

Date: 15/07/2024

To renew SMS, REN to 9222211100

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Policy No.: VD186000

Mr. Happy Sharma S O SHAMSHER PARKASH 718 40 SA, 113 AMBALA HARYANA,

Ambala, Yamunanagar,

Haryana, Pincode: 135003 Telephone(Mob): 8950482213 Email Id: h15063627@gmail.com

Intermediary Name: Probus Insurance Broker Limited-BRR

PCV

Dear Mr. Happy Sharma

Welcome to the Future Generali Experience.

We thank you for choosing Motor Secure insurance policy. Your Policy No. is **VD186000.** Motor Secure policy offers your vehicle and yourself protection against any unforeseen vehicle accidents and loss to third party property or life arising there from as per the coverage mentioned in the attached policy terms and conditions. We request you to kindly go through the same to acquaint yourself with the available coverage.

Our initiatives will provide you with the highest standards of service, convenience and quality in motor insurance.

In the unfortunate circumstances of an accident, you may notify us for a claim by sending an SMS MOTORCLAIM to 9222211100 (Standard SMS charges applicable) or by calling us at 1800-220-233/ 1860-500-3333/ 022-67837800 or email us at fgcare@futuregenerali.in or walk into any of our nearest offices.

It will always be our endeavour to constantly better your experience by innovating and evolving our basket of conveniences. We strive to deliver service which is personalized and is totally transparent. It is our aim to be with you in your time of need.

The policy has been issued on the basis of the information provided by you. The extract of the information has been enclosed for your reference. We would request you to peruse the policy and satisfy yourself that it meets with your requirement fully.

Please note: Transfer of benefits under this insurance policy is not automatic on the sale of the vehicle. The transferee must apply within 14 days from the date of transfer of vehicle in writing to the insurance company with full details in a duly signed fresh proposal form along with evidence of sale and transfer fees of ₹.50/-+ Goods and Service tax.

We would like to assure you that the electronic copy of your policy is as authentic and valid as the physical copy and it can be used as a proof of insurance wherever required.

As a part of the government's Digital India drive, you can now store your insurance policy documents digitally and securely under **DigiLocker**. Download and install the App "DigiLocker" from Playstore and with your Aadhaar number and mobile number create a User ID using an OTP. Under Banking and Insurance submenu, you will find **Future Generali Total Insurance** Tab wherein when you can select the product and update our 8 digit policy number, the Policy PDF of the active policy can be viewed. For more details on DigiLocker, visit https://digitallocker.gov.in/

Once again, thank you for choosing to insure your vehicle with Future Generali and we look forward to being of service to you.

Assuring you of our best services at all times.

If undelivered, please return to:

Future Generali India Insurance Company Limited 4th Floor, Windfall Sahar Plaza Complex Andheri Kurla Road, J.B.Nagar Andheri (East), Mumbai Maharashtra, 400059

For Future Generali India Insurance Co. Ltd.

(Authorised Signatory)





Please review the communication address, email or contact nos. noted on this letter for correctness. In case of any change please contact our nearest branch or call our care lines mentioned above. This will ensure you do not miss out on 'Service Updates' and 'Renewal Reminders'.

Now you can buy Health, Personal Accident, Travel, Home, Motor insurance & also renew your Future Generali Private Car Insurance policy online. Visit us at www.futuregenerali.in





Tax Invoice

	INSURED	DETAILS		
Policy Number	: VD186000	Address of Service Provid	ler: Off Code-2J,Future Generali India Insurance Co Ltd, 4th Floor, Windfall, Sahar Plaza Complex,	
Invoice Number	: 202427PNT0178181		Andheri Kurla Road, J.B.Nagar, Andheri (East), Mumbai, Maharashtra, Pincode - 400059	
Reverse Charge	: No	Area Code	: Andheri Branch Office	
Name of Insured/Proposer	: Mr. Happy Sharma	FGI State Code	: 27	
Address	: S O SHAMSHER PARKASH 718 40 SA, 113 AMBALA HARYANA, Ambala, Yamunanagar, Haryana, Pincode- 135003		: 27AABCF0191R2Z8 : AABCF0191R	
Place of Supply(State Code): 06	Intermediary Name \ Code: Probus Insurance Broker Limited \ 60047581		
GSTIN / UIN Number	:-	Date of Issue / Invoice Date	: 15/07/2024	
Period of Insurance	: From 00:00 hours of 16/07/2024			
	To Midnight of 15/07/2025	Nature of Service	: General Insurance Service	

