



The New India Assurance Co.Ltd.

PATTAMBI BRANCH OFFICE (762702)

Tel. No.: 04662213010//

Email: nia.762702@newindia.co.in/

Two Wheeler Liability Only Policy IRDAN190RP0002V01200203

Policy Number: 76270231250200026208

Vehicle: ROYAL ENFI/CLASSIC 350

Period of Cover

From: 03/02/2026 08:30:35 PM

To: 02/02/2027 11:59:59 PM

Insured Details

SHIJIU BASHEER

To: THADATHIL VEEDU, PERUMKULAM. P.O, PERUMKULAM, ALAMCODE,
THIRUVANANTHAPURAM, , ,ALANCODE ,KERALA, 695102

For Insurance Renewals contact

VIZZA INSURANCE BROKING SERVICES PVT LTD.

Tel. No.: 3052222 / /

Email: po_vizzainsbroker@vizzafin.com /

For Claims contact our OFFICE

PATTAMBI BRANCH OFFICE 762702

MT TOWER, KALPAKA STREET,MELE PATTAMBI,,679306

Tel. No.: 04662213010

Email: nia.762702@newindia.co.in

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.

Tax Invoice No : 76270225P0037747

IRDA Registration Number: 190
NIA PAN NUMBER: AACN4165C



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Two Wheeler Liability Only Policy

UIN Number - IRDAN190RP0002V01200203

Policy Number :76270231250200026208

| | | |
|--|---|---|
| POLICY ISSUING OFFICE: PATTAMBI BRANCH OFFICE (762702), MT TOWER, KALPAKA STREET , MELE PATTAMBI , KERALA , 679306. PHONE NUMBER:04662213010 FAX NUMBER:NA / NA Email:nia.762702@newindia.co.in | BUSINESS CHANNEL/CPSC User: NAME: Vizza Insurance Broking Services Pvt Ltd. - (BR00000152), PHONE NUMBER:3052222 / / LAND/FAX NUMBER:/ EMAIL:po_vizzainsbroker@vizzafin.com / | CLAIM CONTACT: Palakkad Non Suit Claim Hub (769009) ADDRESS: N S TOWERS , I ST FLOOR , NEAR STADIUM BUS STAND,COIMBATORE ROAD , PALAKKAD - 678013 , , KERALA , 678013. PHONE NUMBER: 04912545643 / MOBILE NUMBER: Email: ch769009@newindia.co.in |
|--|---|---|

INSURED DETAILS

| | | | |
|-----------------|---|----------------|--------------------------|
| Insured Name | SHIJI BASHEER | Customer ID | PO90322650 (PAN No :NA) |
| Insured Address | THADATHIL VEEDU, PERUMKULAM. P.O, PERUMKULAM, ALAMCODE, THIRUVANANTHAPURAM,,, ALANCODE ,KERALA, 695102 | Contact Number | / / XXXXXX1184 |
| | | Email | CAB.TRIVANDRUM@GMAIL.COM |
| | | GSTIN | NA |

POLICY DETAILS

| | | | |
|------------------|--|------------------------|---------------------------------|
| Period of cover | 03/02/2026 08:30:35 PM to 02/02/2027 11:59:59 PM | Receipt Number | 10000089250200105766 - 03/02/26 |
| Previous Insurer | THE NEW INDIA ASSURANCE COMPANY LTD. | Previous Policy Number | 76050331231700027148 |

VEHICLE DETAILS

| | | | |
|--------------------------------------|------------------------|-----------------------------------|----------------------------------|
| Registration Number | KL-16-W-4179 | Chassis no./Engine Number | ME3U3S5C2KE542119/U3S5C2KE524670 |
| Make / Model | ROYAL ENFI/CLASSIC 350 | Variant: | STANDARD ABS |
| Year of manufacture | 2019 | Type of body / Type of Fuel | Metal/Petrol |
| Colour | BLACK | Cubic capacity(cc) /Wattage(kW): | 346cc |
| Seating capacity including Driver | 2 | Name of registration authority | Attingal |
| Geographical Area / Zone | India | Name of the Financier | |
| Cover Note No/Cover Note Issue Date: | / | Automobile Association membership | none |

INSURED DECLARED VALUE (in Rs)

| Vehicle | Trailer | Non-Elec Acc | Electrical Acc | Bi-fuel/CNG/LPG kit | Total Value |
|---------|---------|--------------|----------------|---------------------|-------------|
| 0 | 0 | N/A | N/A | | 0 |

SCHEDULE OF PREMIUM

| Own Damage | | Liability | |
|--------------------------------|--|---|-------------|
| Basic OD Premium | 0 | Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000) | 1366 275 |
| Calculated OD Premium | 0 | Calculated TP Premium | 1641 |
| Total OD Premium | 0 | Total TP Premium | 1641 |
| Net Premium in Rs | | | 1,641 |
| GST in Rs | | | 296 |
| Total Payable in Rs | | | 1,937 |
| Total Payable in Rs(in words): | RUPEES ONE THOUSAND NINE HUNDRED THIRTY-SEVEN ONLY | | |

Policy No. : 76270231250200026208 Document generated by QR_RENEWAL at 2026/02/03 20:30:43.

