

Ref. No. W82283977

RANISATI TRANSPORT CO PVT LTD C/O- ASHOK KUMAR AGRAWAL AT/PO- PURUNAKATAK **BOUDH** ORISSA 762014 Mobile No: 7064368722

**Sub: Risk Assumption Letter** 

Dear Sir/Madam,

Thank you for choosing ICICI Lombard General Insurance Company Limited (ICICI Lombard) as your preferred service provider.

Please find enclosed Policy No. 3003/159617071/02/000, which has been issued based on the below mentioned details:

Insured & Vehicle Details						
Name of Insured	RANISATI TRANSPORT CO PVT LTD					
Period of Insurance	Nov 21, 2020 to Nov 20, 2021					
Vehicle Make / Model	ASHOK LEYLAND / ECOMET 1212 SMART					
RTO City	ORISSA-SAMBALPUR					
Vehicle Registration No.	OD27B7671					
Vehicle Registration Date	Nov 21, 2018					
Engine No.	JAHZ436726					
Chassis No.	MB1AXGCD9JRYZ0429					
Current Year NCB(%)	25%					
Previous Policy Details						
Previous Policy No.	3003/159617071/01/000					
Previous Policy Period	21-11-2019 to 20-11-2020					
Previous Year NCB(%)	20%					
Claims Made Under Previous Policy	0					
Previous Insurer Name	ICICI LOMBARD					
Previous Policy Type	Comprehensive Package					

The information provided above is based on the information received from you and accordingly, the policy has been processed. 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.

We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness certificate, as applicable.

If you require any changes in the Certificate of Insurance cum Policy Schedule, you are requested to inform us by writing to customersupport@icicilombard.com or calling our 24 hour toll free helpline on 1800 2666. Absence of any communication within a period of 15 days of the date mentioned on this letter, would mean that the issued policy is in order and as per your proposal.

The information provided is merely illustrative and shall not be construed to be an evidence of existence of a contract of insurance. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered null and void without the same.

The Compulsory Personal Accident cover has not been opted in this policy on account that, the vehicle to be insured is not owned by an individual.

CORP/SUP/OPI/2014/1777

## CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

## **Goods Carrying Vehicles Package Policy**

Product Code: 3003 UIN: IRDAN115P0013V01200203



Insured Name : RANISATI TRANSPORT CO PVT LTD

Address : C/O- ASHOK KUMAR AGRAWAL, AT/PO- PURUNAKATAK,

BOUDH, ORISSA 762014

**Telephone No** : - **Mobile No**: 7064368722

Email Address : RANISATIPADDY@GMAIL.COM

Nominee Name : - Named Passenger's Nominee:

Relationship : - - - - Age : - - - -

GSTIN Number (Customer)

Servicing Branch Name : Bhubaneshwar

Policy No : 3003/159617071/02/000

Period of Insurance : Nov 21, 2020 00:00 to

Midnight of Nov 20, 2021

E-Policy No

: 0WHFD4XXKFPXFEPE181QKFC5P1YV7

Policy Issued On : Covernote No : 159617071

RTO Location : ORISSA-SAMBALPUR
Hypothecated To : HDB FINANCIAL SERVICES

LTD,SAMBALPUR
: Public Carrier

Vehicle Class : Public Ca

Category : 101120756280

Servicing Branch Address	:	Plot no.29,	Third Anuj B	Building Satya	Nagar,	Bhubaneshwar	Orissa	751007

	<u> </u>										
Registration No.	Make	Vehicle SubClass	Model	Model Build	Type of Body	GVW	Mfg Yr	Carrying Capacity	Chassis No.	Engine No.	Trailer Chassis No.
OD27B7671	ASHOK LEYLAND	TRUCKS	ECOMET 1212 SMART	PARTIALLY BUILT	Open	13800	2018	2	MB1AXGCD9J RYZ0429	JAHZ436726	0
Body IDV	Chassis IDV	Trailer	Electrical / El	Electrical / Electronic Accessories			ctrical Ac	cessories	CNG / LPG Unit	Tota	al IDV
(₹)	(₹)	(₹)	(₹)				(₹)		(₹)	(	(₹)
105000	959000	0	0				0		0	106	34000