Received with thanks from a sum of ₹ 5,031.00 towards Premium on the above mentioned policy.

Particulars	HSN/SAC	GWP (Rs.)	Tax %	CGST (Rs.)	SGST (Rs.)	IGST (Rs.)
Other Premium	997134		18%			
TP Premium on goods carriage	997134	4,492.00	12%			539.04
vehicle						
Total		4,492.00				539.04
Grand Total (Premium + GST)					1	5,031.04

NOTE:

- 1. In case of payment by cheque, in the event of dishonour of cheque for any reason whatsoever, insurance cover provided under this receipt automatically stands cancelled from the inception irrespective of whether a seperate communication is sent or not.
- 2. Excess amount, if any, will be adjusted against subsequent policies, or will be refunded on demand.
- 3. 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.

For FUTURE GENERALI INDIA INSURANCE CO. LTD.

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(Authorised Signatory)

Note: This document is digitally signed by Mr Vaibhav Risbud, Authorised Signatory of Future Generali India Insurance Company Limited on 15/07/2024







POS-Future Secure - Commercial Vehicle

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE - Form 51 of the Central Motors Vehicles Rules, 1989

Policy Servicing: Off Code-2J, Future Generali India Insurance Co Ltd, 4th Floor, Windfall, Sahar Plaza Complex, Andheri

Office Kurla Road, J.B.Nagar, Andheri (East), Mumbai, Maharashtra, Pincode- 400059.,Tel No: -

Policy No. : VD186000 Period of Insurance : From 00:00 hrs of 16/07/2024 To

Midnight of 15/07/2025

Insured: Mr. Happy Sharma
CKYC No.:

:

Address : S O SHAMSHER PARKASH 718

40 SA, 113 AMBALA HARYANA,

Ambala, Yamunanagar, Haryana,

135003

Covernote No : - Dated: Zone: C

Intermediary Name/Code: Probus Insurance Broker Limited /

60047581

Telephone(Hom) : 7304332968

Email ID : care@probusinsurance.com

GSTIN Number: - FGI GSTIN Number: 27AABCF0191R2Z8

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION						
Registration No., Make/Model of Vehicle		Engine No.	Chassis No.			
RTA Location						
HR58A6323	PIAGGIO APE CARGO D 600	497TC92DXY823729	MAT457403C7D17506			
YAMUNANAGAR						
Year of Manufacture	Cubic Capacity	Seating Capacity	Gross Vehicle Weight			
2012	395	1	975			

DRIVERS CLAUSE - Any person including 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 learners 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.

* When the vehicle is used for passengers add the following words: when not used for the transport of passengers at time of the accident.

LIMITATIONS AS TO USE - The Policy covers use only under a permit within the meaning of the Motor Vehicle Act, 1988 or such a carriage falling under Sub-section 3 of section 66 of the Motor vehicle's Act 1988. The policy does not cover use for a) Organized racing b) Pace Making c) Reliability Trails d)Speed Testing

Geographical Area: INDIA,

IMPORTANT NOTICE

The Insured is not indemnified if the vehicle is used or driven otherwise 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 be good.

For full details on coverage, terms, conditions and exclusions, please refer the standard policy wordings attached with this schedule.

Warranted that the *Vehicle insured herewith has a valid Pollution Under Control (PUC) Certificate as on the inception date of the policy.(*Not applicable for Electric Vehicles and New Non- Electric Vehicles).

IMPORTANT - 1) All other Terms, Conditions and Exclusions as per Policy Wordings.

