15			TOTAL POLICY I	₹ 11,112.00				
Add: Repair Glass Fiber plastic ₹ 0.00									
Discounts Under Own Damage Section				7					
Less: No claim bonus (25%) ₹ 1,482.79									

TOTAL ADD ON PREMIUM (C)		4,968.22		
Certificate & Policy No.	Policy Type	Insurance Company Name	TP Cover Start Date	TP Cover End Date
OG-23-9910-1825-00058 693	PackageComprehensive	ICICI LOMBARD GENERAL INSURANCE CO.	14/10/2022	13/10/2025

₹ 4,448.78

₹ 4,968.22

Drivers Clause: Persons or classes of persons entitled to drive: Any person including the insured. Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's License may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Limitations as to Use: The Policy covers use of the vehicle for any purpose other than : a) Hire or Reward other than for the purpose of driving tuitions b) Carriage of goods (other than samples or personal luggage) c) Organized racing d) Pace Making e) Speed testing f) Reliability Trials g) Any purpose in connection with Motor Trade

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LIMITS OF LIABILITY

Number of claims covered under Depreciation Reimbursement Cover: 2

Basis of claim settlement for Tyre Secure cover :

Imposed Excess:

Deductible Under Section I Compulsory Deductible: ₹ 1,000.00

Voluntary Deductible : ₹ 0.00

₹ 0.00

Franchisee: ₹ 0.00

Engine Secure Deductible- 5% of claim amount in case of repair and 10% of claim amount in case of replacement

Subject to: A) IMT Endorsement Number : 22

B) TATA AIG Auto Secure Endorsement Number (TA): 01, 08

NOMINATION DETAILS

Name of the Nominee	Relationship with insured	Name of Appointee (If nominee is minor)	Relationship with Nominee	
NA	NA	NA	NA	

UIN Numbers: ,IRDAN108RP0001V01201920/A0007V01201920(TA 08)

,IRDAN108RP0001V01201920/A0003V01201920(TA 01)

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.

In witness whereof this Policy has been signed at MUMBAI on 07/10/2024

Receipt No.(s): 104001086241053 07/10/2024

Stamp Duty of Rs.0.25/ - 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., videthis Order No. LOA/ENF1/CSD/55/2024/4453 Validity Period Dt.23/09/2024 To Dt.13/09/2027/4453 Date:06/09/2024

GSTIN: 22AABCT3518Q1Z6 CHHATTISGARH

Service Account Code: 997134

Policy Servicing Office: 1ST FLOOR, 106-7 WALLFORT OZONE, BILASPUR ROAD, NEAR FAFADIH CHOWK RAIPUR RAIPUR CHHATTISGARH RAIPUR-492001

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.

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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 Vehicles Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. This policy does not cover pre existing damages as per Inspection photographs and Report

Note: This Schedule, Policy terms and conditions available on company website and Endorsements mentioned herein above shall read together and word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear the same meaning wherever it may appear. Any amendments/modifications/alterations made on this system generated policy document is not valid and Company shall not be liable for any liability whatsoever arising from such changes. Any changes required to be made in the policy once issued, would be valid and effective, only after written request is made to the Company and Company accepts the requested amendments/modifications/alterations and records the same through separate endorsement to be issued by the Company. You are advised to go through the policy schedule cum certificate of insurance which is issued based on your declaration and if any error/ discrepancy is found in respect of vehicle details, No Claim Bonus or any other material information, it should be brought to our notice within 15 days of receipt of this policy for necessary correction along with the supporting documents, otherwise it will be deemed correct. You may visit company website at www.tataaig.com for detailed benefits, terms & conditions & exclusions of the policy. You may also reach us at our 24*7 helpline 1800 266 7780 in case you desire to have a printed copy of policy wording. Our grievance redressal procedure and details about ombudsman is also available in our policy wording. Please note that any misrepresentation, not specifically seek confirmation on No Claim Bonus availed by you from your previous insurer. In case we receive confirmation that you had lodged claim with them then we will forfeit all the benefits under section I i.e. own damage section of the policy.

For Policy wordings, please scan the below QR code:



For TATA AIG General Insurance Company LTD.

Authorized Signatory



INSURANCE ACT 1938 Section 41 Prohibition of Rebates

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 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 prospectus or tables of the Insurer.

