



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

UIN Number - IRDAN190RP0001V01201415

Policy Number :55100031210600008606

POLICY ISSUING OFFICE:
BHUBANESHWAR 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@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME: DIRECT BUSINESS - (1D7830568)
Bhagaban Muduli - (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: 06742646873 /
MOBILE NUMBER:
Email: ch55@newindia.co.in

INSURED DETAILS

| | | | |
|-----------------|--|----------------|-------------------------|
| Insured Name | SURYAM INTERNATIONAL PVT LTD | Customer ID | PO93832490 (PAN No :NA) |
| Insured Address | PLOT NO A/24 BDA HIG DUPLEX PHASE-II ANANTA VIHAR POKHARIPUT,BHUBANESWAR,, BHUBANESWAR, ODISHA, 751020 | Contact Number | / / XXXXXX4656 |
| | | Email | |
| | | GSTIN | NA |

POLICY DETAILS

| | | | |
|------------------|--|------------------------|------------------------------------|
| Period of cover | 23/12/2021 05:08:23 AM to 22/12/2024 11:59:59 PM | Receipt Number | 55100081210000009313 - 23/12/21 |
| Previous Insurer | Not available | Previous Policy Number | NA |

VEHICLE DETAILS

| | | | |
|---|------------------------|--------------------------------------|--------------------------------------|
| Registration Number | BR-01-BM-3871 | Chassis no./Engine Number | MBLHA10ABCHC02747/HA 10EGCHC02747 |
| Make / Model | HERO HONDA/PASSION PRO | Variant: | DRUM SELF SPOKE |
| Year of manufacture | 2012 | Type of body / Type of Fuel | Metal/Petrol |
| Colour | OTHER | Cubic capacity(cc) /Wattage(kW): | 97cc |
| Seating capacity including Driver | 2 | Name of registration authority | Patna |
| Geographical Area / Zone | India | Name of the Financier | |
| Cover Note No/Cover Note Issue Date: | / | Automobile Association membership | none |

INSURED DECLARED VALUE (in Rs)

| Year | Duration | Vehicle | Trailer | Non-Elec Acc | Electrical Acc | Bi-fuel kit | Total Value |
|------|----------|---------|---------|--------------|----------------|-------------|-------------|
|------|----------|---------|---------|--------------|----------------|-------------|-------------|

SCHEDULE OF PREMIUM

| Own Damage | | Liability | |
|--------------------------------|--|-----------------------|------|
| Basic OD Premium | 0 | Basic TP Premium | 2256 |
| Calculated OD Premium | 0 | Calculated TP Premium | 2256 |
| Total OD Premium | 0 | Total TP Premium | 2256 |
| Net Premium in Rs | | | 406 |
| GST in Rs | | | 2662 |
| Total Payable in Rs | | | |
| Total Payable in Rs(in words): | RUPEES TWO THOUSAND SIX HUNDRED SIXTY-TWO ONLY | | |

GSTIN(Issuing Office)

21AAACN4165C2Z2

SAC

997134 (Motor vehicle insurance services)

Limitation as to use:The policy covers use for any purpose other than: a)Hire or reward b)Organized racing. OR c)Speed testing

Limits of Liability:Limit of the amount the Company's Liability Under Section II 1(i) in respect of any one accident: as per the Motor Vehicles 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 claims arising out of one event: Up to Rs. 1,00,000

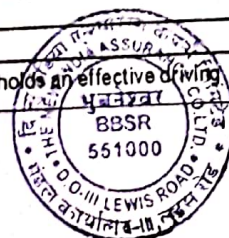
For individual covers (OD) in RS:0

Compulsory excess in Rs:NA

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 | Age of Nominee | Relationship with the Insured | 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 | NA |

Premium and GST Details

| | Rate of Tax | Amount in INR |
|---------|-------------|---------------|
| Premium | | Rs 2256.00 |
| SGST | 9 | 203 |
| CGST | 9 | 203 |
| IGST | 0 | 0 |

In witness where of this policy has been signed at BHUBANESHWAR DO on this 23/12/2021 WARRANTED 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.

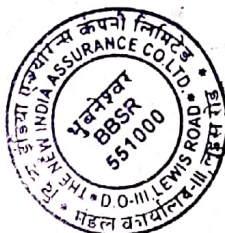
Important notice:

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 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

Date of Issue: 23/12/2021



R. Chakra

(MR. RATIKANTA CHAKRA)
[SR.DM]

Duly Constituted Attorney(s)

Tax Invoice No : 55100021P0011762

IRDA Registration Number: 190



ADJUSTMENT VOUCHER

Issuing Office : BHUBANESHWAR DO (551000)
Address : PLOT NO-5149, G.R.T. TOWER, LEWIS ROAD, BBSR-DO-III
751014
BHUBANESHWAR
Phone : 06742435730
Email : nia.551000@newindia.co.in
Fax : 06742435730
Collection Number : 55100081210000009313
Collection Date : 23/12/2021
Business Source Code : 1D7830568
PAN No of Payer :

Received with thanks from SURYAM INTERNATIONAL PVT LTD.

The amount received/Adjusted is towards -

| Policy No. | A/C Description | Amount ₹ | A/C Code | Sub A/C Code |
|----------------------|--------------------------------|----------|-------------|--------------|
| 55100031210500008606 | Cash Deposit Account-551000 | 2662.00 | 5076.551000 | CD0000729192 |

Total = ₹ 2662.00

Your Payment/Adjustment Details are as under -

| Mode | Amount ₹ | Cheque No. | Cheque Date | Drawee Bank | Drawee Branch | Reference No. | Scroll/BG/A PD Balance |
|-------------------------|----------|------------|-------------|-------------|---------------|------------------|------------------------|
| Advance Premium Deposit | 2662.00 | N.A. | N.A. | N.A. | N.A. | 5510002110061294 | 385465.00 |

Total = ₹ 2662.00

Utilization details of the Collected Amount :

| Premium | GST | Stamp Duty | Excess Amount |
|---------|--------------|-----------------|-----------------|
| 2256.00 | 406.00 | 0.00 | 0 |
| Sl no. | Agency Code | Agency Name | Department Code |
| 1 | NIA1D7830268 | BHAGABAN MUDULI | 31 |

For The New India Assurance Company Limited



Date of Issue: 23/12/2021

R Chakra

(MR. RATIKANTA
CHAKRA)
[SR.DM]

Cashier's Initial

Authorized Signatory

Note -

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. : 55100031210500008606 Document generated by AG_BHAGA68 at 23/12/2021 05:08:25 Hours.
Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.