



UNITED INDIA INSURANCE COMPANY LIMITED

D.NO:11-186 TO 193, ROOM NO:6, IST FLOOR,UPSTAIRS LAKSHMI VILAS BANK
GOPALAPATNAM, VISAKHAPATNAM ANDHRA PRADESH INDIA 530027
VISAKHAPATNAM - 530027 ANDHRA PRADESH
PH: (0891) 2517586 FAX: EMAIL:

GCV PUBLIC CARRIER OTHER THAN 3 WHEELER PACKAGE POLICY

UIN. IRDAN545RP0048V01199900
POLICY NO.:1501843125P100225886
VEHICLE NO.:AP - 39 - UC - 6608

PERIOD OF INSURANCE
From 00:00 Hrs of 03/04/2025
To Midnight of 02/04/2026

Insured

MR VIRODHI SUNEEL

MOHAN RAO,TUMBALI JIYAMMAVALASA,RAVADA RAVADA,G M VALASA,MANYAM 535526
535526
VIZIANAGARAM
ANDHRA PRADESH

CONTACT NUMBER: ***5039 (M)**

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

| | |
|------------------------------|--|
| Agent Name | : VIZZA INSURANCE BROKING SERVICES |
| Agent Code | : PVT. LTD. |
| Mobile/Landline Number/Email | : BRC0000794 |
| | : 8608800072 / (44) 42691341 |
| | : customercare@vizzafin.com |

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

For any Information, Service Requests, Claim intimation and Grievances please write to 150184@uiic.co.in

Download Customer App(www.uiic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.

Website: <http://www.uiic.co.in>

Printed By : CUSTOMER @ 02/04/2025 12:48:05 PM



UNITED INDIA INSURANCE COMPANY LIMITED

CERTIFICATE OF INSURANCE
GCV PUBLIC CARRIER OTHER THAN 3 WHEELER-PACKAGE POLICY
UIN. IRDAN545RP0048V01199900
(FORM 51 OF CENTRAL MOTOR VEHICLE RULES 1989)

| | | | | | | | | | | |
|---|---|------------------------|---|----------------------|-------------------|--------------------------|----------------|-------------|-------------------|------|
| Policy No. | 1501843125P100225886 | | Certificate Number | 1501843125P100225886 | | | | | | |
| Customer Id | 23410272498 | | Issuing Office Address | Code | 150184 | | | | | |
| Name of the Insured | MR VIRODHI SUNEEL | | D.NO:11-186 TO 193, ROOM NO:6, 1ST FLOOR,UPSTAIRS LAKSHMI VILAS BANK GOPALPATNAM, VISAKHAPATNAM ANDHRA PRADESH INDIA 530027 | | | | | | | |
| Address of the Insured | MOHAN RAO,TUMBALI JIYYAMMAVALASA,RAVADA RAVADA,G M VALASA,MANYAM 535526 | | 530027 VISAKHAPATNAM ANDHRA PRADESH | | | | | | | |
| | 535526 VIZIANAGARAM ANDHRA PRADESH | | Telephone (0891) 2517586 | | | | | | | |
| Business/Occupation | None | Mobile No. - *****5039 | | | | | | | | |
| Effective date of commencement of Insurance for the purpose of Act from 00:00 Hrs on 03/04/2025 | | | Insured's Declared Value ₹ 750000 | | | | | | | |
| Date of Expiry of the Insurance Midnight on 02/04/2026 | | | | | | | | | | |
| Particulars of Vehicle Insured | | | | | | | | | | |
| Registration No. | Vehicle | Trailer (if any) | Obsolete Vehicle | Engine No. | Chassis No. | Make/Model | Type of Body | Year of Mfg | HP/Cubic Capacity | GVW |
| AP - 39 - UC - 6608 | | | No | LNH016994P | MB1AB42E2NRLV6041 | ASHOK LEYLAND / BDI4TADD | FSD | 2022 | 1478 | 3490 |
| Registration Authority | Geographical Area | | Financier Name | | | Branch | Agreement Type | | Public / Private | |
| AP39 PARVATHIPURAM | INDIA | | HINDUJA LEYLAND FINANCE LTD | | | SRIKAKULAM | Hypothecation | | Public | |
| Amount in words: Eighteen thousand three hundred fifty-nine rupees only | | | | | | | | | | |
| Persons or classes of persons entitled to drive:- | | | | | | | | | | |
| Any person including insured : | | | | | | | | | | |
| Provided that a person driving hold 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 when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989. | | | | | | | | | | |
| Note:- The policy does not cover liability for death, bodily injury or damage as excluded in section 150 (2) (ii) and (iii); (b) and (c) of the Motor Vehicles Act, 1988. | | | | | | | | | | |
| Limitations as to use | | | | | | | | | | |
| The policy covers use only under a permit within the meaning of Motor Vehicles Act, 1988 or such a carriage falling under Subsection 3 of Section 66 of the Motor Vehicles Act, 1988. | | | | | | | | | | |
| The policy does not cover use for: | | | | | | | | | | |
| a) Organized Racing | | | | | | | | | | |
| b) Pace Making | | | | | | | | | | |
| c) Reliability Trials | | | | | | | | | | |
| d) Speed Testing | | | | | | | | | | |
| Limits of Liability | | | | | | | | | | |
| Under Section II-I (i) Death or bodily injury in respect of any one accident; As per Motor Vehicles Act 1988 | | | | | | | | | | |
| Under Section II-I (ii) Damage to third party property in respect of any one claim or series of claims arising out of one event: ₹ 750000 /- | | | | | | | | | | |
| Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto 7,21,23,28 | | | | | | | | | | |
| 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. | | | | | | | | | | |
| Date of Issue: 02/04/2025 | | | | | | | | | | |
| Premium: | | | | | | 18,359.00 | | | | |
| CGST-Others(9%): | | | | | | 208.00 | | | | |
| SGST-Others(9%): | | | | | | 208.00 | | | | |
| CGST-Basic TP(6%): | | | | | | 963.00 | | | | |
| SGST-Basic TP(6%): | | | | | | 963.00 | | | | |
| Stamp Duty: | | | | | | 1.00 | | | | |
| Total(Rounded Off): | | | | | | 20,701.00 | | | | |
| Receipt Number : | | | | | | 10115018425100571346 | | | | |
| Receipt Date: | | | | | | 02/04/2025 | | | | |
| DebitNote Number: | | | | | | | | | | |
| Document Date: | | | | | | | | | | |
| Agency/Broker Code: | | | | | | BRC0000794 | | | | |
| VIZZA INSURANCE BROKING SERVICES PVT. LTD. | | | | | | | | | | |
| Direct Business: | | | | | | | | | | |
| Development Officer Code: | | | | | | | | | | |

