





UNITED INDIA INSURANCE COMPANY LIMITED

CERTIFICATE OF INSURANCE MOTORCYCLE / SCOOTER - PACKAGE UIN: IRDAN545RP0222V01200708

(FORM 51 OF CENTRAL MOTOR VEHICLE RULES 1989)

Customer Id 23056749546 Name of the Insured Address of the Insured Address of the Insured Business/Occupation And Description And Description And Description And Description And Description Business/Occupation And Description And D	Policy No.	140481312	4P113337173	Certificate Number	1404813124	P113337173
Name of the Insured R/O MANDAWARA KI DHANI TALEDA JAMAT TH LALSOT DIST DAUSA Address of the Insured 303303 DAUSA RAJASTHAN Susiness/Occupation Medical Saint S/O RAM JI LAL SAINT OPPOSITE KHADI GRRAMODHYOG, MAIN ROAD RAHUL COMPUTER INSTITUTE, BASSI, DISTT. JAIPUR 303301 JAIPUR RAJASTHAN Telephone (01429) 226646	Customer Id	230567495	346	Issuing Office Address	Code	140481
		R/O MANDAW DAUSA 303303 DAUSA		RAHUL COMPUTER INSTITUTE 303301 JAIPUR RAJASTHAN	, BASSI, DISTT.JAIPU	
Insured's Declared Value ₹ 21083	Business/Occupation	Others	Mobile No 8058930429			
	nsured's Declared Val	ue ₹ 21083				

Period of Insu	Period of Insurance From 00:00 Hrs of 23/11/2024 To Midnight of 22/11/2025									
Particulars of \	/ehicle	e Insured								
Registration I	No.									
Vehicle	Trailer (if any)	Obsolete Vehicle	Engine No.	Chassis No.		Make/Model	Type of Body	Year of Mfg	Cubic Capacity/KW	Seating including driver
RJ - 29 - ST - 5755		No	HA11EPH4G02191	MBLHAR052H4G02518	HERO M	OTOCORP / HF DELUXE KICK SPOKES	SOLO WITH PILLION	2017	100	2
Regist	Registration Authority Geographical Area			Geographical Area		Financier				
RJ:	RJ29 DAUSA			INDIA						
Amount in words	Amount in words: One thousand twenty-two rupees only				•			•		•

Persons or classes of persons entitled to drive

Any person including Insured provided that a person holds an effective driving licence at the time of accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective Learner's Licence may also drive the vehicle and such a person satisfies the requirements of Rule 3 of Central Motor Vehicle Rule, 1989.

Limits of Liability	Agency/Broker Code:	AGN000	2663
	Document Date:		
	DebitNote Number:		
f) Use in connection with Motor Trade	Receipt Date:	21/11	/2024
e) Speed Testing and Reliability Trials	Receipt Number :	101140481241156	07877
d) Pace Making	Total(Rounded Off):	1,0	022.00
c) Organized Racing	Stamp Duty:	₹	1.00
a) Hire or Reward b) Carriage Goods (other than samples or personal luggage)	SGST(9%):	₹	78.00
The policy covers use of the vehicle for any purpose other than	CGST(9%):	₹	78.00
Note: - The policy does not cover liability for death, bodily injury or damage as excluded insection 150 (2) (ii) a Limitations as to use	Premium:	₹ 8	366.00

Under Section II-I (i) Death or bodily injury in respect of any one accident; As per Motor Vehicles Act 1988

Under Section II-I (ii) Damage to third party property in respect of any one claim or series of Dealer Name/Code: claims arising out of one event: ₹ 100000 /-

ASHOK KUMAR VIJAY , Mobile: 8209491012

Direct Business:

Development Officer Code:

Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto 22 I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with provisions of Chapter X & XI of M.V Act, 1988.

Date of Issue: 21/11/2024

Note:-With reference to IRDAI circular no IRDAI/NL/CIR/MOTP/170/10/2018 dated 09/10/2018 and as per the declaration given in the proposal form by owner driver Compulsory Personal Accident (CPA) cover is removed, since he/she is not holding a valid driving license.

For and On behalf of United India Insurance Co. Ltd.

Amount Subject to Reverse Charges-NIL

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.

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED. The genuineness of the policy can be verified through "Verify Your Policy" link at

www.uiic.co.in.

