

Product Code: 3008 UIN: IRDAN115P0015V01200203

Ref. No. W104372482
Date: Jul 22, 2021
VENKATA NAIDU PUDI
KOTAVANIVALASA VILLAGE, PARVATHIPURAM
VIZIANAGARAM
ANDHRA PRADESH 535501
Mobile No: 7075755513

Sub: Risk Assumption Letter

Dear Sir/Madam,

Thank you for choosing ICICI Lombard General Insurance Company Limited (ICICI Lombard) as your preferred service provider.

Please find enclosed Policy No. 3008/224012675/00/000, which has been issued based on the below mentioned details:

Insured & Vehicle Details					
Name of Insured	VENKATA NAIDU PUDI				
Period of Insurance	Jul 24, 2021 to Jul 23, 2022				
Vehicle Make / Model	HMT / HMT 3522				
RTO City	ANDHRA PRADESH-VIZIANAGARAM				
Vehicle Registration No.	AP35U3580				
Vehicle Registration Date	Jun 30, 2006				
Engine No.	53498				
Chassis No.	07707				
Current Year NCB(%)	20%				
Previous Policy Details					
Previous Policy No.	3008/202464643/00/B00				
Previous Policy Period	24-07-2020 to 23-07-2021				
Previous Year NCB(%)	0%				
Previous Insurer Name	ICICI LOMBARD				
Previous Policy Type	Comprehensive Package				

The information provided above is based on the information received from you and accordingly, the policy has been processed. Coverage of risk is subject to realisation of the full premium, post which, insurance coverage under the policy would commence. In case the premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness certificate, as applicable.

Government of India has mandated electronic toll payments using FASTag to reduce vehicular traffic at toll plazas. Customers are advised to comply with the direction of the government and get their FASTag from Point of Sale locations at Toll Plazas or from Issuer Agency. Please visit http://www.fastag.org/ for details.

If you require any changes in the Certificate of Insurance cum Policy Schedule, you are requested to inform us by writing to customersupport@icicilombard.com or calling our 24 hour toll free helpline on 1800 2666. Absence of any communication within a period of 15 days of the date mentioned on this letter, would mean that the issued policy is in order and as per your proposal.

The information provided is merely illustrative and shall not be construed to be an evidence of existence of a contract of insurance. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered null and void without the same.

Jul 22, 2021

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

Miscellaneous Vehicles Package Policy

Product Code: 3008 UIN: IRDAN115P0015V01200203



Insured Name **VENKATA NAIDU PUDI**

KOTAVANIVALASA VILLAGE, PARVATHIPURAM. Address

VIZIANAGARAM, ANDHRA PRADESH 535501

Mobile No: 7075755513 Telephone No

SOFTPRO.PPM@GMAIL.COM **Email Address**

Named Passenger's Nominee: **Nominee Name** Relationship

Aae

GSTIN Number (Customer) Servicing Branch Name Vishakaptnam

3008/224012675/00/000 Policy No

Jul 24, 2021 00:00 to Period of Insurance

Midnight of Jul 23, 2022

E-Policy No

RTO Location

Policy Issued On Jul 22 2021

Covernote No 224012675 ANDHRA PRADESH-VIZIANAGARAM

Hypothecated To Category

Invoice Number 100721813165

Servicing Branch Address F6 Fourth The Landmark Sampath Vinayak Temple Road, Vishakaptnam Andhra Pradesh 530003

Registration No.	Make	Vehicle SubClass			Мо	del	Model Build	Type of Body	CC	Mfg Yr	Carrying Capacity
AP35U3580	НМТ	AND FOREST		AGRICULTURE S & NOT USED WARD			PARTIALLY BUILT	Open	2000	2006	1
Chassis No.	Engine No.	Trailer	Body IDV	Chassis IDV	Trailer		I / Electronic	ctronic Non Electrical		CNG / LPG	Total IDV
		Chassis No.	(₹)	(₹)	(₹)	Acces	ssories (₹)	Accesso	ories (₹)	Unit (₹)	(₹)
O7707	53498	AP35U3581	0	200000	30000		0	()	0	230000

