



BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113)

Regd. Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India)

Certificate of Insurance (Two Wheeler Package Policy)

Policy Number: OG-18-9906-1753-9852166

Customer ID: 166903473

Particulars of Vehicle Insured:

Registration Number	Place of Registration	Engine Number	Chassis Number	Make & Model
TN58A2668	THIRUVARUR	U3S5C0F3636060	ME3U3S5C1FE16545	ROYAL ENFIELD - CLASSIC 800

Sub Type	Year of Mfg	NCB %	CC	Seating Capacity	Final Premium
ELECTRIC START DISC BREAK	2015	-25	350	2	Rs.2533.

Name of Registration Authority : THIRU

Name and Address of Insured : M.MARXXXXXX

: NEW ROAD, LAM POST, T.K THIRUVARUR
DIST

Geographical Area : India

Business or Profession : NA

Effective date of commencement of Insurance for the purpose of act:

Policy Inception Date: From O' Clock on 01-APR-2018

Policy Expiry Date: Midnight on 31-MAR-2019

Persons or Class 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 for any purpose other than

- Hire or Reward,
- Carriage of goods (other than samples or personal luggage),
- Organized racing,
- Pace Making,
- Speed testing,
- Reliability Trials,
- Any purpose in connection with Motor Trade

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.

Full address of Issuing Office :

Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar, Pune-411014
PH:1800-209-0144

Date of issue :26-FEB-2018

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.

Now carry your m-policy on your mobile. Click here to download. <https://goo.gl/ERkM2e>

Authorized Signatory

For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, 1800-22-5858, Toll Free: 30305858(chargeable, add area code before this number in case of mobile call) Email us at customer@bajajallianz.co.in or Visit our Website www.bajajallianz.com

Corporate Identification Number U66010PN2000PLC015329

Latest Schedule - 26-Feb-2018 14:58:30 PM- Silent Printing (Web) (9906)



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Regd. Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India)
TWO WHEELER PACKAGE POLICY SCHEDULE

Policy Issuing Office	Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar, Pune-411014 PH:1800-209-0144
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INSURED DETAILS	
Insured Name	X.MARXXXXXX
Insured Address	NEW ROAD, SERANGULAM POST , , MANNARGUDI T.K THIRUVARUR DIST, -614016
Geographical Area	India
Customer ID	1139065673
Bank Reference No 1	
GSTIN / UIN	NA
STATE CODE / NAME	33 - Tamil Nadu

POLICY DETAILS	
Policy Number	OG-18-9906-1753-9852166
Policy Issued on	26-FEB-2018 14:50 PM
Period of Insurance	From : 01-APR-2018 (Hrs)
	To:31-MAR-2019 Midnight
Cover Note Details	/
Previous Policy No	1203272312522645

Registration Number		Place of Registration	Engine Number	Chassis Number	Make & Model	SubType
1 TN50A2668		THIRU	U3S5C025365526	ME3U5663C1FE2 3872	ROYAL EN-FIELD - CLASSIC 800	ELECTRIC START DISC BREAK
NCB %	CC	Seating Capacity	Year Of Manufacturing	Hypothecation Details		
-25	350	2	2015			
Vehicle IDV		Value For Side Car	Non electrical accessories	Electrical/Elec-tronic accessories	Value of CNG/LPG kit	Total Value
91704		0	0	0	0	91704
Own Damage Premium(Rs.)			Liability Premium(Rs.)			
Own Damage Premium			1211	Basic Third Party Liability		887
Special Discount			0	PA Cover for Owner-Driver		50
Total OD Premium - A			1211	Total Act Premium - B		937
Total Premium (Net Premium) (A+B)			2147			
Integrated GST (18%)			386			
Final Premium (Rupees Two Thousand Five Hundred Thirty Three Only)			2533			

**Note: The above Total OD Premium is inclusive of all applicable Loading /Discounts viz (Automobile association membership, Voluntary Excess, Anti Theft, Handicap Person, Driver Tuition, Fiber Glass, CNG/LPG Unit, Geographical Extension, Imported Vehicle Etc. wherever Applicable)

Broker Code	10040010	Contact No.	0/0-0
Broker Name	COVERFOX INSURANCE BROKING PVT LTD		
E-Mail ID.			

For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, 1800-22-5858, Toll Free: 30305858(chargeable, add area code before this number in case of mobile call) Email us at custom-ercare@bajajallianz.co.in or Visit our Website www.bajajallianz.com

Corporate Identification Number U66010PN2000PLC015329



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Limitation as to Use	The Policy covers use of the vehicle for any purpose other than : Hire or reward, Carriage of goods(other than samples or personal luggage),Organised racing,Pace making, Speed testing, Reliability trials. Any purpose in connection with Motor Trade.
Driver	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 when not used for the transport of goods/passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.
Limits of Liability	Under section II-I(i) of the policy -> Death of or bodily injury : Such amount is necessary to meet there requirements of the Motor Vehicles Act,1988. Under section II-I(ii) of the policy -> Damage to Third Party Property : Rs. 100000
No Claim Bonus	The insured is entitled for a No Claim Bonus (NCB) on the Own Damage section of the policy, if no claim is made or pending during the preceding year (s), as per the following: 1. The preceding year: 20% , 2. Preceding Two consecutive years: 25% , 3. Preceding Three consecutive years: 35% , 4. Preceding Four consecutive years: 45% , 5. Preceding Five consecutive years: 50% No Claim Bonus will only be allowed provided the policy is renewed within 90 days of the expiry date of the previous policy.
Existing Damage Details	NA
Nominee Details	null - null
Subject to Warranties/ IMT-Endorsements/ Add on Package	22
Additional Details	Coinsurance Details: - . Transaction Id: -
Premium Details	Receipt No. 9906-01681360, Date 26-FEB-18 ** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque.
Excess Details	Compulsory Excess: Rs.100 Additional Excess: Rs.0 Voluntary Excess: Rs.0

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 & On Behalf of

Bajaj Allianz General Insurance Company Ltd.



Authorized Signatory

This document is digitally signed, hence counter signature / stamp is not required.

Consolidated Stamp Duty of Rs.0.5/- paid towards Insurance Stamps vide Challan No. MH010176711201718M Defaced No. 0005747963201718 dated 09-FEB-18 timing 13:12:55 of General Stamp Office,Mumbai,India.



BAGIC GST No : 27AABCB5730G1ZX | Principal Location : GE Plaza, Airport Road, Yerwada, Pune - 411006 PH:66026666 | Services Accounting Code : 997134 - Motor vehicle insurance services. No reverse charge is payable on these services. | Invoice No. : 94047494/1

Bajaj Allianz General Insurance Company Ltd.

Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar, Pune - 411014
Contact No: 1800-209-0144

RECEIPT

Receipt Number 9906-0555554

Receipt Date 26/03/2017

Business Channel WS

Received with thanks from X.MARXXXXXX

(Customer ID : 113903473) a total sum of Rupees Two Thousand Five Hundred Thirty Three Only by,

Instrument Type	Instrument No.	Instrument Date	Bank Name	Branch Name	Amount
Online Payment	38395569	26/03/2017			2,533

Total Amount Rs. **2,533.00**

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

* Cheque/DD/PO receipt is valid subject to realisation of the instrument.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.



Authorised Signatory

Regd.Office: GE Plaza,Airport Road, Yerwada, Pune - 411006