



युनाइटेड इंडिया इंश्यूरेंस कंपनी लिमिटेड
UNITED INDIA INSURANCE COMPANY LTD.
Registered & Head Office : 24, Whites Road, Chennai 600 014

75
Azadi Ka Amrit Mahotsav



UNITED INDIA INSURANCE COMPANY LIMITED

CERTIFICATE OF INSURANCE

MOTOR INSURANCE - GCV PUBLIC CARRIER OTHER THAN 3 WHEELER LIABILITY ONLY POLICY

(FORM 51 OF CENTRAL MOTOR VEHICLE RULES 1989)

Policy No.	0907003125P117066359	Certificate Number	0907003125P117066359
Customer Id	23562619331	Issuing Office Address	Code 090700
Name of the Insured	MR KALIMUTHU V	KAR TOWERS II FLOOR,R S ROAD, DINDIGUL	
Address of the Insured	200/202 P T COLONY KARUMBALAI ALAVANDAN MADURAI 625020 MADURAI TAMIL NADU	624001 DINDIGUL TAMIL NADU	Telephone (0451) 2433237,(0451) 2433258
Business/Occupation	Others	Mobile No.- *****4365	

Effective date of commencement of Insurance for the purpose of Act from 00:00 Hrs on Insured's Declared Value ₹ 0
03/02/2026

Date of Expiry of the Insurance Midnight on 02/02/2027

Particulars of Vehicle Insured

Registration No.	Vehicle	Trailer (if any)	Obsolete Vehicle	Engine No.	Chassis No.	Make/Model	Type of Body	Year of Mfg	HP/Cubic Capacity	GVW
TN - 64 - Q - 3273			No	275ID107FSYS65239	MAT445553HVF28295	TATA MOTORS LTD / TATA ACE FACELIT HT BSIV	Open	2017	702	1550
Registration Authority	Geographical Area					Financier		Seating Capacity		Public / Private
TN64 MADURAI (CENTRAL)	INDIA							2		Public

Amount in words: Sixteen thousand nine hundred sixty-nine rupees only

Persons or classes of persons entitled to drive:-

Any person including insured :

Provided that a person driving hold 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 at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Note:- The policy does not cover liability for death, bodily injury or damage as excluded in section 150 (2) (ii) and (iii); (b) and (c) of the Motor Vehicles Act, 1988.

Limitations as to use

The policy covers use only under a permit within the meaning of Motor Vehicles Act, 1988 or such a carriage falling under Subsection 3 of Section 66 of the Motor Vehicles Act, 1988.

The policy does not cover use for:

- a) Organized Racing
- b) Pace Making
- c) Reliability Trials
- d) Speed Testing

Premium:	₹ 16,149.00
CGST-Others(9%):	₹ 9.00
SGST-Others(9%):	₹ 9.00
CGST-Basic TP(2.50%):	₹ 401.00
SGST-Basic TP(2.50%):	₹ 401.00
Stamp Duty:	₹ 1.00
Total(Rounded Off):	₹ 16,969.00
Receipt Number:	10109070025123651307
Receipt Date:	02/02/2026
Debit Note Number:	
Document Date:	

Limits of Liability

Under Section II-I (i) Death or bodily injury in respect of any one accident: As per Motor Vehicles Act 1988

Under Section II-I (ii) Damage to third party property in respect of any one claim or series of claims arising out of one event: 750000/-

Agency/Broker Code:	BR9160794
VIZZA INSURANCE BROKING SERVICES PVT. LTD_16 , Mobile:	
8608500088	
Dealer Name/Code:	
Direct Business:	
Development Officer Code:	

Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto 28

I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with provisions of Chapter X & XI of M.V Act, 1988.

Date of Issue: 02/02/2026

Note:-With reference to IRDAI circular no IRDAI/NL/CIR/MOTP/170/10/2018 dated 09/10/2018 and as per the declaration given in the proposal form by owner driver Compulsory Personal Accident (CPA) cover is removed, since he/she is not holding a valid driving license.

For and On behalf of
United India Insurance Co. Ltd.

Amount Subject to Reverse Charges-NIL

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 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE

IGNORE IF ALREADY UPDATED.

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

Duly Constituted Attorney



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UNITED INDIA INSURANCE COMPANY LTD.