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

Duly Constituted Attorney



GCV PUBLIC CARRIER OTHER THAN 3 WHEELER-PACKAGE POLICY
UIN. IRDAN545RP0048V01199900
SCHEDULE

| | | | |
|---------------------|-----------------------------|--------------------------------|----------------------------------|
| Policy No. | 1501843125P100225886 | Previous Policy No. | VC813895 |
| Insured Details | Customer Id | 23410272498 | |
| | Name | MR VIRODHI SUNEEL | |
| | Tel (O): *****5039 | Tel (R) | Fax: |
| | Email: *****@gmail.com | Mobile: *****5039 | |
| | Business / Occupation | None | |
| Period of Insurance | From | 00:00 Hrs of 03/04/2025 | To Midnight of 02/04/2026 |
| Co-Insurance | Type | | |

Particulars of Vehicle Insured

| Registration No. | | Obsolete Vehicle | Engine No. | Chassis No. | Make/Model | Year of Mfg |
|----------------------------|------------------|------------------|-------------------|-------------------|---------------------------------|-------------|
| Vehicle | Trailer (if any) | | | | | |
| AP - 39 - UC - 6608 | | No | LNH016994P | MB1AB42E2NRLV6041 | ASHOK LEYLAND / BDI4TADD | 2022 |
| Type of Body | | | HP/Cubic Capacity | GVW | Public/Private | |
| FSD | | | 1478 | 3490 | Public | |

Insured's Declared Value

| For Vehicle ₹ | For Trailer ₹ | Non Electrical Accessories ₹ | Electrical/Electronic Accessories ₹ | CNG Unit ₹ | LPG Unit ₹ | Total Value ₹ |
|------------------------|------------------|---------------------------------|--|---------------|---------------|------------------|
| 750000 | 0 | 0 | 0 | 0 | 0 | 750000 |
| Registration Authority | | Auto Association Membership No. | Geographical Area | Extension | | |
| AP39 PARVATHIPURAM | | | INDIA | | | |

Amount in words: Twenty thousand seven hundred one rupees only

Persons or classes of persons entitled to drive:-

Any person including insured :

Provided that a person driving hold 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 when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Limitations as to use

The policy covers use only under a permit within the meaning of Motor Vehicles Act, 1988 or such a carriage falling under Subsection 3 of Section 66 of the Motor Vehicles Act, 1988.

