



1504023120P110722152

UNITED INDIA INSURANCE COMPANY LIMITED

CERTIFICATE OF INSURANCE

MOTORCYCLE / SCOOTER - LIABILITY ONLY POLICY (FORM 51 OF CENTRAL MOTOR VEHICLE RULES 1989)

Certificate Number

	1304	0231201110/22	132									
Customer Id	2309	6952594				Issuing Office Address Code 150402						
Name of the Insured	MR K	BALAKRISHNA				SURVEY NO. 423/7A2,						
S/O RAMAKRISHNA KUMANDANAPETA VIL KOMATAPALLI PO BOBBILI MDL VIZIYANAGARAM DIT				FIRST FLOOR, DADI HONDA SHOW ROOM UPSTAIRS, Near Sai Ram Degree College, Bypass Road, PARVATHIPURAM 535501								
Address of the Insured	53556	8				VIZIANAGARAM						
	VIZIAN	NAGARAM					ANDHRA PRADESH					
	ANDHRA PRADESH					Telephone (8963) 221226						
Business/Occupation	Others	Telep	hone :									
Insured's Declared Valu	ie ₹ 0											
Period of Insurance						From 00:00 Hrs of 22	2/12/2020 To Mi	dnight of 21/1	2/2021			
Particulars of Vehicle In	nsured											
Registration No.									Cubic	Seating including		
Vehicle	Trailer (if any)	Obsolete Vehicle	Engine No.	Chassis No.		Make/Model	Type of Body	Year of Mfg	Capacity/KW	driver		
AP - 35 - AK - 6360		No	WE41975	WE35689	Bajaj Au	to Ltd / PULSAR PULS 150	AR Solo with Pillion	2017	150	2		
Registration Auth	nority		Geograp	hical Area		Financier						
AP35 VIZIANAGA	RAM		INDIA									
Amount in words:		Eight hundre	ed eighty-eigl	ht rupees only								
Persons or classes of particle Any person including Insurthe person holding an effective	ed provid	ded that a person h								e. Provided also tha		
Limitations as to use						Premium:			7	752.00		
The policy covers use of th	e vehicle	e for any purpose o	ther than			CGST(9%): 68.						
a) Hire or Reward						SGST(9%): 68.0						
b) Carriage Goods (other t	han sam	ples or personal lug	ggage)			Stamp Duty: 1.						
c) Organized Racing d) Pace Making						Total(Rounded Off):						
e) Speed Testing and Relia	hility Tria	als				Receipt Number: 1011504022011169						
f) Use in connection with M						Receipt Date: 21/12/202						
,						DebitNote Number:						
				Document Date:								
Limits of Liability Under Section II-I (i) Deat Vehicles Act 1988		, , , ,	•			Agency/Broker Code: T VENKATESWARULU . 9440101578	, Mobile:		<u> </u>	AGN0005461		
Under Section II-I (ii) Dam			in respect of	any one claim	or series of	Dealer Name/Code:						
claims arising out of one e	vent: 【 1	100000 /-				Direct Business:						

Development Officer Code:

Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto

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I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with provisions of Chapter X & XI of M.V Act, 1988.

Policy No.

Date of Issue: 21/12/2020
Note:-With reference to IRDAI circular no IRDAI/NL/CIR/MOTP/170/10/2018 dated 09/10/2018 and as per the declaration given in the proposal form by owner driver Compulsory Personal Accident (CPA) cover is removed, since he/she is not holding a valid driving license.

Amount Subject to Reverse Charges-NIL

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE
IGNORE IF ALREADY UPDATED.

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney





MOTOR INSURANCE - MOTORCYCLE / SCOOTER - LIABILITY ONLY POLICY SCHEDULE

:1504023120P110722152 **Policy Number**

Geographical Area : MR K BALAKRISHNA/23096952594 Insured Name/ID Insured address

O RAMAKRISHNA KUMANDANAPETA VIL KOMATAPALLI PO BOBBILI MDL

VIZIYANAGARAM DIT VIZIANAGARAM VIZIANAGARAM City: District: State: ANDHRA PRADESH Pincode: 535568 Telephone: Mobile: 9440101578

Business Channel Code: AGN0005461

Dealer Name: Dealer Code: VEHICLE DETAILS **Previous Policy No**

Insurance Start Date & Time :22/12/2020 00:00 (hours) Insurance expiry Date & Time Policy Issuing Office Address :21/12/2021 midnight

