

Date: 09/02/2021

To renew SMS, REN to 9222211100

Policy No.: V8139381

Mr. NAGIREDDY SPURTHI 0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM,

ANDHRA PRADESH, Pincode: 535521

Telephone(Mob): 8500932166

Email Id : SOFTPRO.PPM@GMAIL.COM Intermediary Name : KALPANA BADE-IAG

PTW

Dear Mr. NAGIREDDY SPURTHI

Welcome to the Future Generali Experience.

We thank you for choosing Motor Secure insurance policy. Your Policy No. is V8139381. Motor Secure policy offers your vehicle and yourself protection against any unforeseen vehicle accidents and loss to third party property or life arising there from as per the coverage mentioned in the attached policy terms and conditions. We request you to kindly go through the same to acquaint yourself with the available coverage.

Our initiatives will provide you with the highest standards of service, convenience and quality in motor insurance.

In the unfortunate circumstances of an accident, you may notify us for a claim by sending an SMS MOTORCLAIM to 9222211100 (Standard SMS charges applicable) or by calling us at 1800-220-233/ 1860-500-3333/ 022-67837800 or email us at fgcare@futuregenerali.in or walk into any of our nearest offices.

It will always be our endeavour to constantly better your experience by innovating and evolving our basket of conveniences. We strive to deliver service which is personalized and is totally transparent. It is our aim to be with you in your time of need.

The policy has been issued on the basis of the information provided by you. The extract of the information has been enclosed for your reference. We would request you to peruse the policy and satisfy yourself that it meets with your requirement fully.

Please note: Transfer of benefits under this insurance policy is not automatic on the sale of the vehicle. The transferee must apply within 14 days from the date of transfer of vehicle in writing to the insurance company with full details in a duly signed fresh proposal form along with evidence of sale and transfer fees of ₹.50/-+ Goods and Service tax.

We would like to assure you that the electronic copy of your policy is as authentic and valid as the physical copy and it can be used as a proof of insurance wherever required.

Once again, thank you for choosing to insure your vehicle with Future Generali and we look forward to being of service to you.

Assuring you of our best services at all times.

If undelivered, please return to: **Future Generali India Insurance Company Limited**4th Floor, Pydah Chambers
D No. 9-14-15, VIP Road
Siripuram
Visakhapatnam

For Future Generali India Insurance Co. Ltd.

(Authorised Signatory)

Please review the communication address, email or contact nos. noted on this letter for correctness. In case of any change please contact our nearest branch or call our care lines mentioned above. This will ensure you do not miss out on 'Service Updates' and 'Renewal Reminders'.

Now you can buy Health, Personal Accident, Travel, Home, Motor insurance & also renew your Future Generali Private Car Insurance policy online. Visit us at www.futuregenerali.in

For any service request please sms **SERVE** to 9222211100. To provide feedback on our service, kindly sms **HAPPY** or **UNHAPPY** to 9222211100. We will call you back.



Andhra Pradesh, 530003



Tax Invoice

	INSURED DETAILS				
Policy Number	: V8139381	Address of Service Provider: Off Code-41,Future Generali India Insurance Co Ltd, 4th Floor, Pydah Chambers, D No. 9-14-15,			
Invoice Number	: 202037PNT0056172	VIP Road, Siripuram, Visakhapatnam, Pradesh, Pincode - 530003			
Reverse Charge	: No	Area Code	: Vizag Branch Office		
Name of Insured/Proposer	: Mr. NAGIREDDY SPURTHI	FGI State Code	: 37		
Address	: 0-0, RAJALAKSHMI PURAM, RAJALAKSHM	FGI GSTIN Number	: 37AABCF0191R1Z8		
	PURAM, VIZIANAGARAM, ANDHRA PRADESH, Pincode- 535521	FGI PAN Number	: AABCF0191R		
Place of Supply(State Code): 37	Intermediary Name \ Cod	e: KALPANA BADE \ 60053906		
GSTIN / UIN Number	:-	Date of Issue / Invoice Date	: 09/02/2021		
Period of Insurance	: From 00:01 hours of 11/02/2021	HSN	: 997134		
	To Midnight of 10/02/2022	Nature of Service	: General Insurance Service		

Received with thanks from a sum of ₹887.00 towards Premium on the above mentioned policy.