- 2) For complete terms, conditions and exclusions, please visit https://general.futuregenerali.in/customer-service/downloads/
- 3) For any redressal of grievance and for escalation matrix https://general.futuregenerali.in/customer-service/grievance-redressal
- 4) If the payment of premium amount has been made through a cheque or in online mode and (i) such cheque is dishonoured, for any reason whatsoever, upon presentation, or (ii) the online payment does not yield a credit to the bank account of FGII, or (iii) the policyholder reverses the premium amount through a chargeback, the insurance cover evidenced through this policy schedule shall stand cancelled, from its inception, with immediate effect, irrespective of whether a separate communication is sent by FGII or not.

LIMITS OF LIABILITY	
Under Section II-I (i): Death of or bodily injury -Such	Under Section II-I (ii): Damage to Third Part Property - ₹
amount as is necessary to meet the requirements of Motor	750000/- in respect of any one claim or series of claims arising out
Vehicles Act, 1988.	of one event.
Under Section III : PA Owner – Driver as per premium	Compulsory Deductible Under Sec I: ₹ 0 NA
computation table.	





Hypothecation Agreement with:- NIL

SPECIAL CONDITIONS - NIL

ADDITIONAL EXCESS - NIL







Policy No: VD186000			Period Of Insurance: From 00:00 hrs of 16/07/2024 To Midnight of 15/07/2025				
INSURED'S DECLARED VALUE							
Type of Body	For Vehicle	For Vehicle	For Non-Elec	For Trailers-₹	For Elec / Electronic	For Bi-Fuel Kit	TotalValue-
	- ₹	Body- ₹	Accessories- ₹		Accessories - ₹	(CNG/LPG)- ₹	₹
VAN	-	0	-	-	-	-	0

SCHEDULE OF PREMIUM			
PARTICULARS	₹	₹	
A-OWN DAMAGE			
Total Own Damage Premium (A) (rounded off)		0	
B-LIABILITY			
Basic Premium including Premium for TPPD			
Total Liability Premium (B)		4,492.00	
Total Annual Premium (A+B)		4,492.00	
Total Premium for the Policy Period		4,492.00	
Goods and Service Tax			
Total Premium (rounded off)			

Class of Vehicle: Goods Carrying-Motorized 3 Wheelers
And Motorized Pedal Cycles-Public Carriers

Subject to Endorsement Nos.

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.

For FUTURE GENERALI INDIA INSURANCE CO. LTD.

POS Name / Pan No: SOURAVSHARMA SOURAVSHARMA / OOIPS6718K

Receipt No: X0591362 Date of Issue: 15/07/2024 Place of Issuance: Mumbai*

*Address as mentioned below.

(Authorized Signatory)

Note: This document is digitally signed by Mr. Vaibhav Risbud, Authorised Signatory of Future Generali India Insurance Company Limited on 15/07/2024

For registration of your Motor claims SMS MOTORCLAIM to 9222211100 (Standard SMS charges applicable)

Stamp Duty of Rs.0.50 is paid as provided under Article Policy of Insurance 47B of Indian Stamp Act,1899 and included in Consolidated Stamp Duty Paid to the Government of Maharashtra Treasury vide Order of Addl. Controller Of Stamps, Mumbai at General Stamp Office,Fort, MUMBAI-400001.,vide this Order No.(LOA/ENF-2/CSD/37/2024/(Validity Period Dt. 25-04-2024 To Dt. 31-03-2025)/OW No. 2060, Dated 16-04-2024.) GRN NO. MH000119505202425E, Dated: 03-04-2024, Bank Of Maharashtra And DEFACE NO. 0000212877202425, Dated: 08-04-2024.