Regd. & Head Office: New India Assurance Bldg, 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on <https://www.newindia.co.in/portal/policyFeedbackGen>.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <https://newindia.co.in>.



| | |
|---|---|
| GSTIN(Issuing Office) | 32AACN4165C4ZX |
| SAC | 997134 (Motor vehicle insurance services) |
| Limitation as to use: The policy covers use for any purpose other than: a) Hire or reward b) Organized racing, OR c) Speed testing | |
| Limits of Liability: Limit of the amount the Company's Liability Under Section 1(i) in respect of any one accident: as per the Motor Vehicles Act, 1988. Limit of the amount of the Company's Liability Under Section 1(ii) in respect of any one claim or series of claims arising out of one event: Up to Rs. 1,00,000 | |
| For individual covers (OD) in RS:0 | Compulsory excess in Rs:NA |
| Imposed excess in Rs:0 | Voluntary excess in Rs:0 |
| 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 requirement of Rule 3 of the Central Motor Vehicles Rules, 1989. | |
| For all vehicles - 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. | |

PA cover for Owner Driver

| Name of Nominee | Age of Nominee | Relationship with the Insured | Name of the Appointee (if Nominee is a minor) | Relationship to the Nominee |
|-----------------|----------------|-------------------------------|---|-----------------------------|
| NA | NA | NA | NA | NA |

PA cover for named persons

| Name | CSI Opted(Rs.) | Nominee | Relationship |
|------|----------------|---------|--------------|
| none | 0 | NA | NA |

Premium and GST Details

| | Rate of Tax | Amount in INR |
|-------------------|-------------|---------------|
| Premium | | Rs 1,641 |
| SGST | 9 | 148 |
| CGST | 9 | 148 |
| IGST | 0 | 0 |
| KERALA FLOOD CESS | 0 | 0 |

In witness where of this policy has been signed at PATTAMBI BRANCH OFFICE on this 03-FEB-26 WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, conditions and exceptions applicable to Liability Only policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 22.

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 clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 1lakh or a claim for refund of premium exceeding Rs 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 website.

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 XI of M.V. Act, 1988.

Date of Issue: 03/02/2026

For and on behalf of The New India Assurance Company Limited



(MR DHANUSH R)
[Branch Manager]

Duly Constituted Attorney(s)

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.

Tax Invoice No : 76270225P0037747

**IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C**



COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office : PATTAMBI BRANCH OFFICE (762702)
Address : MT TOWER, KALPAKA STREET
 MELE PATTAMBI
 .679306
 MELEPATTAMBI
Insured Pan Number :
Phone : 04662213010
Email : nia.762702@newindia.co.in
Fax :
Collection Number : 10000089250200105766
Collection Date : 03/02/2026
Business Source Code : BR00000152
PAN No of Payer :

Received with thanks from SHIJU BASHEER.

The amount received/Adjusted is towards -

| Policy No. | A/C Description | Amount₹ | A/C Code | Sub A/C Code |
|----------------------|-----------------|---------|-------------|------------------------|
| 76270231250200026208 | Bank-100000 | 1937.00 | 9100.100000 | BA00013647-100000-9100 |

Total = ₹ 1937.00

Your Payment/Adjustment Details are as under -

| Mode | Amount ₹ | Cheque No. | Cheque Date | Drawee Bank | Drawee Branch | Reference No. | Scroll/BG/A PD Balance |
|-------------------|----------|-----------------------|-------------|-------------|---------------|------------------|------------------------|
| EPG Credit Advice | 1937.00 | pay_SBi MZU GjnKCvX H | N.A. | N.A. | N.A. | 7627022510056698 | N.A. |

Total = ₹ 1937.00

Utilization details of the Collected Amount :

| Premium | GST | Stamp Duty | Excess Amount |
|---------|-------------|---|-----------------|
| 1641.00 | 296.00 | 0.00 | 0 |
| Sl no. | Agency Code | Agency Name | Department Code |
| 1 | NA | VIZZA INSURANCE BROKING SERVICES PVT LTD. | 31 |

For The New India Assurance Company Limited
Revenue Stamp



Date of Issue:
03/02/2026

(MR DHANUSH R)
[Branch Manager]

Cashier's Initial

Authorized Signatory

Note -

1. Please note the Policy Number, Collection Number and date in all future correspondence..
2. NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.



