





POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE
Long Term Stand Alone Motor Third Party Insurance Policy for Two Wheelers

UIN Number - IRDAN190RP0001V01201415

Policy Number : 55100031210500008596

POLICY ISSUING OFFICE:
BHUBANE SHWAR DO (551000),
PLOT NO-5149, G.R. T.TOWER, LEWIS
ROAD, BBSR-DO-III,
ODISHA, 751014.
PHONE NUMBER:06742435730 /
06742435042
FAX NUMBER:06742435730 / NA
Email:nia.551000@newindla.co.in

BUSINESS CHANNEL/CPSC User: NAME: DIRECT BUSINESS - (1D7830568) Bhagaban Mudull - (NIA1D7830268), PHONE NUMBER: / / 9437091354 LAND/FAX NUMBER: / EMAIL: /

CLAIM CONTACT:
BHUBANESHWAR (550001)
ADDRESS: 1st Floor, Alok Bharati Tower, Sahid Nagar,
Bhubaneswar - 751007, , ODISHA , 751007.
PHONE NUMBER: 06742545873 /
MOBILE NUMBER:
Email: ch55@newindla.co.in

INSURED DETAILS

	SURYAM INTERNATIONAL PVT LTD	Customer ID	P093831386 (PAN No :NA
	PLOT NO A/24 BDA HIG DUPLEX ANANTA VIHAR PHASE II POKHARIPUT, BHUBANESWAR BHUBANESWAR, ODISHA, 751020	Contact Number	/ / XXXXXX4656
		Email	
"是是这个人的一个人的	<u> [한 번 : 전 1] 이 회사에서 이 이번 하다는 것은 말하는 것이</u>	GSTIN	NA

POLICY DETAILS

Period of cover	22/12/2021 09:46:01 PM to 21/12/2024 11:59:59 PM		55100081210000009302 - 22/12/21
Previous Insurer	Not available	Previous Policy Number	NA

VEHICLE DETAILS

Registration Number	MZ-01-U-1298	Chassis no./Engine Number	MBLJAW177LGE03441/JA0 7ABLGE01578
Make / Model	HERO/SUPER SPLENDOR	Variant:	SELF START DRUM BRAKE ALLOY WHEEL - FI BS VI
Year of manufacture	2020	Type of body / Type of Fuel	Metal/Petrol
Colour	CANDY BLAZING RED	Cubic capacity(cc) /Wattage(kW):	100cc
Seating capacity including Driver	2	Name of registration authority	Aizwal
Geographical Area / Zone	India Dente de la companya del companya de la companya del companya de la company	Name of the Financier	77. 30 34 420 5
Cover Note No/Cover Note Issue Date:	the state of the s	Automobile Association membership	none

INSURED DECLARED VALUE (in Rs)

SAC	"	an: a)Hire or reward b)Organized rading, OR c)Speed testing	18.
GSTIN(Issuing Office)		997134 (Motor vehicle insurance services) (1741 877)	
		21AAACN4165C2Z2	
Total Payable in Rs(in words): RUPEES TWO TH	IOUSAND SIX H	HUNDRED SIXTY-TWO ONLY	
Total Payable in Rs	71-1	Charles of the second of the s	12002
GST in Rs			2662
Net Premium in Rs		The first of the second	406
Total OD Premium	- er f (c)		2256
The state of the s	0	Total TP Premium	2256
Calculated OD Premium	0	Calculated TP Premium	2256
Basic OD Premium	0	Basic TP Premium	2256
Own Damage	and the state of the state of	Liability	FIJ DESIGNATION

Limits of Liability: Limit of the amount the Company's Liability Under Section II 1(ii) in respect of any one claim or series of cleips a rising out of or Act, 1988. Limit of the amount of the Company's Liability Under Section II 1(ii) in respect of any one claim or series of cleips a rising out of or event: Up to Rs. 1,00,000

For individual covers (OD) in RS:0

Compulsory excess in Rs:NA

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



Imposed excess in Rs:0

Voluntary excess in Rs:0

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 requirement of Rule 3 of the Central Motor Vehicles Rules, 1989

PA cover for Owner Driver

Name of Nominee			Name of the Appointee (if Nominee is a minor)	Relationship to the Nominee
NONE	0	NONE	NA	NA

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
none	0.	NA A District of the Confession of the Confessio	NA STATE AND A STATE OF

Premium and GST Details

Rate of	ax Amount in INR	
Premium	Rs 2256.00	
SGST 9	203	ad.
CGST 9	203	
IGST 0	0	1 1

In witness where of this policy has been signed at BHUBANESHWAR DO on this 22/12/2021WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, conditions and exceptions applicable to Package/Liability policy attached/available on the web site http://newindia.co.in; IMT Endorsement Number(s) printed herewith attached 22,25.

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 Vehicles Act, 1988 is recoverable from the insured: see clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited.

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 XI of M.V. Act, 1988.

For and on behalf of The New India Assurance Company Limited

2 Chakro

Date of Issue: 22/12/2021

(MR. RATIKANTA CHAKRA) [SR.DM]

Duly Constituted Attorney(s)

Tax Invoice No: 55100021P0011752

IRDA Registration Number: 190

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)





ADJUSTMENT VOUCHER

Issuing Office

: BHUBANESHWAR DO (551000)

Address

: PLOT NO-5149, G.R.T. TOWER, LEWIS ROAD, BBSR-DO-III

Phone

,751014 BHUBANESWAR : 06742435730

Fmall

; nia.551000@newindia.co.in

Fax

: 06742435730

Collection Number

55100081210000009302

Collection Date

: 22/12/2021

Business Source Code

: 1D7830568

PAN No of Payer

Received with thanks from SURYAM INTERNATIONAL PVT LTD.

The amount received/Adjusted is toward		Sub A/C Code		
Policy No.	A/C Description	Amount₹	A/C Code	CD0000729192
55100031210500008596	Cash Deposit	2662.00	5076.551000	CD0000729192

Total = ₹ 2662.00

Your Paym Mode	ent/Adjustmen Amount ₹	,	Cheque Date		Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Advance	2662.00	No. N.A.	N.A.	N.A.	N.A.	5510002110061241	407649.00
Premium Deposit	Haylir di		Lay 3 Million		average data	ra Stranger ag ar jaroz (1944).	

Total = ₹ 2662.00

Itilization details of the Collected A		Excess Amount
remium	031	0
256.00	406.00 O.00 Agency Name	Department Code
l no. Agency Code	BHAGABAN MUDULI	31

For The New India Assurance



RCLakro

Date of Issue: 22/12/2021

(MR. RATIKANTA CHAKRA) [SR.DM]

Cashler's Initial

Authorized Signatory

1.Please note the Policy Number, Collection Number and date in all future correspondence. .

2.NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

Policy No.: 55100031210500008596Document generated by AG_BHAGA68 at 22/12/2021 21:46:02 Hours. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbal - 400 001. TOLL FREE No. 1 800 209 1415.