Registered & Head Office : 24, Whites Road, Chennai 600 014



MOTOR INSURANCE - GCV PUBLIC CARRIER OTHER THAN 3 WHEELER LIABILITY ONLY POLICY SCHEDULE

Policy Number :0907003125P117066359
Geographical Area : India(A)
Insured Name/ID : MR KALIMUTHU V/23562619331
Insured address :

200/202 P T COLONY KARUMBALAI ALAVANDAN MADURAI
City: MADURAI District: MADURAI
State: TAMIL NADU Pincode: 625020
Telephone: Mobile: *****4365

Previous Policy Number :
Insurance Start Date & Time : 03/02/2026 00:00 (hours)
Insurance expiry Date & Time : 02/02/2027 midnight
Policy Issuing Office Address :

KAR TOWERS II FLOOR,R S ROAD, DINDIGUL ,GST No.: 33AAACU5552C1ZQ
City: DINDIGUL District: DINDIGUL
State: TAMIL NADU Pincode: 624001
Telephone:(0451) 2433237,(0451) 2433258

Business Channel Code: BRC9160794

Dealer Name:

Dealer Code:

VEHICLE DETAILS

Registration Number	TN - 64 - Q - 3273	Obsolete Vehicle & Chassis Number	No & MAT445553HVF28295	Gross vehicle Weight	1550
RTA Name	TN64 MADURAI (CENTRAL)	Vehicle Make & Model	TATA MOTORS LTD / TATA ACE FACELIT HT BSIV	Type Of Body	Open
Registration Date	01/09/2017	Cubic Capacity/Seating Capacity	702/2	AA Membership Name	
Engine Number	275IDI07FSYS65239	Year Of Manufacture	2017	Geographical Extension	

INSURED DECLARED VALUE ₹

Vehicle	Trailer	Electrical/Electronic Accessories	Non Electrical Accessories	CNG Kit	LPG Kit	Total	Co-Insurance Details
0	0	0	0	0	0	0	100%

OTHER DETAILS

Financier	Policy Subject to IMT Endorsements	Applicable Addon-covers/Services	Unique Reference Code
	28		

PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE:As narrated in the certificate of insurance attached herewith.

LIMITATIONS AS TO USE:As narrated in the certificate of insurance attached herewith.

LIMITS OF LIABILITY:As narrated in the certificate of insurance attached herewith.

EXCLUSIONS:(1) Any accidental Loss Or Damage and/or liability caused sustained or incurred outside the geographical area (2)Any claim arising out of any contractual liability.(3)Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss.(4)Any liability of whatsoever nature directly or indirectly caused by or contributed to or by arising out of ionizing radiations or contamination by radioactivity from any nuclear fuel.For the purpose of this exception, combustion shall include any self sustaining process of nuclear fission.(5)Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.(6)Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or war like operations (whether before or after declaration of war), civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.

PA Cover CSI ₹	DEDUCTIBLES (Under Section I) ₹						
Owner Driver (Under Section IV)	0	Compulsory	500	Imposed	0	Voluntary	0

SCHEDULE OF PREMIUM ₹

A-OWN DAMAGE PREMIUM			B-LIABILITY PREMIUM			TOTAL PREMIUM		
Gross OD(A)	₹ 0.00	B. Basic - TP	₹ 16,049.00	Premium(A+B)	₹ 16,149.00			
		Total	₹ 16,049.00	CGST-Others(9%)	₹ 9.00			
		Add :		SGST-Others(9%)	₹ 9.00			
		LL to Paid Driver IMT 28	₹ 100.00	CGST-Basic TP(2.50%)	₹ 401.00			
		Sub Total (Additions)	₹ 100.00	SGST-Basic TP(2.50%)	₹ 401.00			
		Gross TP(B)	₹ 16,149.00	TOTAL PAYABLE PREMIUM	₹ 16,969.00			
		Total Liability Premium	₹ 16,149.00	Stamp Duty	₹ 1.00			
				SAC Code	997134			
				Invoice No & Date	31251117066359 & 02/02/2026			
				Receipt Number	10109070025123651307			
				Receipt Date	02/02/2026			
				Receipt Amount	₹ 16,969.00			
				Payment Mode				
				Paying Party	MR KALIMUTHU V			

TERMS & CONDITIONS:As per the Indian Motor Tariff,personal copy of the same is available free of cost on request.Further the Indian Motor Tariff is also available and displayed at all United India Insurance company Offices and on Website www.ulic.co.in

DISCLAIMER:The policy stands Cancelled or void in the event of Cheque Dishonored.The company may cancel the policy by sending 7 days notice in case of fraud,misrepresentation,nondisclosure of material fact or non co-operation of the insured.

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.In case of accident the insured must inform United India Insurance Co. Immediately to arrange spot survey.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date & Signature of Proposal : 03/02/2026

In Witness Whereof this policy has been signed at DO DINDIGUL 090700 on this 02nd day of February ,2026

CONSOLIDATED ADDITIONAL STAMPS DUTY PAID AS PER TAMILNADU GOVERNMENT G.O. (R.T.) NO.234 DATED 13/06/2025 FOR THE PERIOD FROM 1-4-2024 TO 30-06-2026

For United India Insurance Company Limited

Duly Constituted Attorneys

Issuing Agent:
Agent Location:

VIZZA INSURANCE BROKING SERVICES PVT. LTD._16
090700

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Underwritten By - VIZLTD0012 (BROKER)

Agent User Name:

VIZLTD0012

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