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.

Tax Invoice No : 76270225P0037747

**IRDA Registration Number: 190
NIA PAN NUMBER: AACCN4165C**



STANDARD FORM FOR TWO WHEELER LIABILITY ONLY POLICY

(Applicable to all classes of vehicles with suitable amendments in 'Limitations as to Use')

Whereas the insured by a proposal and declaration dated as stated in the schedule which shall be the basis of this contract and is deemed to be incorporated herein has applied to the Company for the insurance hereinafter contained and has paid the premium as consideration for such insurance in respect of events occurring during the period of insurance.

NOW THIS POLICY WITNESSETH:

That subject to the Terms Exceptions and Conditions contained herein or endorsed or expressed hereon;

LIABILITY TO THIRD PARTIES

1. Subject to the limits of liability as laid down in the Schedule hereto, the Company will indemnify the insured in the event of an accident caused by or arising out of the use of the Motor vehicle anywhere in India against all sums including claimant's costs and expenses which the insured shall become legally liable to pay in respect of:-
 - (i) death of or bodily injury to any person as far as it is necessary to meet the requirements of the Motor Vehicles Act.
 - (ii) Damage to property other than property belonging to the insured or held in trust or in the custody or control of the insured up to the limit specified in the schedule.
2. The Company will also pay all costs and expenses incurred with its written consent.
3. In terms of and subject to the limitations of the indemnity which is granted by this policy to the insured, the Company will indemnify any driver who is driving the vehicle on the insured's order or with insured's permission provided that such driver shall as though he/she were the insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.
4. In the event of the death of any person entitled to indemnity under this policy the Company will in respect of the liability incurred by such person indemnify his/her personal representative in terms of and subject to the limitations of this Policy provided that such personal representative shall as though such representative was the insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.
5. The Company may at its own option;
 - (A) Arrange for representation at any Inquest or Fatal Inquiry in respect of any death which may be the subject of indemnity under this Policy and
 - (B) Undertake the defence of proceedings in any Court of Law in respect of any act or alleged offence causing or relating to any event which may be the subject of indemnity under this Policy.

AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY

Nothing in this Policy or any endorsement hereon shall affect the right of any person indemnified by this Policy or any other person to recover an amount under or by virtue of the provisions of the Motor Vehicles Act.

But the insured shall repay to the Company all sums paid by the Company which the Company would not have been liable to pay but for the said provisions.

APPLICATION OF LIMITS OF INDEMNITY

In the event of any accident involving indemnity to more than one person any limitation by the terms of this Policy and/or of any Endorsement thereon of the amount of any indemnity shall apply to the aggregate amount of indemnity to all persons indemnified and such indemnity shall apply in priority to the insured.

PERSONAL ACCIDENT COVER FOR OWNER-DRIVER

Subject otherwise to the terms exceptions conditions and limitations of this policy, the Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the owner-driver of the vehicle in direct connection with the vehicle insured or whilst mounting into/dismounting from or travelling in the insured vehicle as a co-driver, caused by violent, accidental, external and visible means which independently of any other cause shall within six calendar months of such injury result in:

| Nature of injury | Scale of compensation |
|--|------------------------------|
| (i) Death | 100% |
| (ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye | 100% |
| (iii) Loss of one limb or sight of one eye | 50% |
| (iv) Permanent total disablement from injuries other than named above | 100% |

Provided always that

- 1) the compensation shall be payable under only one of the items (i) to (iv) above in respect of the owner-driver arising out of any one occurrence and the total liability of the insurer shall not in the aggregate exceed the sum of ₹ Fifteen lakhs during any one period of insurance.
- 2) No compensation shall be payable in respect of death or bodily injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) intentional self injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.

This cover is subject to

- (a) the owner-driver is the registered owner of the vehicle insured herein;



- (b) the owner-driver is the insured named in this policy.
- (c) the owner-driver holds an effective driving license, in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, at the time of the accident.

