



Policy No. AVO/2319/20017157  
Vijay Ramdas Waghmare  
C/O Vijay Ramdas Waghmare, near vivek vardhini vidya mandir,

Date 02-02-2026

AKOLA, MAHARASHTRA 444108  
94\*\*\*\*\*77  
yla\*\*\*iya\*\*\*dif\*\*\*il.\*\*\*

Dear **Vijay Ramdas Waghmare**

Welcome to Universal Sampo General Insurance family and we thank you for choosing us as your Insurance Partner for **MOTOR - PRIVATE CAR LIABILITY POLICY** policy.

We are committed to providing you with reliable motor insurance coverage. Ensuring your safety on the road is our top priority, and our policies are crafted to provide you reliable protection and peace of mind.

We are pleased to share a list of those garages in your city which have been trusted and rated highly by our customers basis their experience. You may like to consider their services in the unfortunate event of an accident or damage to your vehicle. Please visit below link to check the garage list or scan the QR code.

To make your insurance experience seamless, we have introduced below tech-based solutions.

**USGI PULZ App** - One stop solution for all your insurance needs. Now enjoy below complimentary value-added benefits with our app.

- **Insurance Wallet** - Manage insurance policies on the go with buy and renew Option
  - **Claim Management** - Intimate claim online and track claim status
  - **24X7 Roadside Assistance\*** - In case you are in distress due to flat tyre, drained battery, minor repairing or towing of vehicle in case of break down or accident of your vehicle, Key locked in car or lost, fuel run dry or arrangement of taxi/ ambulance.
  - **Location based Service** - Find nearest authorised garages, nearest network hospital, nearest pharmacy, blood bank, wellness centre, lab test centre, petrol pump, parking pollution centre. Also, you can track your daily activity, set reminders, and maintain your health profile and much more
  - **Additional Services** - Check pollution certificate, check vehicle challans, check fuel prices.
- \* Subject to Terms and conditions of Universal Sampo Policy covering the vehicle with RSA cover

**AI-Powered Virtual Agent- Helps you intimate claim with ease.**

You may reach us at our toll-free number 1-800- 200-4030 (Other Users), 1-800-22-4030 (MTNL/BSNL Users), or email us at [contactus@universalsampo.com](mailto:contactus@universalsampo.com) Please visit [www.universalsampo.com](http://www.universalsampo.com) for detailed information on policy coverage, benefits, and exclusions.

Kindly go through the enclosed information in the attached policy copy. In case of any error, discrepancy, or clarification that you may need, please let us know within 15 days of policy received, otherwise all particulars will be deemed to be correct. Please mention your policy number for any communication with us.

Once again, we are delighted to have you with us.

Happy driving!



scan to check  
Garage List



Scan to download  
USGI PULZ App



# UNIVERSAL SOMPO GENERAL INSURANCE COMPANY LIMITED

## Certificate of Insurance cum Policy Schedule



PRODUCT NAME : MOTOR - PRIVATE CAR LIABILITY POLICY ; POLICY NUMBER: AVO/2319/20017157

INSURED DETAILS	INTERMEDIARY DETAILS	INVOICE NUMBER	USGAF231940628040
Vijay Ramdas Waghmare C/O Vijay Ramdas Waghmare, near vivek vardhini vidya mandir,  AKOLA, MAHARASHTRA 444108 94*****77 yla***iya***dif***il.*** Insured GSTIN No.	NAME VIZZA INSURANCE BROKING SERVICES PVT.LTD.-AG CODE 201244644441 CONTACT NUMBER 8608800072 EMAIL ID customercare@vizzafin.com RTO LOCATION AKOLA PERIOD OF INSURANCE FROM 00:00:00 OF 04/02/2026 TO MIDNIGHT OF 03/02/2027	POLICY / INVOICE ISSUED DATE 02-02-2026  EIA ACCOUNT NUMBER CKYC NUMBER Policy Issuance GSTIN No. 27AAACU8917F1Z6 HYPOTHECATION / FINANCER NAME	
	POLICY ISSUANCE OFFICE	8th Floor and 9th Floor (part - south side), Commerz, International Business park, Oberoi Garden City, Off Western Express Highway Goregaon East, Mumbai MAHARASHTRA 400063	
	PAYMENT DETAILS	INSTRUMENT/TRANSACTION NUMBER: "C0202202611375499666418"; INSTRUMENT DATE: "02-02-2026"; MODE OF PAYMENT: "Online"	

