





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

## UIN Number - IRDAN190RP0001V01201415

#### Policy Number : 55100031210500008625

POLICY ISSUING OFFICE: 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@newindia.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, , ODI SHA , 751007.
PHONE NUMBER: 08742545873 / MOBILE NUMBER: Email: ch55@newindia.co.in

#### **INSURED DETAILS**

Insured Name	SURYAM INTERNATIONAL PVT LTD	Customer ID	PO93833281 (PAN No :NA)
Insured Address	PLOT NO A/24 BDA HIG DUPLEX ANANATA VIHAR POKHARIPUT BHUBANESWAR,, BHUBANESWAR,ODISHA, 751020	Contact Number	/ / XXXXXX4656
	Bijos/ atzorratjes is a jija ta	Email	
		GSTIN	NA

POLICY DETAILS			55100081210000009337 -
	23/12/2021 01:42:11 PM to 22/12/2024 11:59:59 PM	1 to 22/12/2024 11:59:59 PM Receipt Number 551000:	
	N.A	Previous Policy Number	
Previous Insurer	Not available		

### VELUCIE DETAILS

VEHICLE DETAILS		Chassis no./Engine Number	MRI JAOSELIBGE03085/JAO	
Registration Number	BR-01-BC-5298	Chassis no./Engine indifficer	6EFBGE03216	
Make / Model	HERO HONDA/GLAMOUR	Variant:		
	2011	Type of body / Type of Fuel	Metal/Petrol	
Year of manufacture Colour	G BLACK	Cubic capacity(cc) /Wattage(kW):	125cc	
Seating capacity including	2	Name of registration authority	Patna	
Driver	la dia	Name of the Financier		
eographical Area / Zone India over Note No/Cover Note / sue Date:		Automobile Association membership	none	

INSURED DECLARED VALUE (in Rs)

Year	Duration	Vehicle	Trailer   Non-Elec Acc   Electrical Acc   Bi-fu	iel kit lotai value
SCHEDULE OF			Liability	
	Own Damage	- In	Basic TP Premium	2256
Basic OD Premiu		0	Calculated TP Premium	2256
Calculated OD Pi	remium	- 0	Total TP Premium	2256
otal OD Premiu	m	10	Total II Treman	2256
let Premium in	Rs	7	7	406
SST in Rs	* 1			2662
Total Payable in	Rs		WINDDED GIVTY TWO ONLY	
Total Payable in	Rs(in words): RUPEES	TWO THOUSAND SIX F	UNDRED SIXTY-TWO ONLY	

Non-Elec Acc Electrical Acc Bi-fuel kit

Total Payable in Rs(in words):	RUPEES TWO THOUSAND SIX TION	DICES GIATT TITLE
	2 40	21AAACN4165C2Z2
GSTIN(Issuing Office)		997134 (Motor vehicle insurance services)
SAC		a)Hire or reward b)Organized racing, OR c)Speed testing
- "	for any nurnose other than: 8	a)Hire or reward b)Organized rading, Oktopopus

Limitation as to use: The policy covers use for any purpose other than: a)Hire or reward b)Organized racing, O 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 AUS SUP

event: Up to Rs. 1,00,000 Compulsory excess in Rs:NA For individual covers (OD) in RS:0 Voluntary excess in Rs:0

Imposed excess in Rs:0 Persons or classes of persons entitled to drive: Any person including the insured provided that a person driving,

Scanned by CamScanner

ing

ds and the ctive of

551000

O.III LEWIS POR

**Total Value** 

# 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 Rules, 1989.

PA cover for Owner Driver

Name of Nominee	COM STATES OF STREET			
	Age of Nominee	Relationship with the Insured	Name of the Appointee (if Nominee is a minor)	Relationship to the
none	[0	none	none	none

PA cover for named persons

Name	001.0					
	CSI Opted(Rs.)	Nominee	Relationship			
none		NA	NA			

## Premium and GST Details

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

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

(MR. RATIKANTA CHAKRA) [SR.DM]

LCLakro

Duly Constituted Attomey(s)

Tax Invoice No: 55100021P0011785

IRDA Registration Number: 190

abilit y Un

### 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

: 55100081210000009337

**Collection Date** 

: 23/12/2021

**Business Source Code** 

PAN No of Payer

: 1D7830568

Received with thanks from SURYAM INTERNATIONAL PVT LTD.

The amount received/Adjusted is toward	S -			
Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code
55100031210500008625	Cash Deposit	2662.00	5076.551000	CD0000729192
	Account-551000			

Total = ₹ 2662.00

Your Payment/Adjustment Details are as under -						D. f Ma	Scroll/BG/A
Mode	Amount ₹		Cheque Date	Drawee Bank	Drawee Branch	Reference No.	PD Balance
Advance Premium	2662.00	No. N.A.	N.A.	N.A.	N.A.	5510002110061511	364 169.00

Total = ₹ 2662.00

	details of the Collected	GST .		Stamp Duty	Excess Amount
Premium		406.00		0.00	0
2256.00	Agency Code	100.00	Agency Name		Department Code
SI no.	NIA1D7830268		BHAGABAN MUDL	LI	31

For The New India Assurance Company Limited



chakre

Date of Issue: 23/12/2021

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

Policy No.: 55100031210500008625Document generated by AG\_BHAGA68 at 23/12/2021 13:43:27 Hours. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.