



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

UIN Number - IRDAN190RP0001V01201415

Policy Number:55100031210500008629

POLICY ISSUING OFFICE: EHUBANE 9HWAR DO (551000), PLOT NO-5149, G.R. T.TOWER, LEWIS ROAD, EBSR-DO-III, , , ODI 9HA , 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: / CLAIM CONTACT:
BHUBANESHWAR (550001)
ADDRESS: 1st Floor, Alok Bharati Tower, Sahid Nagar,
Bhubaneswar - 751007, , , ODISHA , 751007.
PHONE NUMBER: 05742545873 /
MOBILE NUMBER:
Email: ch65@newindia.co.in

INSURED DETAILS

Insured Name	SURYAM INTERNATIONAL PVT LTD	Customer ID	P093847147 (PAN No :NA)
Insured Address	PLOT NO A/24 BDA HIG DUPLEX ANANTA VIHAR PHASE-II POKHARIPUT, BHUBANESWAR., BHUBANESWAR, ODISHA, 751020	Contact Number	/ / XXXXXX4656
		Email	
7 de		GSTIN	NA

POLICY DETAILS

Period of cover	23/12/2021 02:23:52 PM to 22/12/2024 11:59:59 PM	Receipt Number	55100081210000009343 - 23/12/21
Previous Insurer	Not available	Previous Policy Number	NA

VEHICLE DETAILS

VEHICLE DETAILS			
Registration Number	TR-01-9931	Chassis no./Engine Number	MD2A76AY7JRK50303/PFY RHJ20117
Make / Model	BAJAJ/PLATINA 100	Variant	ES
Year of manufacture	2018	Type of body / Type of Fuel	Metal/Petrol
Colour	OTHER	Cubic capacity(cc) /Wattage(kW):	100cc
Seating capacity including Driver	2	Name of registration authority	Agartala
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	1	Automobile Association membership	none

INSURED DECLARED VALUE (in Rs)

Year	Duration	Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
COUEDINE	E COENTENA						

SCHEDULE OF PREMIUM

Own	Damage	Liability	
Basic OD Premium	0	Basic TP Premium	2256
Calculated OD Premium	0	· Calculated TP Premium	2256
Total 00 Premium	0	Total TP Premium	2256
Net Premium in Rs			2256
GST in Rs			406
Total Payable in Rs			2662
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, 1983. 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
	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

BBSR C

551000 (EWIS ROAD

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



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. 1989.

PA cover for	or Owner	Driver
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Name of Nominee	No. 10 Personal Perso					
	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	1	

PA cover for named persons

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

Premium and GST Details

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

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

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 CLARONO

(MR. RATIKANTA CHAKRA) [SR.DM]

Duly Constituted Attorney(s)

Tax Invoice No: 55100021P0011789

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

,751014 BHUBANESWAR

Phone

: 06742435730

Email

: nia.551000@newindia.co.in

Fax

: 06742435730

Collection Number

: 55100081210000009343

Collection Date

Business Source Code

: 23/12/2021

PAN No of Payer

: 1D7830568

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	
55100031210500008629	Cash Deposit	2662.00	5076.551000	CD0000729192	
	Account-551000	1		1	

Total = ₹ 2662.00

Your Payment/Adjustment Details are as under

	- To a to y ment of ostment 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.	5510002110061530	361507.00						

Total = ₹ 2662.00

Date of Issue: 23/12/2021

Utilization details of the Collected Amount:

demanded details of the confected Amount .											
Premium		GST		Stamp Duty	Excess Amount						
2256.00		406.00		0.00	0						
SI no.	Agency Code		Agency Name		Department Code						
1	NIA1D7830268		BHAGABAN MUDULI		31						

For The New India Assurance Company Limited

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(MR RATIKANTA

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 installment if the premium paid has been exhausted by turnover declarations of there is insufficient premium balance.

Policy No.: 55100031210500008629Document generated by AG_BHAGA68 at 23/12/2021 14:23:55 Hours. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Murnbal - 400 001. TOLL FREE No. 1 800 209 1415.