VEHICLE DETAILS									
REGISTRATION NUMBER	ENGINE NUMBER	CHASSIS NUMBER	MAKE	MODEL	CUBIC CAPACITY/KW/GVW	MFG. YEAR / REGISTRATION DATE	FUEL TYPE	BODY TYPE	SEATING CAPACITY
MH30AZ4260	HLJ6C18586	MA1FM2HLWJ 6C32349	MAHINDR A & MAHINDR A LIMITED	MAHINDR A SUPRO VX (8 SEATER)	909	2018/04-07-2018	Diesel	HARD TOP	8

### SECTION - II - THIRD-PARTY LIABILITY SCHEDULE OF PREMIUM (Amount in Rs.)

Basic TP Premium	2,094
Add: Extension of Geographical area (IMT1)	0
Add: Bi-fuel/CNG/LPG Kit (IMT25)	0
Less: Premium for TPPD (IMT20)	0
<b>TOTAL BASIC THIRD-PARTY PREMIUM (A)</b>	2,094
Add: PA Benefits	0
Compulsory PA Cover for Owner Driver under Section III, SI Rs.15,00,000/-	225
PA Cover to named passengers (IMT15)	0
PA cover to unnamed passengers (IMT 16) No. of Passengers : "8" CSI per passenger: "80000"	320
PA cover to Paid Driver, Cleaners, Conductors (IMT17)	0
Legal Liability to paid driver (IMT28)	50
Legal Liability Employees other than paid Driver (IMT29)	0
<b>TOTAL LIABILITY PREMIUM (B)</b>	595
<b>NET LIABILITY PREMIUM (A+B)</b>	2,689
<b>GST 18% : CGST (9%) "" ; SGST (9%) "" ; IGST (18%) ""</b>	484
<b>TOTAL POLICY PREMIUM</b>	3,173

<b>GEOGRAPHICAL AREA</b>		<b>COMPULSORY DEDUCTIBLE (IMT22)</b>		<b>VOLUNTARY DEDUCTIBLE (IMT22A)</b>	0
<b>PREVIOUS POLICY NO.</b>	170822523470000808	<b>PYP INSURER &amp; POLICY PERIOD</b>	2025-02-04-2026-02-03   Reliance General Insurance Company Ltd.	<b>EXPIRING NCB</b>	
<b>NOMINEE FOR OWNER DRIVER</b>	MRS	<b>RELATIONSHIP</b>	Spouse		

ENDORSEMENT DETAILS					
ENDT. NO	LIST OF ENDORSEMENT DIScription	EFFECTIVE DATE	PREMIUM	GST (18%) : CSGT (9%); SGST (9%)	TOTAL PREMIUM
			0	0	0

### SPECIAL CONDITIONS

SUBJECT TO IMT ENDORSEMENT NOS. AND MEMORANDUM PRINTED HEREIN / ATTACHED HERETO:

**DRIVER (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 requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

**LIMITATIONS AS TO USE:** The Policy covers use of the vehicle for any purpose other than : a) Hire or Reward b) Carriage of goods (other than samples or personal luggage) c) Organized racing d) Pace Making e) Speed testing f) Reliability Trials g) Any purpose in connection with Motor Trade.

**LIMITS OF LIABILITY:** A) Under Section II 1 (i) of 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 1 (ii) of policy (Third Party Property Damage) - in respect of any one claim or series of claims arising out of one event (Rs.6000/- or Rs.7,50,000/- as may be applicable). C) P.A Cover under Section III for owner Driver (CSI) - Rs.15,00,000/-.