2. ANY PERSON MAKING DEFAULT IN COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHED WITH A FINE WHICH MAY EXTEND TO TEN LAKHS RUPEES

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Tata AIG General Insurance Company Limited



RECEIPT

Receipt No. 104001086241053 Receipt Date: 07/10/2024

Policy No: 6202045201 01

Received with thanks from SIMITA CHAKRABORTY a sum of 11112 (Rupees Eleven Thousand One Hundred Twelve And Paise Zero Only) vide Cheque no. 180419 dated 05/10/2024 drawn on HSBC BANK, PAYABLE AT PAR branch GARIAHAT, KOLKATA towards

SI.No.	No. Policy Number Total Premium		Utilized from the receipt for policy ₹	Balance ₹
1	6202045201	11,112.00	11,112.00	0.00

Note:

- 1. This is a computer generated receipt and does not require a signature.
- 2. Upon issuance of this Receipt, all previously issued temporary receipts, if any, related to this Policy shall be considered null and void.
- 3. Amounts received by cheque shall be subject to realisation.
- 4. Any amount received in excess of the Premium is being/shall be refunded by the Company.

GSTIN: 22AABCT3518Q1Z6 CHHATTISGARH Service Accounting Code: 997134

Revenue (Consolidated) Stamp Duty paid vide challan No. LOA/ENF1/CSD/30/2024/2807 date 09/07/2024 for applicable cases

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Tata AIG General Insurance Company Limited

Transcript of Proposal for Auto Secure - Standalone Own Damage Private Car Policy



1 Name (Registered Owner of the Motor Vehicle)*: SIMITA CHAKRABORTY

R/O UPL-080402 UPOHAR THE CONDOVILLE 2052 CHAK GARIA, PANCHASAYAR, "KOLKATA, 2 Address For Communication*:

KOLKATA, WEST BENGAL, 700107.

3 Vehicle Details : Please refer policy schedule cum certificate

Fuel Type: PETROL

5 Insured's Declared Value - Please refer policy schedule cum certificate.

6 Previous Insurance Particulars*:

Policy Number: OG-23-9910-1825-00058693 Date of inception of TP portion: 14/10/2022 Date of Expiry of TP portion: 13/10/2025

Type of Cover: Package

7 Period of insurance desired from*: 14/10/2024 to midnight of 13/10/2025

8 Financier's Details: Please refer policy schedule cum certificate

9 Extra Benefits opted

Personal Accident Cover for Owner Damage:

Age: Name of the Nominee: NA RelationShip: NA

Name of Appointee (if Nominee is Minor): NA Relationship to the Nominee: NA

Battery No: Charger No:

10 Restriction of Cover/Discounts/Concessions/Extended Covers

Name of Automobile: No Membership no: No

Is Voluntary Deductible opted: No Amount of Deductible opted: 0

Vehicle is fitted with Anti Theft Device approved by ARAI: N/A

11 Add on covers: Please refer policy schedule cum certificate.

12 Bank Details (Required for Refund / Claims)

Name of the Account Holder: Name of Bank & Branch:, IFSC Code of Bank: Account Number :

13 Declaration for No Claim Bonus: (If NCB Confirmation is not submitted but NCB claimed)

I/We declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring Policy Period (Copy of Policy enclosed). I/We further undertake that if this declaration is found incorrect all benefits under the Policy in respect of Section 1 of the Policy will stand forfeited.

- 14 I hereby give my consent to receive one page insurance policy.
- 15 AML Guidelines:
 - 1. I/we hereby confirm that all premiums paid / payable in future will be from bonafide sources and not paid out of proceeds of crime and that such premiums are not disproportionate to my/our income. I / we understand that the Company has the right to call for documents to establish sources of funds and to cancel the insurance policy in case I / we are found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering law in India.
 - 2. I / we are not Politically Exposed Persons * nor are their close relatives / family members / associates. I / we shall keep the company informed if we subsequently become a Politically Exposed Person / close relative / family member / associate of Politically Exposed Persons. "Politically Exposed Persons" shall have the meaning assigned to it under Prevention of Money-Laundering (Maintenance of Records) Amendment Rules, 2023 as amended from time to time.
- ¹⁶ We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness certificate, as applicable.

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