

Ref. No. W82283719

RANISATI TRANSPORT CO PVT LTD C/O- ASHOK KAUMAR 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. 3003/159621176/02/000, 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.	OD12B7671					
Vehicle Registration Date	Nov 21, 2018					
Engine No.	JAEZ429108					
Chassis No.	MB1AXGCDXJRYY9841					
Current Year NCB(%)	25%					
Previous Policy Details						
Previous Policy No.	3003/159621176/01/000					
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.

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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

C/O- ASHOK KAUMAR AGRAWAL, AT/PO- PURUNAKATAK, Address

BOUDH, ORISSA 762014

Mobile No: Telephone No 7064368722

RANISATIPADDY@GMAIL.COM **Email Address**

Named Passenger's Nominee: **Nominee Name**

21AAACI7904G1ZZ

Relationship Aae

GSTIN Number (Customer)

Servicing Branch Name Bhubaneshwar Policy No 3003/159621176/02/000

Nov 21, 2020 00:00 to Period of Insurance

Midnight of Nov 20, 2021

R8J1OTU0UNDPN3HSK7ECWBDJK5JTD E-Policy No

Policy Issued On

159621176 Covernote No

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

LTD.SAMBALPUR **Vehicle Class Public Carrier**

Category

Invoice Number 101120756225

Servicing Branch Address : Plot no.29, Third Anuj Building Satya Nagar, Bhubaneshwar Orissa 751007											
Registration No.	Make	Vehicle SubClass	Model	Model Build	Type of Body	GVW	Mfg Yr	Carrying Capacity	Chassis No.	Engine No.	Trailer Chassis No.
OD12B7671	ASHOK LEYLAND	TRUCKS	ECOMET 1212 SMART	PARTIALLY BUILT	Open	13800	2018	2	MB1AXGCDXJ RYY9841	JAEZ429108	0
Body IDV	Chassis IDV	Trailer	Electrical / Electronic Accessories		Non Electrical Accessories		CNG / LPG Unit	Total IDV			
(₹)	(₹)	(₹)	(₹)		(₹)		(₹)	(₹)			
105000	959000	0	0		0		0	1064000			

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105000 959000 0			0	0	0 0			1064000	
				Premiun	n Details				
	OWN DA	AMAGE(A)		(₹)		LIABILITY(E	3)		(₹)
Basic OD Premiu	m			7540	Basic Third Party Liability	/			3341
IMT-23 Loading				1131	Total				334
Sub Total				8671	Add:				
Less:					Legal Liability to Paid Driver				5
No Claim Bonus 2	25%			2168	Legal Liability for Cleaner		5		
Sub-Total Deduct	ions			2168	Sub-Total				10
					Less:				
					TPPD Discount				20
					Sub-Total Deductions				20
Total Own Damag	ge Premium(A)			6503	Total Liability Premium(B)				3331
					Total Package Premium (A	A+B)			3982
					Premium Taxable @ 12%	(Basic TP Lia	ibility)		3321
					- CGST @ 6%				1993.0
					- SGST @ 6%				1993.0
					Premium Taxable @ 18%	(Other than B	asic TP Liabilit	ty)	6603.0
					CGST @ 9%				594.2
					- SGST @ 9%				594.2
					Tatal Tan Daniella in F				F4:
					Total Tax Payable in ₹	-			517
					Total Premium Payable in	1 ₹			4499
Geographical Area: India				Applicable IMT Clauses: 7, 20, 23, 21, 40					
Compulsory Deductible: ₹ 1000				Voluntary Deductible: ₹ 0					

Geographical Area: India			Applicable IMT Clauses: 7, 20, 23, 21, 40					
Compulsory Deductible: ₹ 1000)		Voluntary Deductible: ₹ 0					
Premium Collection No.	1119970004	Premium Amount	₹ 44996	Receipt Date	20-11-2020			

9971 / GENERAL INSURANCE SERVICES

HSN/SAC code

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. 159621176. 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, 6th 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.

GSTIN Reg.No

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 :