Product UIN : 1/RD/FGIICL/MOTORS/FS/07-08

Infectious Disease / COVID-19 Exclusion

Notwithstanding any provision to the contrary, this Reinsurance / Insurance excludes any loss, damage, liability, expense, fines, penalties or any other amount directly or indirectly caused by, in connection with, or in any way involving or arising out of any of the following –including any fear or threat thereof, whether actual or perceived – :

- Any infectious disease, virus, bacterium or other microorganism (whether asymptomatic or not); or
- Coronavirus (COVID-19) including any mutation or variation thereof; or
- Pandemic or epidemic, as declared as such by the World Health Organization or any governmental authority.





Dear Happy Sharma,

We wish to inform you that the Insurance policy number VD186000 has been issued on the basis of the proposal(via e-proposal/distance marketing/online/physical) and any other subsequent documents, submitted by you post understanding the Terms & Conditions of the policy and consequences of the risk proposed, to the Company for issuance of the policy.

You have agreed to issue this policy, subject to the Company's Board approved Underwriting Policy and that the Policy will come into force only after the Company is in receipt and realisation of full prescribed premium.

The Company shall have no liability under the Policy/contract of insurance if it is found that any of your statements, particulars, information, declarations, warranties, submitted in proposal or other documents are incorrect and/or untrue or any information is suppressed or the information provided is misleading or false in any respect on any matter [whether material or not material] which forms the base to issue the policy by the Company.

In case of any disagreement or objection or any changes with respect to the information mentioned in the transcript below, we request you to please revert back within 15 days from the date of receipt of this transcript or the policy start date whichever is earlier, failing which it shall be deemed that you are satisfied with the correctness of the details mentioned in the transcript.

POS-Future Secure - Commercial Vehicle - TRANSCRIPT/DECLARATION						
Sr No						
1	Insured Name	Happy Sharma				
2	Registration address of the Insured	S O SHAMSHER PARKASH 718 40 SA, 113 AMBALA				
		HARYANA, Ambala, Yamunanagar, Haryana, 135003				
3	Communication address of the Insured	S O SHAMSHER PARKASH 718 40 SA, 113 AMBALA				
		HARYANA, Ambala, Yamunanagar, Haryana, Pincode:-				
		135003				
4	Residence Telephone no					
5	Mobile no	8950482213				
6	Email id	h15063627@gmail.com				
Policy Details						
7	Policy Number	VD186000				
8	Risk start time and date	16/07/2024/00:00				
9	Risk end date	15/07/2025				
10	Renewal NCB %	0%				
	Vehicle	e Details				
11	Make and Model of vehicle insured	PIAGGIO APE CARGO D 600				
12	Registration No	HR58A6323				
13	Engine No	497TC92DXY823729				
14	Chassis No	MAT457403C7D17506				
15	Cubic Capacity	395				
16	Year of Manufacturing	2012				
17	RTO where vehicle is/will be registered	YAMUNANAGAR				
18	Seating Capacity	1				
19	Date of Registration / Purchase	07/06/2012				
20	Usage of the vehicle	A3				
21	Fuel Type	Diesel				
22	Hypothecation/Lease/Hire Purchase	-				
23	Bank Name	-				
24	Vehicle * being insured has valid Pollution Under	Yes				
	Control (PUC) Certificate as on inception date of					
	policy.(*Not applicable for New Vehicle)					
2.7		urance Details				
25	Previous Insurer Name					
26	Expiring Policy No					
27	Expiring Policy Expiry Date	0.00.07				
28	No Claim Bonus % under expiring policy	0.00 %				
29	Is there any claim in expiring policy	Y				