GENERAL EXCEPTIONS

1. The Company shall not be liable in respect of any claim arising whilst the vehicle insured herein
 - (a) being used otherwise than in accordance with the 'Limitations as to Use' or
 - (b) being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.
2. The Company shall not be liable in respect of any claim arising out of any contractual liability.
3. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death arising out of and in the course of employment of a person in the employment of the insured or in the employment of any person who is indemnified under this policy or bodily injury sustained by such person arising out of and in the course of such employment.
4. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death or bodily injury to any person (other than a passenger carried by reason of or in pursuance of a contract of employment) being carried in or upon or entering or mounting or alighting from the Motor Vehicle at the time of occurrence of the event out of which any claim arises.
5. The Company shall not be liable in respect of any liability directly or indirectly or proximately or remotely occasioned by contributed by or traceable to or arising out of or in connection with War, Invasion, the Act of foreign enemies, hostilities or warlike 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 and in the event of any claim hereunder, the Insured shall prove that the accident, loss, damage and / or liability, arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to 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.
6. The Company shall not be liable in respect of any liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.

CONDITIONS

This Policy and the Schedule shall be read together and any 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.

1. Notice shall be given in writing to the Company immediately upon the occurrence of any accident and in the event of any claim. Every letter claim writ summons and/or process shall be forwarded to the Company immediately on receipt by the insured. Notice shall also be given in writing to the Company immediately the insured shall have knowledge of any impending Prosecution Inquest or Fatal inquiry in respect of any accident which may give rise to a claim under this Policy.
2. No admission, offer, promise, payment or indemnity shall be made or given by or on behalf of the insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the insured the defence or settlement of any claim or to prosecute in the name of the insured for its own benefit any claim for indemnity or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the insured shall give all such information and assistance as the Company may require. If the Company shall make any payment in settlement of any claim and such payment includes any amount not covered by this Policy the Insured shall repay to the Company the amount not so covered.
3. The insured shall take all reasonable steps to maintain the insured vehicle in efficient condition and the Company shall have at all times free and full access to examine the insured vehicle or any part thereof or any driver or employee of the insured.
4. The policy may be cancelled at any time by the Insured for any reason by informing the Company. The Company may cancel the policy by sending seven days' notice by recorded delivery to the Insured at Insured's last known address on grounds of established fraud. In such case the Company shall
 - a) Refund proportion premium for unexpired policy period, provided there is no claims(s) made during the policy period.
 - b) However under no circumstances, the company can cancel the statutory Motor Third Party Liability insurance except in case of double insurance or Total Loss of the insured vehicle.

In case the term of the policy is more than 12 months, the insurer will refund premium for the unexpired policy period, in respect of policy with the term more than one year and the risk coverage for such policy years has not commenced.

Return of the premium by the company will be subject to retention of the minimum premium of ₹100/- (or ₹25/- in respect of vehicles specifically designed/modified for use by blind/handicapped/mentally challenged persons). Where the ownership of the vehicle is transferred, the policy cannot be cancelled unless evidence that the vehicle is insured elsewhere is produced.

5. If at the time of occurrence of an event that gives rise to any claim under this policy there is in existence any other insurance covering the same liability, the Company shall not be liable to pay or contribute more than its ratable proportion of any compensation, cost or expense.
6. The due observance and fulfillment of the terms, conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the insured and the truth of the statements and answers in the said proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.



The New India Assurance Company Limited

UIN : IRDAN190RP0002V01200203

7. In the event of the death of the sole insured, this policy will not immediately lapse but will remain valid for a period of three months from the date of the death of insured or until the expiry of this policy (whichever is earlier). During the said period, legal heir(s) of the insured to whom the custody and use of the Motor vehicle passes may apply to have this Policy transferred to the name(s) of the heir(s) or obtain a new insurance policy for the vehicle. Where such legal heir(s) desire(s) to apply for transfer of this policy or obtain a new policy for the vehicle such heir(s) should make an application to the Company accordingly within the aforesaid period. All such applications should be accompanied by:-
- Death Certificate in respect of the insured
 - Proof of title to the vehicle
 - Original Policy.

CUSTOMER GRIEVANCE REDRESSAL POLICY:

The Company is committed to extend the best possible services to its customers. However, if you are not satisfied with our services and wish to lodge a complaint, please free to call our 24X7 Toll free number 1800-209-1415 or you may email to the customer service desk at customercare.ho@newindia.co.in. After investigating the matter internally and subsequent closure, we will send our response.

You can also approach the Insurance Ombudsman, depending on the nature of grievance and the financial implication, if any. Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at www.irdai.gov.in, or of the General Insurance Council at www.generalinsurancecouncil.org.in, the Consumer Education Website of the IRDAI at <http://www.policyholder.gov.in>, or from any of Our Offices.