SURVEY NO. 423/7A2, FIRST FLOOR, DADI HONDA SHOW ROOM UPSTAIRS, Near Sai Ram Degree College, Bypass Road, PARVATHIPURAM , GST No.:- 37AAACU5552C1ZI

VIZIANAGARAM District: VIZIANAGARAM City: State: ANDHRA PRADESH Pincode: 535501

Telephone:(8963) 221226 Business Channel Sub Code: Agent Name:T VENKATESWARULU Land Line No: , Mobile: 9440101578

VEHICLE DETAILS								
Registration Number	AP - 35 - AK - 6360	Obsolete Vehicle & Engine Number	No & WE41075	Year Of Manufacture	2017			
RTA Name	AP35 VIZIANAGARAM	Chassis Number	WE35689	Cubic Capacity/KW	150			
Registration Date	07/09/2017	Vehicle Make & Model	Bajaj Auto Ltd & PULSAR PULSAR 150	Type Of Body	Solo with Pillion			
AA Membership Number		Seating Capacity(Including SideCar)		Geographical Extension				
NSURED DECLARED VALUE ()								

Vehicle	Trailer/Sidecar	Electrical/Electronic Accessories	Non Electrical Accessories	CNG Kit	LPG Kit	Total	Co- Insurance Details
0	0	0	0	0	0	0	100%
OTHER DETAILS	•		_				

Financier		Policy Subject to IMT Endorsements	Applicable Addon-covers/Services	Unique Reference Code	

PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE: As narrated in the certificate of insurance attached herewith.

LIMITATIONS AS TO USE:As narrated in the certificate of insurance attached herewith. **LIMITS OF LIABILITY:**As narrated in the certificate of insurance attached herewith.

EXCLUSIONS: (1) Any accidental Loss Or Damage and/or liability caused sustained or incurred outside the geographical area. (2) Any claim arising out of any contractual liability. (3) Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss. (4) Any liability of whatsoever nature directly or indirectly caused by or contributed to or by arising out of ionizing radiations or contamination by radioactivity from any nuclear fuel-for the purpose of this experience, combustion shall include any self sustaining process of nuclear fission. (5) Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material. (6) Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war), civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences or any consequences thereof and in default of such proof the Company shall not be liable to make any payment in respect of such a claim.

PA Cover CSI (DEDUCTIBLES (Under Section I) (🕻)						
Owner Driver CSI (Under Section IV)	0	Compulsory	100	Imposed	0	Voluntary	0	
SCHEDULE OF PREMIUM (\$\)								

A-OWN DAMAGE	PREMIUM		B-LIABILITY PRE	MIUM		TOTAL PRE	MIUM
						Premium(A+B)	₹752.00
			B. Basic TP	₹	752.00	CGST(9%)	₹68.00
			Total	₹	752.00	SGST(9%)	₹68.00
Gross OD(A)	₹	0.00				TOTAL PAYABLE PREMIUM	₹888.00
	-					Stamp Duty	₹1.00
						SAC Code	9971
			Gross TP(B)	₹		Invoice No & Date	3120I110722152 & 21/12/2020
			Total Liability Premium	₹	752.00	Receipt Number	10115040220111692314
						Receipt Date	21/12/2020
						Receipt Amount	₹888.00
						Payment Mode	PAYMENT GATEWAY - PAYTM
						Paying Party	MR K BALAKRISHNA

TERMS & CONDITIONS: As per the Indian Motor Tariff, personal copy of the same is available free of cost on request. Further the Indian Motor Tariff is also available and displayed at all United India Insurance company Offices

and on Website www.uiic.co.in **DISCLAIMER:** The policy stands Cancelled or void in the event of Cheque Dishonored. The company may cancel the policy by sending 7 days notice in case of fraud, misrepresentation, nondisclosure of material fact or non co-

operation of the insured.

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 Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For Legal interpretation, English Version will hold good. In case of accident the insured must inform United India Insurance Co. Immediately to arrange spot survey.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding 1 lakh or a claim for refund of premium exceeding 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's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date & Signature of Proposal : 21/12/2020 In Witness Whereof this policy has been signed at BO PARVATHIPURAM 150402 on this 21st day of December ,2020

Affix Policy Stamp

For United India Insurance Company Limited

Duly Constituted Attorneys

IP Address: 10.95.3.103

T VENKATESWARULU. **Issuing Agent:** Agent Location:

Printed By: CUSTOMER @ 21/12/2020 4:30:13 PM Underwritten By - TTT72 (DIRECT AGENT)

Agent User Name:

TTT72

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