Premium Details						
OWN DAMAGE(A)	(₹)	LIABILITY(B)	(₹)			
Basic OD Premium	750	Basic Third Party Liability	6847			
Trailer OD Premium	113	Trailor TP Premium	2341			
Sub Total	863	Total	9188			
Less:		Add:				
No Claim Bonus 20%	173	173 PA Cover for Owner Driver				
Sub-Total Deductions 173		Legal Liability to Paid Driver	50			
		Sub-Total	425			
Total Own Damage Premium(A)	690	Total Liability Premium(B)	9613			
	Total Package Premium(A+B):	10303				
	8					
		CGST	927.27			
	96					
SGST ₹			927.27			
	Total Tax Payable in ₹	1855				
Total Premium Payable In ₹			12158			

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Compulsory Deductible: ₹ 0.5% of IDV of the vehicle subject to a minimum of Rs. 2000/-	Voluntary Deductible: ₹ 0
Geographical Area: India	Applicable IMT Clauses: 48, 30

Premium Collection No.	1129073244	Premium Amount	₹ 12158	Receipt Date	22-07-2021
GSTIN Reg.No	37AAACI7904G1ZM	HSN/SAC code	997134 / GENERAL INSURANCE SERVICES		

Limits of Liability: (a) Under Section II-I(i) of the policy: Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988. (b) Under Section II-I(ii) of the policy: Damage to Third Party Property ₹ 750000/-; PA Cover for Owner-Driver under Section III: CSI ₹ 1500000/-. Limitations as to Use: The Policy covers use only under a permit within the meaning of the Motor Vehicles Act, 1988 or such a carriage falling under sub section (3) of Section 66 of the Motor Vehicles Act, 1988. The policy does not cover 1) Use for organised racing, pace making, reliability trails or speed testing. Driver's Clause: 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 requirements of Rule 3 of the Central Motor Vehicles Rules, 1989. 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".In consideration of the premium for this extension being calculated at a pro-rata proportion of the annual premium, it is hereby declared and agreed by the insured that upon expiry of this extension, this policy shall be renewed for a period of twelve months, failing which the difference between the extension premium now paid on pro rata basis and the premium at short period rate shall become payable by the insured.

For Legal interpretation, English version will hold good. Disclaimer: Please visit www.icicilombard.com for the policy wordings, for complete details on terms and conditions governing the coverage and NCB. This document is to be read with the policy wordings. The policy is valid subject to realization of cheque. We accept premium only via legally recognized modes. In case of dishonour of premium cheque, the company shall not be liable under the policy and the policy shall be void ab-initio. In case of any discrepancy with respect to the policy, please revert within 15 days from the policy start date. This policy is underwritten on the basis of the information provided by you and as detailed in the Risk Assumption Letter shared with you along with the policy. On renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change. Grievance Redressal: For resolution of any query or grievance you may contact us on our toll free no. 1800 2666, or visit any of our branch offices. You can also write to us at customersupport@icicilombard.com. For detailed grievance redressal mechanism please visit the "Grievance Redressal" section on our website www.icicilombard.com.

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 Chapter XI of M.V. Act, 1988. In witness whereof, this Policy has been signed at Mumbai on Jul 22, 2021 in lieu of Covernote no. 224012675. The stamp duty of ₹ 0.5 paid vide deface no. CSD5020211940 dated Jun 08, 2021.

Policy Issuing Office: ICICI Lombard General Insurance Company Limited, ICICI LOMBARD HOUSE, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai 400 025

Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.

In case of a claim, immediately notify ICICI Lombard General Insurance Company Limited on the Toll Free Number 1800 2666 / (Chargeable) 8655 222666 or SMS "CLAIM" to 575758

Mailing Address: ICICI Lombard General Insurance Company Limited Interface Building No. 16, 601 / 602, 6th Floor, New Link Road Malad (West), Mumbai - 400 064. Registered Office Address: ICICI Lombard General Insurance Company Limited, ICICI Lombard House, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai - 400 025.

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Miscellaneous Vehicles Package Policy

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Agency Code : 8104555

Agency Name SREERAMA MURTHY

PEMMARAJU

Agent's Contact No: 9059722001

Contact Person