Duly Constituted Attorney





MOTOR INSURANCE - MOTORCYCLE / SCOOTER - PACKAGE(UIN: IRDAN545RP0222V01200708) POLICY SCHEDULE

Policy Number :1404813124P113337173

Geographical Area

: MR PYARE LAL SAINI S/O RAM JI LAL Insured Name/ID

SAINI/23056749546

R/O MANDAWARA KI DHANI TALEDA JAMAT TH LALSOT DIST DAUSA

City: DAUSA District: DAUSA RAJASTHAN State Pincode: 303303 Telephone: Mobile: 8058930429

Business Channel Code: AGN0002663

Dealer Name: Dealer Code:

Insured address

Previous Policy No :1404813123P110478287 Insurance Start Date & Time :23/11/2024 00:00 (hours) Insurance expiry Date & Time :22/11/2025 midnight

Policy Issuing Office Address

OPPOSITE KHADI GRRAMODHYOG, MAIN ROAD RAHUL COMPUTER INSTITUTE, BASSI, DISTT.JAIPUR

,GST No.:- 08AAACU5552C1ZJ

JAIPUR Citv: **JAIPUR** District: RAJASTHAN 303301 Pincode:

Telephone:(01429) 226646 **Business Channel Sub Code:** Agent Name: ASHOK KUMAR VIJAY Land Line No: , Mobile: 8209491012

VEHICLE DETAILS					
Registration Number	RJ - 29 - ST - 5755	Obsolete Vehicle & Engine Number	$NO \times HATTEPHAGD2191$	Year Of Manufacture	2017
RTA Name	RJ29 DAUSA	Chassis Number	MBLHAR052H4G02518	Cubic Capacity/KW	100
Registration Date	02/02/2017	Vehicle Make & Model	HERO MOTOCORP & HF DELUXE KICK SPOKES	Type Of Body	SOLO WITH PILLION
AA Membership Number		Seating Capacity(Including SideCar)		Geographical Extension	

INSURED DECLARED VALUE (₹)

	Vehicle	Trailer/Sidecar	Electrical/Electronic Accessories	Non Electrical Accessories	CNG Kit	LPG Kit	Total	Co- Insurance Details
ſ	21083	0	0	0	0	0	21083	100%

OTHER DETAILS Unique Financier **Policy Subject to IMT Endorsements** Applicable Addon-covers/Services Reference Code 22

PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE:As narrated in the certificate of insurance attached herewith.

LIMITATIONS AS TO USE:As narrated in the certificate of insurance attached herewith.

LIMITS OF LIABILITY:As narrated in the certificate of insurance attached herewith.

EXCLUSIONS:(1)Any accidental Loss Or Damage and/or liability caused sustained or incurred outside the geographical area.(2)Any claim arising out of any contractual liability.(3)Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss.(4)Any liability of whatsoever nature directly or indirectly caused by or contributed to or by arising out of indirectly caused by or contributed to by or arising open or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.(6)Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by 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, multiny rebellion, military or usurped power or by any direct or indirect consequences of 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.

PA Cover CSI

Owner Driver CSI 0 Compulsory 100 0 0 Imposed Voluntary (Under Section III)

SCHEDULE OF PREMIUM (<) A-OWN DAMAGE PRE	MTIIM		B-LIABILITY PREMIUM			TOTAL PREMIUM		
A-OWN DAMAGE PRE	MIUM		B-LIABILITY PREMIUM			Premium(A+B)		
Basic premium on Vehicle and Accessories			B. Basic TP		714.00	CGST(9%)	-	
A. Basic OD	₹	304.27	Total	. ₹	714.00	` '	₹78.00	
			lotai		/14.00	SGST(9%)	₹78.00	
Total	₹	304.27				TOTAL PAYABLE PREMIUM	₹1,022.00	
						Stamp Duty	₹1.00	
				=		SAC Code	997134	
Less :			Gross TP(B)	<	714.00	Invoice No & Date	3124I113337173 &	
Less .	_		Gross OD & TP:	=			21/11/2024	
No Claim Bonus 50%	₹	152.14	(A) + (B)	ζ.		Receipt Number	10114048124115607877	
	÷					Receipt Date	21/11/2024	
Sub Total (Deductions)	₹	152.14				Receipt Amount	₹1,022.00	
						Payment Mode		
Gross OD(A)	₹	152.00				Paying Party	MR PYARE LAL SAINI S/C RAM JI LAL SAINI	

TERMS & CONDITIONS: As per the Indian Motor Tariff, personal copy of the same is available free of cost on request. Further the Indian Motor Tariff is also available and displayed at all United India Insurance company Offices

DISCLAIMENT PROJUCTOR STANDARD CONTROL OF THE PROJUCTOR O

operation of the insured.

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. In case of accident the insured must inform United India Insurance Co. Immediately to arrange spot survey.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding 1 lakh or a claim for refund of premium exceeding 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 & Signature of Proposal: 21/11/2024

In Witness Whereof this policy has been signed at MO BASSI 140481 on this 21st day of November ,2024

Affix Policy Stamp

For United India Insurance Company Limited

Duly Constituted Attorneys

10.95.40.80 IP Address:

Issuing Agent: ASHOK KUMAR VIJAY Agent Location: 140481

Printed By: CUSTOMER @ 21/11/2024 7:47:26 PM Underwritten By - ASHVIJ86 (DIRECT AGENT)

Agent User Name:

ASHVIJ86

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