PARTICULARS	TAX(%)	PREMIUM (₹)
Gross Premium		752.00
Add : CGST	9%	67.68
Add : SGST	9%	67.68
Add : Cess		-
Total (Rounded to nearest rupee)		887.00

NOTE:

- 1. In case of payment by cheque, in the event of dishonour of cheque for any reason whatsoever, insurance cover provided under this receipt automatically stands cancelled from the inception irrespective of whether a seperate communication is sent or not.
- 2. Excess amount, if any, will be adjusted against subsequent policies, or will be refunded on demand.

For FUTURE GENERALI INDIA INSURANCE CO. LTD.

(Authorised Signatory)

Note: This document is digitally signed by Sharada Ramakrishnan, Authorised Signatory of Future Generali India Insurance Company Limited on 09/02/2021







POS - Motor Secure Two Wheeler Insurance Policy

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE - Form 51 of the Central Motors Vehicles Rules, 1989

Policy Servicing: Off Code-41, Future Generali India Insurance Co Ltd, 4th Floor, Pydah Chambers, D No. 9-14-15, VIP Road,

Office Siripuram, Visakhapatnam, Andhra Pradesh, Pincode- 530003., Tel No: 0891-2792697

Policy No. : V8139381

Insured: Mr. NAGIREDDY SPURTHI

Address : 0-0, RAJALAKSHMI PURAM,

RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA

PRADESH, 535521

Period of Insurance

: From 00:01 hrs of 11/02/2021 To

Midnight of 10/02/2022.

Covernote No : - Dated: Zone: B

Intermediary Name/Code: KALPANA BADE / 60053906

Telephone(Mob,Hom) : 9550755039/0

Email ID : rajesh.bfa@gmail.com

Intermediary Pan card : BTGPB4081G

No

FGI GSTIN Number : 37AABCF0191R1Z8

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION					
Registration No.,	Make/Model of Vehicle	Engine No.	Chassis No.		
RTA Location					
AP35AB6959	SUZUKI GIXXER	BGA1119494	MB8NG4	4BALE8121510	
VIZIANAGARAM					
Year of Manufacture	Cubic Capacity	Type of Body	Seating	Premium	
			Capacity		
2014	150	BIKE	2	887.00	

DRIVERS 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.

LIMITATIONS AS TO USE - As per Motor Vehicle Rules, 1989 :- The Policy covers use of the vehicle for any purpose other than: a) Hire or Reward, b)Carriage of goods (other than samples or personal luggage), c) Organized racing, d) Pace making, e) Speed testing, f) Reliability Trials, g) Any purpose in connection with Motor Trade.

Geographical Area: INDIA

GSTIN Number: -

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 be good.

For full details on coverage, terms, conditions and exclusions, please refer the standard policy wordings attached with this schedule.

IMPORTANT - 1) All other Terms, Conditions and Exclusions as per attached Policy Wordings. 2) In case of payment by cheque, in the event of dishonor of cheque for any reason whatsoever, insurance cover provided under this document automatically stands cancelled from the inception irrespective of whether a seperate communication is sent or not.

Warranted that the *Vehicle insured herewith has a valid Pollution Under Control (PUC) Certificate as on the inception date of the policy.(*Not applicable for Electric Vehicles and New Non- Electric Vehicles).

LIMITS OF LIABILITY

Under Section II-I (i): Death of or bodily injury - Such amount	Under Section II-I (ii): Damage to Third Party Property-₹
as is necessary to meet the requirements of Motor Vehicles Act,	100000 /- in respect of any one claim or series of claims arising
1988	out of one event.
Under Section III : PA Owner – Driver as per premium	Compulsory DeductibleUnder Sec I - NA
computation table	

Hypothecation Agreement with:- NIL

SPECIAL CONDITIONS - NIL

ADDITIONAL EXCESS - NIL







Policy No: V8139381 Period Of Insurance: From 00:01 hrs of 11/02/2021 To Midnight of 10/02/2022				of 10/02/2022	
INSURED'S DECLARED VALUE					
For Vehicle -₹	For Non Elec Accessories - ₹	For Side Car-₹	For Elec Accessories-	For Bi-Fuel Kit (CNG/LPG) - ₹	Total Value-₹
-	-	-	-	-	