**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".

**DISCLAIMER:** Policy is valid subject to Realization of premium. Please visit our website [www.universalsompo.com](http://www.universalsompo.com) to know more about the policy coverage, benefits, and exclusions. Kindly write to us on [contactus@universalsompo.com](mailto:contactus@universalsompo.com) to get the copy of the policy wordings, if required.

**CLAIM DISCLAIMER:** : In the unfortunate event of any loss or damage to the insured property resulting into a claim on this policy, please intimate the mishap IMMEDIATELY to our Call Centre at Toll Free Numbers on 1800-22-4030/1-800-200-4030 or on chargeable numbers at +91-22-27639800 / +91-22-39133700. Email at [contactclaims@universalsompo.com](mailto:contactclaims@universalsompo.com). Please note that no delay should be allowed to occur in notifying a claim on the policy as the same may prejudice liability. I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with the provision of chapter X, XI of M. V. Act 1988.

**FOR UNIVERSAL SOMPO GENERAL INSURANCE COMPANY LIMITED**



GSTIN No:  
27AAACU8917F1Z6  
IRDAI UIN NO:  
IRDAN134RP0005V01  
202122  
SAC CODE: 997134

DULY CONSTITUTED ATTORNEY(S)  
USGI IRDAI REGISTRATION NO: 134

In Witness whereof this Policy has been signed at Mumbai in lieu of covernote No. Consolidated stamp duty Rs . 1.00 paid towards Insurance policy stamp vide receipt no. dated of General Stamp Office Mumbai.

**NOTE: 1) Please include your policy number for any communication with us. 2) The policy schedule should be read in conjunction with Policy wording and CIS.**