The policy does not cover use for:

- Organized Racing
- Pace Making
- Reliability Trials
- Speed Testing

Limits of Liability As narrated in the Certificate of Insurance attached herewith.**EXCLUSIONS :**

- Any accidental loss or damage or Liability / caused or sustained or incurred outside the geographical area.
- Any claim arising out of any contractual liability.
- Any accidental loss or damage to any property whatsoever or any loss or any expense whatsoever resulting or arising there from or any consequential loss.
- Any liability of whatsoever nature directly or indirectly caused by or constituted to or by or arising out of ionizing radiations or contamination by radioactivity from any nuclear fuel. For the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission.
- Any accidental loss or damage or liability directly or indirectly caused by or contributed to, by or arising from nuclear weapons material.
- Any accidental loss, damage or liability directly or indirectly or proximately or remotely occasioned by contributed to, by or traceable to or arising out of or in connection with war, invasion, 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 consequence of any of the said occurrences or any consequence thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.

Personal Accident covers for Owner-Driver CSI: ₹ 1500000**This policy is subject to terms and conditions and IMT Endorsement Nos. printed herein / attached hereto 7,21,23,28**

| Imposed Excess | | Financier Name | Branch | Agreement Type |
|-------------------|-----|-----------------------------|------------|----------------|
| Voluntary Excess | 0 | HINDUJA LEYLAND FINANCE LTD | SRIKAKULAM | Hypothecation |
| Compulsory Excess | 500 | | | |

| SCHEDULE OF PREMIUM (IN ₹) | | | |
|---|------------|--------------------------------|-------------|
| OWN DAMAGE | | LIABILITY | |
| Basic premium on Vehicle and Accessories | | B. Basic - TP | ₹ 16,049.00 |
| A. Basic - OD | ₹ 2,589.00 | Total | ₹ 16,049.00 |
| Total | ₹ 2,589.00 | Add : | |
| Add : | | Compulsory PA for Owner Driver | ₹ 275.00 |
| Cover for lamps, tyres, tubes etc | ₹ 388.35 | LL to Paid Driver IMT 28 | ₹ 100.00 |
| Sub Total (Additions) | ₹ 388.35 | Sub Total (Additions) | ₹ 375.00 |
| Less : | | Gross TP(B) | ₹ 16,424.00 |
| No Claim Bonus 35% | ₹ 1,042.07 | Gross OD & TP: | |
| Sub Total (Deductions) | ₹ 1,042.07 | (A) + (B) | ₹ 18,359.00 |
| Gross OD(A) | ₹ 1,935.00 | | |

TERMS AND 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 UIIC website : www.uiic.co.in
DISCLAIMER : The Policy stands cancelled or void in the event of Cheque Dishonor. The Company may cancel the policy by sending 7 days notice in case of any fraud or misrepresentation, non-disclosure 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 Vehicles 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 the event of accident, the Insured should inform United India Insurance Co. immediately to arrange spot survey.

| | | | | | |
|----------------------|-------------|--------------------|----------------------|---|------------|
| Premium: | ₹ 18,359.00 | Receipt Number : | 10115018425100571346 | Agency/Broker Code: VIZZA INSURANCE BROKING SERVICES PVT. LTD. | BRC0000794 |
| CGST-Others(9%): | ₹ 208.00 | Receipt Date : | 02/04/2025 | Direct Business: | |
| SGST-Others(9%): | ₹ 208.00 | | | | |
| CGST-Basic TP(6%): | ₹ 963.00 | | | | |
| SGST-Basic TP(6%): | ₹ 963.00 | | | | |
| Stamp Duty: | ₹ 1.00 | DebitNote Number : | | Development Officer Code: | |
| Total (Rounded Off): | ₹ 20,701.00 | Document Date : | | | |

| | | | |
|--|--------|--------------------------------|-----------------------------|
| Customer GST/UIN No.: | | Office GST No.: | 37AAACU5552C1ZI |
| SAC Code: | 997134 | Invoice No. & Date: | 3125I100225886 & 02/04/2025 |
| Amount Subject to Reverse Charges-NIL | | | |

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

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 of Proposal and Declaration:02/04/2025

IN WITNESS WHEREOF, this policy has been signed at MO PENDURTHI 150184 on this 02nd day of April 2025

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

Affix Policy
Stamp here.

Duly Constituted Attorney:

Underwritten By - APP48183 (MO INCHARGE)

Warranty:Warranted that at no time the Gross Laden Weight of the Vehicle exceeds the Gross Vehicle Weight mentioned in the schedule of the policy.

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