SCHEDULE OF PREMIUM				
PARTICULARS ₹	₹			
A-OWN DAMAGE				
Total Own Damage Premium (A) (rounded off)				
B-LIABILITY				
Basic Premium including Premium for TPPD 752.00				
Total Liability Premium (B)				
Total Annual Premium (A+B)				
Total Premium for the Policy Period				
Goods and Service Tax				
Total Premium (rounded off)				

Class of Vehicle: Two Wheelers Subject to Endorsement Nos.

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.

For FUTURE GENERALI INDIA INSURANCE CO. LTD.

Receipt No:

Date of Issue : 09/02/2021 Place of Issuance : Mumbai*

*Address as mentioned below (Authorized Signatory)

Note: This document is digitally signed by Sharada Ramakrishnan, Authorised Signatory of Future Generali India Insurance Company Limited on 09/02/2021

For registration of your Motor Claims SMS MOTORCLAIM to 9222211100 (Standard SMS charges applicable)

The stamp duty of Rs. 0.25/- paid by Letter Of Authorisation No. CSD/227/2021/301/21, Dated 25/01/2021. Mudrank - 2017/C.R.97/M-1,dated 09/01/2018.

Product UIN : 1/RD/FGIICL/MOTORS/FS/07-

Infectious Disease / COVID-19 Exclusion

Notwithstanding any provision to the contrary, this Reinsurance / Insurance excludes any loss, damage, liability, expense, fines, penalties or any other amount directly or indirectly caused by, in connection with, or in any way involving or arising out of any of the following –including any fear or threat thereof, whether actual or perceived – :

- ♦ Any infectious disease, virus, bacterium or other microorganism (whether asymptomatic or not); or
- ♦ Coronavirus (COVID-19) including any mutation or variation thereof; or
- Pandemic or epidemic, as declared as such by the World Health Organization or any governmental authority.





Dear NAGIREDDY SPURTHI,

We wish to inform you that the Insurance policy number V8139381 has been issued on the basis of the information and declaration given by you, the transcript whereof is mentioned below. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back within a period of 15 days from date of your receipt of this transcript or the policy start date whichever is earlier, failing which it will be deemed that you are satisfied with the correctness of the details mentioned below. Please be informed that this Policy shall be construed to be void ab initio/invalid in the event we find that you have not disclosed material or correct information required for the purpose of providing the below insurance cover and in case of any claim arising under the policy in such a scenario, we shall be under no obligation whatsoever to settle such claim to you and the premium paid by you under this policy shall stand fully forfeited.

2 3 4 5	Insured Name Registration address of the Insured Communication address of the Insured Residence Telephone no Mobile no Email id	NAGIREDDY SPURTHI 0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA PRADESH, 535521 0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA PRADESH, Pincode :- 535521 8500932166 8500932166		
1 2 3 4 5	Insured Name Registration address of the Insured Communication address of the Insured Residence Telephone no Mobile no Email id	NAGIREDDY SPURTHI 0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA PRADESH, 535521 0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA PRADESH, Pincode: - 535521 8500932166 8500932166		
2 3 4 5	Registration address of the Insured Communication address of the Insured Residence Telephone no Mobile no Email id	0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA PRADESH, 535521 0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA PRADESH, Pincode :- 535521 8500932166 8500932166		
4 5	Residence Telephone no Mobile no Email id	0-0, RAJALAKSHMI PURAM, RAJALAKSHMI PURAM, VIZIANAGARAM, ANDHRA PRADESH, Pincode :- 535521 8500932166 8500932166		
5	Mobile no Email id	8500932166		
	Email id			
_		COPERD O DELCOMAN COM		
6	Policy	SOFTPRO.PPM@GMAIL.COM		
	Toney	Details		
7	Policy Number	V8139381		
8	Risk start time and date	11/02/2021/00:01		
9	Risk end date	10/02/2022		
10	Renewal NCB %	0%		
	Vehicle	Details		
11	Make and Model of vehicle insured	SUZUKI GIXXER		
12	Registration No	AP35AB6959		
13	Engine No	BGA1119494		
14	Chassis No	MB8NG4BALE8121510		
15	Cubic Capacity	150		
16	Year of Manufacturing	2014		
17	RTO where vehicle is/will be registered	VIZIANAGARAM		
18	Seating Capacity	2		
	Date of Registration / Purchase	21/02/2015		
20	Usage of the vehicle	TW		
21	Fuel Type	Petrol		
22	Hypothecation/Lease/Hire Purchase			
	Bank Name			
	Vehicle * being insured has valid Pollution Under Control (PUC) Certificate as on inception date of policy.(*Not applicable for New Vehicle)	Yes		
	Previous Insu	irance Details		
25	Previous Insurer Name			
26	Expiring Policy No			
27	Expiring Policy Expiry Date			
28	No Claim Bonus % under expiring policy	0.00 %		
	Is there any claim in expiring policy	-		
IDV Details				
20	Vehicle IDV on Renewal	₹		
31	Electrical Accessories IDV	₹.0		
32	Non Electrical Accessories IDV	₹.0		
33	CNG IDV	₹.0		
34	Add on Plan			
Third Party Coverages Opted				
35 Basic Premium including Premium for TPPD Opted				