(₹)	(₹)	(₹)		(₹)	(₹)	(₹)	(₹)		
105000	959000	0		0	0	0	1064000		
				Premiun	n Details				
	OWN D	AMAGE(A)		(₹)	LIABILITY(B)			(₹)	
Basic OD Premiu	um			7540	Basic Third Party Liability	33418			
IMT-23 Loading				1131	Total			33418	
Sub Total				8671	Add:				
Less:					Legal Liability to Paid Driver				
No Claim Bonus	25%			2168	Legal Liability for Cleaner/Conductor				
Sub-Total Deduc	tions			2168	Sub-Total Sub-Total			100	
					Less:				
					TPPD Discount			200	
					Sub-Total Deductions		200		
<b>Total Own Dama</b>	ge Premium(A)			6503	Total Liability Premium(B)			33318	
				Total Package Premium (A+B)		39821			
					Premium Taxable @ 12% (Basic 7		33218		
					- CGST @ 6%		1993.08		
					- SGST @ 6%			1993.08	
					Premium Taxable @ 18% (Other t	ty)	6603.00		
					CGST @ 9%		594.27		
					- SGST @ 9%			594.27	
					<del></del>			5175	
					Total Tax Payable in ₹				
					Total Premium Payable in ₹ 44996				
Geographical Ar	rea: India				Applicable IMT Clauses: 7, 20, 23, 21, 40				
Compulsory Deductible: ₹ 1000					Voluntary Deductible: ₹ 0				

				Voluntary Deductible: ₹ 0		
	Premium Collection No.	1119970179	Premium Amount	₹ 44996	Receipt Date	20-11-2020
	GSTIN Reg.No	21AAACI7904G1ZZ	HSN/SAC code	9971 / GENERAL INSURANCE SERVICES		

Limits of Liability: (a) Under Section II-I(i) of the policy: Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988. (b) Under Section II-I(ii) of the policy: Damage to Third Party Property ₹ 6000/-; PA Cover for Owner-Driver under Section III: CSI ₹ 0/-. The Compulsory Personal Accident cover has not been opted in this policy on account that, the vehicle to be insured is not owned by an individual. Limitations as to Use: The Policy covers use only under a permit within the meaning of the Motor Vehicles Act, 1988 or such a carriage falling under sub section (3) of Section 66 of the Motor Vehicles Act, 1988. The policy does not cover 1) Use for organised racing, pace making, reliability trails or speed testing, 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle 3) Use of carrying passengers in the vehicles; except employees(other than the driver) not exceeding the number permitted in the registration document and coming under the purview of Workmens's Compensation Act, 1923. Driver's 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 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. 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 hold good. Disclaimer: Please visit www.icicilombard.com for the policy wordings, for complete details on terms and conditions governing the coverage and NCB. This document is to be read with the policy wordings. The policy is valid subject to realization of cheque. We accept premium only via legally recognized modes. In case of dishonour of premium cheque, the company shall not be liable under the policy and the policy shall be void ab-initio. In case of any discrepancy with respect to the policy, please revert within 15 days from the policy start date. This policy is underwritten on the basis of the information provided by you and as detailed in the Risk Assumption Letter shared with you along with the policy. On renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change. Grievance Redressal: For resolution of any query or grievance you may contact us on our toll free no. 1800 2666, or visit any of our branch offices. You can also write to us at customersupport@icicilombard.com. For detailed grievance redressal mechanism please visit the "Grievance Redressal" section on our website www.icicilombard.com.

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 in lieu of Covernote no. 159617071. The stamp duty of ₹ 0.5 paid vide deface

In case of a claim, immediately notify ICICI Lombard General Insurance Company Limited on the Toll Free Number 1800 2666 / (Chargeable) 8655 222666 or SMS "CLAIM" to 575758

Mailing Address: ICICI Lombard General Insurance Company Limited Interface Building No. 16, 601 / 602, 6<sup>e</sup> Floor, New Link Road Malad (West), Mumbai - 400 064.

Registered Office Address: ICICI Lombard General Insurance Company Limited, ICICI Lombard House, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai - 400 025.

## CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

## **Goods Carrying Vehicles Package Policy**

Product Code: 3003 UIN: IRDAN115P0013V01200203



no. CSD134202021382020 dated Oct 08, 2020

Policy Issuing Office: ICICI Lombard General Insurance Company Limited, ICICI LOMBARD HOUSE, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai 400 025.

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.



Agency Code : 10074165

Agency Name : JYOTI RANJAN DAS

Agent's Contact No: 9776149559

Contact Person :