	IDV Details					
20	Vehicle IDV on Renewal					
30		₹				
31	Electrical Accessories IDV	₹.0				
32	Non Electrical Accessories IDV	₹.0				
33	33 CNG IDV ₹.0 Third Party Coverages Opted					
2.4	· · · · · · · · · · · · · · · · · · ·					
34	Basic Premium including Premium for TPPD	Opted				
35	Add:-Trailers	Not Opted				
36	Less: Limit of Liability under sec II-1(ii)-₹. 6000	Not Opted				
37 38	Add : Bi-Fuel Kit (CNG/LPG) Add : Geographical Area Extn	Not Opted Not Opted				
39	Add: Compulsory PA to Owner-Driver ₹. lacs	Not Opted				
40	Add: Compusory PA to Owner-Driver C. Tacs Add: Legal Liability to Employees of the Insured	-				
40	(No. of persons 0)	Not Opted				
41	Add: PA to Drivers/Cleaner/Conductors (No. of	Not Opted				
41	persons 0) PA Limit ₹.0 per person.	Not Opted				
42	Add: PA to Passenger (No. of persons 0) PA Limit ₹.0	Not Onted				
72	per person.	Not Opted				
43	* *	Not Opted				
.5	Annexure attached					
44	Add: Legal Liablity to Employees/Non-Fare Paying	Not Opted				
	Passengers (other than WC) (No. of persons 0)	T. C.				
45	Add: Legal Liability to Person for	Not Opted				
	Operation/Maintenance (No. of persons 0)	•				
46	Add : Legal Liability to Driver/Cleaner/Conductor	Not Opted				
	(No. of persons 0)	-				
47	Add: Increased Limit of Liability under sec II-1(ii)-₹.	Not Opted				
	7.5lacs					
48		Not Opted				
	Own Damage Co	, , ,				
49	Basic Premium on Vehicle	Not Opted				
50	Add : Non-Electrical Accessories	Not Opted				
51	Add:-Trailer	Not Opted				
52	Add: Electrical/Electronic Accessories	Not Opted				
53	Add: Bi-Fuel Kit (CNG/LPG)	Not Opted				
54	Add: Geographical Area Extn	Not Opted				
55	Add: Fibre Glass Tanks	Not Opted				
56	Add: Embassy Loading	Not Opted				
57	Add: Driving Tutions	Not Opted				
58	Add: IMT 23-Cover for mud-guards etc	Not Opted				
59	Add: Overturning during operational use	Not Opted				
60	Add: IMT 34	Not Opted				
· · ·	Less: Anti Theft	Not Opted				
61	I II C C 1, O P '					
62	Less: Use Confined to Own Premises	Not Opted				
	Less: Vehicles Specially Designed/Modified For	Not Opted Not Opted				
62	Less : Vehicles Specially Designed/Modified For Handicapped Persons	Not Opted				
62	Less: Vehicles Specially Designed/Modified For Handicapped Persons Less: No Claim Discount 0%	Not Opted Not Opted				
62 63 64	Less: Vehicles Specially Designed/Modified For Handicapped Persons Less: No Claim Discount 0% Nominee	Not Opted Not Opted				
62 63 64 65	Less: Vehicles Specially Designed/Modified For Handicapped Persons Less: No Claim Discount 0% Nominee Nominee	Not Opted Not Opted				
62 63 64 65 66	Less: Vehicles Specially Designed/Modified For Handicapped Persons Less: No Claim Discount 0% Nominee Nominee Name Nominee Relationship with Insured	Not Opted Not Opted				
62 63 64 65 66 67	Less: Vehicles Specially Designed/Modified For Handicapped Persons Less: No Claim Discount 0% Nominee Name Nominee Name Nominee Relationship with Insured Nominee Age in Y or M	Not Opted Not Opted				
62 63 64 65 66 67 68	Less: Vehicles Specially Designed/Modified For Handicapped Persons Less: No Claim Discount 0% Nominee Name Nominee Name Nominee Relationship with Insured Nominee Age in Y or M Nominee %	Not Opted Not Opted				
62 63 64 65 66 67	Less: Vehicles Specially Designed/Modified For Handicapped Persons Less: No Claim Discount 0% Nominee Name Nominee Name Nominee Relationship with Insured Nominee Age in Y or M	Not Opted Not Opted				





On examination of the Policy, if you notice any mistake, please return the Policy to the Company immediately for correction. Any modification(s) in the policy resulting in additional premium, will be applicable from the inception of the policy and this has to be paid by you immediately to keep the policy coverage intact.





ENDORSEMENTS



(Attached to and forming part of policy)