36	Add:-Trailers	Not Opted		
37	Less: Limit of Liability under sec II-1(ii)-₹. 6000	Not Opted		
38	Add: Bi-Fuel Kit (CNG/LPG)	Not Opted		
39	Add: Geographical Area Extn	Not Opted		
40	Add : Compulsory PA to Owner-Driver ₹. lacs	Not Opted		
41	Add: PA to persons other than Owner/Driver (No. of	Not Opted		
	persons 0)PA Limit ₹.0 per person.			
42	Add: PA to Drivers/Cleaner/Conductors (No. of	Not Opted		
	persons 0) PA Limit ₹ 0 per person.			
43	*	Not Opted		
	Annexure attached			
44	Add: Legal Liability to Paid	Not Opted		
	Driver/Cleaner/Employees (No. of persons 0)			
45		Not Opted		
46	Add: Increased Limit of Liability under sec II-1(ii)-₹.	Not Opted		
	7.5lacs			
47	Own Damage Co	,		
47	Basic Premium on Vehicle	Not Opted		
48	Add: Non-Electrical Accessories	Not Opted		
49	Add: Electrical/Electronic Accessories	Not Opted		
50	Add: Bi-Fuel Kit (CNG/LPG) Add: Trailers	Not Opted		
51		Not Opted		
52	Add: Geographical Area Extn	Not Opted		
53	Add: Embassy Loading	Not Opted		
54	Add: Fibre Glass Tanks	Not Opted		
55 56	Add: Driving Tutions	Not Opted		
57	Add : Rallies Less : Anti Theft	Not Opted Not Opted		
58	Less: Vehicles Specially Designed/Modified For	Not Opted		
36	Handicapped Persons	Not Opted		
59	Less: Use confined to own premises	Not Opted		
60	Less: Automobile Association Membership	Not Opted		
61	Less: Vintage Car	Not Opted		
62	Less: Voluntary Deductible-₹. 0	Not Opted		
63	-	Not Opted		
Nominee Details				
64	Nominee Name	-		
65	Nominee Relationship with Insured	-		
66	Nominee Age in Y or M			
67	Nominee %	-		
68	Appointee Name	-		
69	Relationship of Appointee with Nominee	-		
On examination of the Policy if you notice any mistake places return the Policy to the Company immediately for correction				

On examination of the Policy, if you notice any mistake, please return the Policy to the Company immediately for correction. Any modification(s) in the policy resulting in additional premium, will be applicable from the inception of the policy and this has to be paid by you immediately to keep the policy coverage intact.

In case of Disagreement or objection or any changes with respect to information and contents mentioned hereinabove, please contact our Help Line numbers & register your objections/changes/disagreement to the contents of this transcript or you may also send us email or written correspondence at the below address within a period of 15 days from date of receipt of this transcript or the policy start date whichever is earlier.





ENDORSEMENTS



(Attached to and forming part of policy)

