

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

Commercial Vehicles Package Policy

Product Code: 9898 UIN: IRDAN115P0015V02200708



Insured Name	: RANJIT MAHATO	Policy No	: 3005/249051662/00/000
Address	: SITAL NAGAR, BANDAMUNDA, SUNDARGAR, ODISHA	Period of Insurance	: JUN 03, 2022 12:00:00 to Midnight of JUN 02, 2023
Telephone No	:	Mobile No	: *****6359
Email Address	:	E-Policy No	: NA
Nominee Name	:	Policy Issued On	: JUN 03, 2022
Relationship	:	Covernote No	: 202511648
Age	:	RTO Location	: ROURKELA
GSTIN Number (Customer)	:	Hypothecated To	: -
Servicing Branch Name	: Mumbai	Invoice Number	: 210382948404
Named Passenger's Nominee:	-		

Servicing Branch Address	: 414, ICICI LOMBARD HOUSE, VEER SAVARKAR MARG, NEAR SIDDHI VINAYAK TEMPLE MAIN GATE, PRABHADEVI, MUMBAI, 400025, MAHARASHTRA
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Registration No.	Make	Model	Type of Body	GVW	Mfg Yr	Seating Capacity	Chassis No.	Engine No.
OD14A0265	TATA MOTORS	LP 2515 EX	TRUCK	28000	2006	03	701379	445294
Vehicle IDV ([₹])	Side Car ([₹])	Additional Accessories ([₹])	Electrical / Electronic Accessories ([₹])		Non Electrical Accessories ([₹])		CNG / LPG Unit ([₹])	Total IDV ([₹])
0	0	0	0		0		0	0

Premium Details			
	([₹])	LIABILITY(B)	([₹])
OWN DAMAGE(A)			
Basic OD Premium	0	Basic Third Party Liability	43037
Sub Total	0	Total	43037
Less:			
No Claim Bonus 50%	0		
Sub-Total Deductions	0		
Total Own Damage Premium(A)	0	Total Liability Premium(B)	43037
		Total Package Premium(A+B):	43037
		IGST	12%
			5164
		Total Tax Payable in `	5164
		Total Premium Payable In `	48201
Geographical Area: India		Applicable IMT Clauses: 22	
Compulsory Deductible: ` 100		PAYMENT MODE : BY CHEQUE	

Limits of Liability: (a) Under Section II-I(i) of the 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-I(ii) of the policy: Damage to Third Party Property ` 100000/-; PA Cover for Owner-Driver under Section III: CSI ` 0/-. The Compulsory Personal Accident cover has not been opted in this policy on account that, the Owner driver has a separate existing Personal Accident cover against Death and Permanent Disability (Total and Partial) for Sum Insured of at least Rs.15 lacs. **Limitations as to Use:** The Policy covers use of the vehicle for any purpose other than: Hire or Reward, Carriage of goods (other than samples of personal luggage), Organised racing, Pace Making, Reliability trails or Speed testing, any purpose in Connection with Motor Trade. **Driver's Clause:** 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. **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. **Disclaimer:** Please visit www.icicilombard.com for the policy wordings, for complete details on terms and conditions governing the coverage and NCB. This document is to be read with the policy wordings. The policy is valid subject to realization of cheque. We accept premium only via legally recognized modes. In case of dishonour of premium cheque, the company shall not be liable under the policy and the policy shall be void ab-initio. In case of any discrepancy with respect to the policy, please revert within 15 days from the policy start date. This policy is underwritten on the basis of the information provided by you and as detailed in the Risk Assumption Letter shared with you along with the policy. On renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change. **Grievance Redressal:** For resolution of any query or grievance you may contact us on our toll free no. 1800 2666, or visit any of our branch offices. You can also write to us at customersupport@icicilombard.com. For detailed grievance redressal mechanism please visit the "Grievance Redressal" section on our website www.icicilombard.com. 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 Motor Vehicle Act, 1988. In witness whereof, this Policy has been signed at Mumbai on this date of Jul 24, 2020 in lieu of Covernote no. 202511648. The stamp duty of ` 0.5 paid vide deface no. CSD14202013942020 dated May 26, 2020. **Policy Issuing Office:** ICICI Lombard General Insurance Company Limited, ICICI LOMBARD HOUSE, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai 400 025. Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

COMMERCIL VEHICLE LIABILITY ONLY POLICY

Product Code: 3005 UIN: IRDAN115P0015V02200708



Agency Code : EH68273
Agency Name : ANJEL INSURANCE
: BROKING SERVICES PRIVATE
LTD
Agent's Contact No : 20785676
Contact Person :

Signature Not Verified

Digitally signed by JS ICICI
LOMBARD GENERAL
INSURANCE COMPANY
LIMITED

In case of a claim, immediately notify ICICI Lombard General Insurance Company Limited on the Toll Free Number **1800 2666** / (Chargeable) **8655 222666** or SMS "**CLAIM**" to **575758**

Mailing Address: ICICI Lombard General Insurance Company Limited Interface Building No. 16, 601 / 602, 6th Floor, New Link Road Malad (West), Mumbai - 400 064.

Registered Office Address: ICICI Lombard General Insurance Company Limited, ICICI Lombard House, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai - 400 025.

CIN: L87200MH20000016120408