





#### POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Two Wheeler Liability Only Policy

UIN Number - IRDAN190RP0002V01200203

## Policy Number :55100031220200000605

POLICY ISSUING OFFICE: BHUBANESHWAR DO (551000), PLOT NO-5149, G.R.T.TOWER, LEWIS ROAD, BBSR-DO-III, ODISHA, 751014. PHONE NUM BER:06742435730 / 06742435042 FAX NUM BER: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:/ EM AIL: /

CLAIM CONTACT: BHUBANESHWAR (550001) ADDRESS: 1st Floor, Alok Bharati Tower, Sahid Nagar, Bhubaneswar - 751007, , , ODISHA , 751007. PHONE NUM BER: 05742545873 / M OBILE NUM BER: Email: ch55@ newindia.co.in

## INSURED DETAILS

Insured Name	ANIL KUMAR SINGH	Oustomer ID	PO96677090 (PAN No :NA)
Insured Address	SURYAM INTERNATIONAL PVT LTD A/24 BDA HIG DUPLEX ANANTA VIHAR PHASE-II POKHARIPUT, BHUBANESWAR, BHUBANESWAR, ODISHA, 751010	Contact Number	/ / xxxxxx2109
		Email	
		GSTIN	NA

#### POLICY DETAILS

Period of cover	26/04/2022 03:53:22 PM to 25/04/2023 11:59:59 PM	Receipt Number	10000089220400573138 - 26/04/22	
Previous Insurer	Not available	Previous Policy Number	NA .	

#### VEHICLE DETAILS

Registration Number	JH-02-P-9599	Chassis no./Engine Number	MD625NF1691F30676/0F F91034527
Make / Model	TVS/STAR	Variant:	ατγ
Year of manufacture	2010	Type of body / Type of Fuel	Metal/Petrol
Colour	NM	Oubic capacity(cc) /Wattage(kW):	110cc
Seating capacity including Driver	2	Name of registration authority	Hazaribagh
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note /		Automobile Association membership	none

## INSURED DECLARED VALUE (in Rs)

Vehide	Trailer	Non-Bec Acc	Bectrical Acc	Bi-fuel kit	Total Value	
0	0	N/A	N/A	N/A	0	}

## COURTS IN EIGHT DOCUMENT

Owr	Damage	Liability	
Basic OD Premium	0	Basic TP Premium	752
Calculated OD Premium	0	Calculated TP Premium	752
Total OD Premium	0	Total TP Premium	752
Net Premium in Ps			752
GST in Ps			136
Total Payable in Rs			888
Total Payable in Rs(in words):	RUPEES EIGHT HUNDRED EIG	SHTY-EIGHT ONLY	AT VA

			17	17.	7	
GSTIN(Issuing Office)	21AAACN4165C2Z2	15	"Cl	40	4	7
SAC	997134 (Motor vehicle insurance service	(ae	1 3	347	5	1
		-	1 150	200		•

Limitation as to use: The policy covers use for any purpose other than: a) Hire or reward b) Organized racing. ORch Speed testing Limits 10, yilly: Limit of the amount the Company's Liability Under Section II 1(i) in respect of any one accident as per the Most Vehicles Act 1973; fill of the amount of the Company's Liability Under Section II 1(ii) in respect of any one claim or series of dailys arising out of one event 11 1672 at 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	Age of Nominee	Relationship with the	Name of the Appointee (if Nominee is a minor)	Relationship to the
NONE	0	NONE	NA	NA

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
none	0		NA

#### Premium and GST Details

_ • .	Rate of Tax	Amount in INR
Premium	•	Rs 752.00
SGST	9	68
CCST	9	68
ICST	0	0

In witness where of this policy has been signed at BHUBANESHWAR DO on this 26/04/2022WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELED 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 dause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the nob 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.

Anti Money Laundering Clause: In the event of a daim under the policy exceeding Rs 1 lakh or a daim for refund of premium exceeding Rs 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 website.

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.

Date of Issue: 26/04/2022

For and on behalf of The New India Assurance Company Limited

(MR. RATIKANTA CHAKRA) [SR.DM]

Duly Constituted Attorney(s)

Tax Invoice No: 55100022P0000776

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C

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





## COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office

: BHUBANESHWAR DO (551000)

Address

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

,751014 BHUBANESWAR

Insured Pan Number

: 06742435730

Phone Email

; nia.551000@newindia.co.in

Fax

: 06742435730

Collection Number

: 10000089220400573138

Collection Date

: 26/04/2022

**Business Source Code** 

: 1D7830568

PAN No of Payer

Received with thanks from ANIL KUMAR SINGH.

The amount received/Adjusted is toward	5 -				
Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code	
55100031220200000605	Bank-100000	888.00	9100.100000	BA00013647-100000-9100	

Total = ₹ 888.00

Your Payment/Adjustment Details are as under -						5 W/DC/A	
Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
EPG Credit	888.00	WUR211 0733 2350	N.A.	N.A.	N.A.	5510002210002736	N.A.

Total = ₹ 888.00

Date of Issue: 26/04/2022

Utilization details of the Collected Amount :

	tails of the Collected	GST		Stamp Duty	Excess Amount
Premium		136.00		0.00	0
752.00	A Codo	130.00	Agency Name		Department Code
SI no.	Agency Code		BHAGABAN MUDU	U :	31
11	NIA1D7830268		C		

For The New India Assurance Company Limited

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(MR. RATIKANTA [SR.DM]

Cashler'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 limit if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

Policy No.: 55100031220200000605Document generated by AG\_BHAGA68 at 26/04/2022 15:53:23 Hours. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbal - 400 001. TOLL FREE No. 1 800 209 1415.