PROPOSAL FORM CUM TRANSCRIPTION LETTER FOR MOTOR - PRIVATE CAR LIABILITY POLICY									
INSURED DETAILS		VEHICLE DETAILS			PROPOSAL DETAILS				
Vijay Ramdas Waghmare C/O Vijay Ramdas Waghmare, near vivek vardhini vidya mandir, AKOLA,MAHARASHTRA 444108 94*****77 yla***iya***dif***il.***	MAKE	MAHINDRA & MAHINDRA LIMITED		PROPOSAL NUMBER	USN2026QP10000411821				
	MODEL	MAHINDRA SUPRO VX (8 SEATER)		ISSUANCE DATE	02-02-2026				
	RTO	MH30		PERIOD OF INSURANCE	FROM 00:00:00 OF 04/02/2026 TO MIDNIGHT OF 03/02/2027				
	REGISTRATION NUMBER	MH30AZ4260		RTO LOCATION	AKOLA				
	ENGINE NUMBER	HLJ6C18586		HYPOTHECATION/FINANCER NAME					
	CHASSIS NUMBER	MA1FM2HLWJ6C32349		FUEL TYPE	Diesel				
	CUBIC CAPACITY/GVW/KW	909		SEATING CAPACITY	8				
	MANUFACTURING YEAR / REGISTRATION DATE	2018		GSTIN NUMBER					
PREMIUM DETAILS (Amount in Rs.)									
BASIC THIRD-PARTY PREMIUM					2094				
Compulsory PA Cover for Owner Driver under Section III, SI Rs.15,00,000/-					225				
PA Cover to named passengers (IMT15)					0				
PA cover to unnamed passengers (IMT 16) No. of Passengers : 8 per passenger: 80000					320				
PA cover to Paid Driver, Cleaners, Conductors (IMT17)					0				
Legal Liability to paid driver (IMT28)					50				
Legal Liability Employees other than paid Driver (IMT29)					0				
TOTAL LIABILITY PREMIUM					2689				
GST (18%) : CGST (9%) ""; SGST (9%) ""; IGST (18%) ""					484				
TOTAL PREMIUM					3,173				
SPECIAL CONDITION									
GEOGRAPHICAL AREA		COMPULSORY DEDUCTIBLE (IMT22)			VOLUNTARY DEDUCTIBLE (IMT22A)			0	
INTERMEDIARY NAME		VIZZA INSURANCE BROKING SERVISES PVT.LTD.-AG		INTERMEDIARY CONTACT DETAILS		8608800072		INTERMEDIARY CODE 201244644441	
NOMINEE FOR OWNER DRIVER			MRS		RELATIONSHIP			Spouse	
PREVIOUS POLICY NUMBER		170822523470000808		PYP INSURER & POLICY PERIOD		2025-02-04-2026-02-03   Reliance General Insurance Company Ltd.		EXPIRING NCB	
ANTI REBATE CLAUSE									
<p><b>Prohibition of Rebates (Section 41 of Insurance Act, 1938 as amended):</b></p> <p>1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer: provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.</p> <p>2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees..</p>									
TERMS AND CONDITIONS									
<p><b>I hereby declare that the Insured Person(s) listed in Proposal Form will abide to the following T&amp;C:</b></p> <p>A) I/We hereby declare that the statements made by me/us are true to the best of my / our knowledge and belief and I/we hereby agree that this declaration shall form the basis of the contract between me/us and Universal Sampo General Insurance Company Limited.</p> <p>B) I/We also declare that, if any additions or alterations are carried out after the submission of this proposal form, then the same would be conveyed to the insurers immediately.</p> <p>C) Any person who, knowingly and with intent to defraud the Insurance Company or other persons, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent act which will render the policy voidable at the Company's sole discretion and result in a denial of insurance benefits.</p> <p><b>GSTIN :-</b> Motor(Comprehensive and TP):For policy issued in the name of corporate entity (proprietor, HUF, partnership, private company etc), GSTIN is printed on the policy, basis the details provided during policy issuance. For any subsequent changes or addition (i.e. if GSTIN not entered at the time of policy issuance) on policy schedule, changes shall be carried out through fresh policy issuance with prospective effect.</p> <p>D) Your policy will be cancelled in case vehicle class/category of the vehicle is different than what is mentioned in policy schedule.</p> <p>E) I understand the Proposal No. USN2026QP10000411821 is issued to me basis on above information.</p> <p>F) I understand that my premium is derived on the basis of information filled by me, which includes my previous year policy details and No claim Bonus Discount %, if any. Universal Sampo General Insurance Company Limited may verify my previous year policy details and may hold claim settlement process till the time confirmation is received from previous insurer. The Company shall have no liability under this insurance contract if it is found that any of my / our statement on particulars or declaration (other than NCB discount) in this proposal form or other documents are incorrect and / or untrue / false.</p> <p>If any discrepancy found in the information provided for arriving at NCB discount %, Company shall communicated to me via e-mail and or letter for payment of the balance premium amount within 20 days from the date of communication. If the balance amount is not paid by me within 20 days from the date of communication, then claim will be paid proportionately.</p> <p>G) I / we declare and confirm having a valid PUC / Fitness Certificate.</p> <p><b>Transcript Declaration :</b> In case disagreement or objection or any other changes with respect to information and contents mentioned herein above, please contact our toll free number and register your objections / changes / disagreement to the content of this transcript or you may also send us email or written correspondence at the following details within a period of 15 days from date of your receipt of this transcript along.</p> <p><b>AML Declaration:</b></p> <p>1.I/We hereby confirm that all premiums have/will be paid from bona fide sources and no premium have/will be paid out of proceeds of crime related to any of the offences as listed under Prevention of Money Laundering Act, 2002 and its subsequent amendments as applicable</p> <p>2.I understand that the company has the right to call for documents to establish the sources of funds.</p> <p>3.The insurance company has the right to cancel the insurance contract in case I am/have been found guilty by any competent court of law under any of the statues, directly or indirectly governing the prevention of money laundering in India.</p>									