



UNITED INDIA INSURANCE COMPANY LIMITED

MO OFFICE,256 AGGARWAL CITY MALL ROAD NO.44 NEAR M2K,PITAMPURA NORTH WEST DELHI - 110034 DELHI PHONE: (9250) 862560 FAX: EMAIL:

BURGLARY STANDARD POLICY Policy No.:0402821221P112269924

PERIOD OF INSURANCE From 00:00 hrs on 27/02/2022 To Midnight on 26/05/2022

Insured

M/s HLL INFRA TECH SERVICES LTD

B14A, SECTOR 62, UTTAR PRADESH 201307 GAUTAM BUDDHA NAGAR UTTAR PRADESH

Agent Name : Agent Code : Mobile/Landline Number/Email :

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

For any Information, Service Requests, Claim intimation and Grievances please write to 040282@uiic.co.in

Download Customer App(www.uiic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.

Website: http://www.uiic.co.in
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BURGLARY STANDARD POLICY SCHEDULE

Policy Number	0402821221P112269924			Previous Policy Number			
Insured Details	Name/ID	M/s	HLL INFRA TECH SERVICES LTD / 23080618942				
	Tel. (O)		Tel.(R)		Fax		
	Email	VIN	IIT@UNICORNDENMART.COM		Mobile		8527710054
	Business/Occupation	on	None				
Period of	From		Erom 00:00 hrs on 27/02/2022		To	To Mid	Iniaht on 26/05/2022
Insurance	From		From 00:00 hrs on 27/02/2022		То	To Midnight on 26/05/2022	

UIIC 040282 : 100% Coinsurance Details

Premise:(Description and situation of the premises containing the property insured)

Note: The premises shall not include yard, garden,open space or out building not communicating with the main building.

Premium **1**,518.00 273.00 **₹** 1.00 IGST(18%) Stamp Duty Total **7** 1,792.00 Receipt Number 10104028221113835157 Receipt Date 26/02/2022

Agent/Broker Code Dev.Officer Code

Location Id	Location Address / Sitation	Pin Code
23260500680	THE DEAN,GOVERNMENT MEDICAL COLLEGE,	457001

Location ID	Risk No./Description-Description of Goods	Description of Items Insured	Sum Insured/Item	Sum Insured/Risk
23260500680	Others - Others	DENTAL CHAIR AND	~	₹
		ACCESSORIES AS PER	4,047,680.00	4,047,680.00
		INVOICE NO		
		UD/HR/4943/2122		

Subject to BP clause as attached

Imposed Excess: 0/-

Total Sum Insured

₹ 4,047,680.00

Addon Cover Details:-

Cover Description	SI(₹)	Premium(₹)	
Theft	4,047,680.00	505.96	

Additional conditions (if Nil

any):

Property described above is

mortagaged to:

Voluntary Excess($\overline{\zeta}$)	0.00	Compulsary Excess()	0.00

Customer GST/UIN No.:	09AADCH4882R1ZQ	Office GST No.:	07AAACU5552C1ZL
SAC Code: Amount Subject to Reverse Charge	997137	Invoice No. & Date:	1221I112269924 & 26/02/2022

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding \mathbf{T} 1 lakh or a claim for refund of premium exceeding \mathbf{T} 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 of Proposal and Declaration: 27/02/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at MO PITAMPURA 040282 on this 26th day of February 2022

For United India Insurance Co. Ltd.,

Affix Policy Stamp here.

Authorised Signatory
Underwritten By - VIN43384 (MO INCHARGE) , Approved By - VIV28307(DO UNDERWRITER)

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