DETAILS OF INSURANCE OMBUDSMAN

| Insurance Ombudsman Office Details | Jurisdiction of Office Union Territory, District) |
|--|--|
| AHMEDABAD -Insurance Ombudsman Office of the Insurance Ombudsman,Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, AHMEDABAD - 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in | Gujarat, Dadra & Nagar Haveli, Daman and Diu. |
| BENGALURU -Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Soudha Building,PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru - 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in | Karnataka |
| BHOPAL- Insurance Ombudsman Office of the Insurance Ombudsman, 1st floor,"Jeevan Shikha", 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Bhopal - 462 011. Tel.: 0755 - 2769201 / 2769202 Email: bimalokpal.bhopal@cioins.co.in | Madhya Pradesh, Chattisgarh. |
| BHUBANESHWAR - Insurance Ombudsman Office of the Insurance Ombudsman, 62, Forest park, Bhubaneswar - 751 009. Tel.: 0674 - 2596461 /2596455 Email: bimalokpal.bhubaneswar@cioins.co.in | Orissa |
| CHANDIGARH - Insurance Ombudsman Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 - D, Chandigarh - 160 017. Tel.: 0172 - 4646394 / 2706468 Email: bimalokpal.chandigarh@cioins.co.in | Punjab, Haryana (excluding Gurugram, Faridabad, Sonepat and Bahadurgarh), Himachal Pradesh,Union Territories of Jammu & Kashmir, Ladakh & Chandigarh |
| CHENNAI - Insurance Ombudsman Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI - 600 018. Tel.: 044 - 24333668 / 24333678 Email: bimalokpal.chennai@cioins.co.in | Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry). |
| DELHI - Insurance Ombudsman Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi - 110 002. Tel.: 011 - 23237539 Email: bimalokpal.delhi@cioins.co.in | Delhi & following Districts of Haryana -Gurugram, Faridabad, Sonepat & Bahadurgarh |
| GUWAHATI - Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati - 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in | Assam, Meghalaya, Manipur, Mizoram,Arunachal Pradesh, Nagaland and Tripura |
| HYDERABAD - Insurance Ombudsman Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Email: bimalokpal.hyderabad@cioins.co.in | Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry |



The New India Assurance Company Limited

UIN : IRDAN190RP0002V01200203

| | |
|--|--|
| JAIPUR - Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nidhi - II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363/2740798 Email: bimalokpal.jaipur@cioins.co.in | Rajasthan |
| ERNAKULAM - Insurance Ombudsman Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College, M.G.Road, Ernakulam - 682 011. Tel.: 0484 - 2358759 Email: bimalokpal.ernakulam@cioins.co.in | Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry |
| KOLKATA - Insurance Ombudsman Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124341 Email: bimalokpal.kolkata@cioins.co.in | West Bengal, Sikkim, Andaman & Nicobar Islands. |
| LUCKNOW - Insurance Ombudsman Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 4002082 / 3500613 Email: bimalokpal.lucknow@cioins.co.in | Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdha, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajganj, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar |
| MUMBAI - Insurance Ombudsman Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038800/27/29/31/32/33 Email: bimalokpal.mumbai@cioins.co.in | Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane. |
| NOIDA - Insurance Ombudsman Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in | State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshahar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddh nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur |
| PATNA - Insurance Ombudsman Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: bimalokpal.patna@cioins.co.in | Bihar, Jharkhand. |
| PUNE - Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune - 411 030. Tel.: 020-24471175 Email: bimalokpal.pune@cioins.co.in | Maharashtra, Areas of Navi Mumbai and Thane (excluding Mumbai Metropolitan Region) |

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.

Tax Invoice No : 76270225P0037747

| |
|--------------------------------------|
| IRDA Registration Number: 190 |
| NIA PAN NUMBER: AAACN4165C |



IMT.22. COMPULSORY DEDUCTIBLE

(Applicable to Private Cars, three wheelers rated as private cars, all motorized two wheelers, taxis, private car type vehicle plying for public/private hire, private type taxi let out on private hire)

Notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insured shall bear under Section 1 of the policy in respect of each and every event (including event giving rise to a total loss/constructive total loss) the first ₹ 100 (or any less expenditure which may be incurred) of any expenditure for which provision has been made under this policy and/or of any expenditure by the insurer in the exercise of his discretion under Condition no 3 of this policy.

If the expenditure incurred by the insurer shall include any amount for which the insured is responsible hereunder such amount shall be repaid by the insured to the insurer forthwith.

For the purpose of this Endorsement the expression "event" shall mean an event or series of events arising out of one cause in connection with the vehicle insured in respect of which indemnity is provided under this policy.

Subject otherwise to the terms conditions limitations and exceptions of this Policy.

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.

Tax Invoice No : 76270225P0037747

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C