

Date: 12/03/2021

To renew SMS, REN to 9222211100

Policy No.: V8295031

Mr. ANANDA BATLU M LABAM, BURJA, SRIKAKULAM, SRIKAKULAM,

**ANDHRA PRADESH, Pincode: 532445**Intermediary Name: KALPANA BADE-IAG

PTW

Dear Mr. ANANDA BATLU M

Welcome to the Future Generali Experience.

We thank you for choosing Motor Secure insurance policy. Your Policy No. is **V8295031.** 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
Andhra Pradesh, 530003

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 <a href="https://www.futuregenerali.in">www.futuregenerali.in</a>

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.





# Tax Invoice

INSURED DETAILS					
Policy Number	: V8295031	Address of Service Provider: Off Code-41,Future Generali India Insurance Co Ltd, 4th Floor, Pydah Chambers, D No. 9-14-15, VIP Road, Siripuram, Visakhapatnam, Andhra Pradesh, Pincode - 530003			
Invoice Number	: 202037PNT0063398				
Reverse Charge	: No	Area Code	: Vizag Branch Office		
Name of Insured/Proposer	: Mr. ANANDA BATLU M	FGI State Code	: 37		
Address	: LABAM, BURJA, SRIKAKULAM, SRIKAKULAM, ANDHRA PRADESH, Pincode 532445	FGI GSTIN Number FGI PAN Number	: 37AABCF0191R1Z8 : AABCF0191R		
Place of Supply(State Code	<b>):</b> 37	Intermediary Name \ Code: KALPANA BADE \ 60053906			
GSTIN / UIN Number	:-	Date of Issue / Invoice Date	: 12/03/2021		
Period of Insurance	: From 00:01 hours of 14/03/2021	HSN	: 997134		
	To Midnight of 13/03/2022	Nature of Service	: General Insurance Service		

Received with thanks from a sum of ₹ 958.00 towards Premium on the above mentioned policy.

PARTICULARS	TAX(%)	PREMIUM (₹)
Gross Premium		812.00
Add : CGST	9%	73.08
Add : SGST	9%	73.08
Add : Cess		-
Total (Rounded to nearest rupee)		958.00

#### 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 12/03/2021







# **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. : V8295031

Insured : Mr. ANANDA BATLU M

Address : LABAM, BURJA, SRIKAKULAM, Covernote No

SRIKAKULAM, ANDHRA

PRADESH, 532445

Period of Insurance : From 00:01 hrs of 14/03/2021 To

Midnight of 13/03/2022.

: BTGPB4081G

: - Dated: Zone: B

**Intermediary Name/Code**: KALPANA BADE / 60053906

Telephone(Mob,Hom) : 9550755039/0

Email ID : rajesh.bfa@gmail.com

**Intermediary Pan card** No

FGI GSTIN Number GSTIN Number: -: 37AABCF0191R1Z8

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION				
Registration No.,	Make/Model of Vehicle	Engine No.	Chassis No.	
RTA Location				
AP30F3767	TVS XL SUPER HD	OD1N61857493	MD621E	BD1761N37092
SRIKAKULAM				
Year of Manufacture	of Manufacture Cubic Capacity Type of Body Seating		Seating	Premium
			Capacity	
2006	70	BIKE	2	958.00

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

#### 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

The nominee for Compulsory PA to owner driver cover is 01) LEGAL HEIR, aged :21 Years, Relationship: Legal Executor, Nomination %: 100%







<b>Policy No:</b> V8295031 <b>Period Of Insurance:</b> From 00:01 hrs of 14/03/2021 To Midnight of 13/03/2022			of 13/03/2022		
INSURED'S DECLARED VALUE					
For Vehicle -₹	For Non Elec	For Side Car-₹	For Elec Accessories-	For Bi-Fuel Kit	Total Value-₹
	Accessories - ₹		₹	(CNG/LPG) - ₹	
-	-	-	-	-	

SCHEDULE OF PREMIUM			
PARTICULARS ₹	₹		
A-OWN DAMAGE			
Total Own Damage Premium (A) (rounded off)			
B-LIABILITY			
Basic Premium including Premium for TPPD 482.00			
Add: Compulsory PA to Owner-Driver Rs. 15 lacs 330.00			
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. 15,

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 : 12/03/2021 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 12/03/2021

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 ANANDA BATLU M,

We wish to inform you that the Insurance policy number V8295031 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.

to settle such claim to you and the premium paid by you under this policy shall stand fully forfeited.					
	POS - Motor Secure Two Wheeler Insurance Policy - TRANSCRIPT/DECLARATION				
Sr No	In	sured Details			
1	Insured Name	ANANDA BATLU M			
2	Registration address of the Insured	LABAM, BURJA, SRIKAKULAM, SRIKAKULAM,			
		ANDHRA PRADESH, 532445			
3	Communication address of the Insured	LABAM, BURJA, SRIKAKULAM, SRIKAKULAM,			
		ANDHRA PRADESH, Pincode :- 532445			
4	Residence Telephone no				
5	Mobile no				
6	Email id				
	Policy				
7	Policy Number	V8295031			
8	Risk start time and date	14/03/2021/00:01			
9	Risk end date	13/03/2022			
10	Renewal NCB %	0%			
		Details			
11	Make and Model of vehicle insured	TVS XL SUPER HD			
12	Registration No	AP30F3767			
13	Engine No	OD1N61857493			
14	Chassis No	MD621BD1761N37092			
15	Cubic Capacity	70			
16	Year of Manufacturing	2006			
17	RTO where vehicle is/will be registered	SRIKAKULAM			
18	Seating Capacity	2			
19	Date of Registration / Purchase	30/12/2006			
20	Usage of the vehicle	TW			
21	Fuel Type	Petrol			
22	Hypothecation/Lease/Hire Purchase				
23	Bank Name				
24	Vehicle * being insured has valid Pollution Under	Yes			
	Control (PUC) Certificate as on inception date of				
	policy.(*Not applicable for New Vehicle)				
	Previous Insu	rrance Details			
25	Previous Insurer Name				
26	Expiring Policy No				
27	Expiring Policy Expiry Date	0.00.07			
28	No Claim Bonus % under expiring policy	0.00 %			
29	Is there any claim in expiring policy	-			
	IDV Details				
30	Vehicle IDV on Renewal	₹			
31	Electrical Accessories IDV	₹.0			
32	Non Electrical Accessories IDV	₹.0			
33	CNG IDV	₹.0			
34	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 ₹. 15 lacs	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	
4.5	Driver/Cleaner/Employees (No. of persons 0)	N . 0 . 1	
45		Not Opted	
46	Add: Increased Limit of Liability under sec II-1(ii)-₹.	Not Opted	
	7.5lacs	0.41	
47	Own Damage Co	, <u> </u>	
47	Basic Premium on Vehicle Add: Non-Electrical Accessories	Not Opted	
48	Add: Non-Electrical Accessories  Add: Electrical/Electronic Accessories	Not Opted	
50	Add: Bi-Fuel Kit (CNG/LPG)	Not Opted Not Opted	
51	Add: Trailers	Not Opted	
52	Add: Geographical Area Extn	Not Opted	
53	Add: Geographical Area Extil  Add: Embassy Loading	Not Opted	
54	Add: Fibre Glass Tanks	Not Opted	
55	Add: Driving Tutions	Not Opted	
56	Add: Rallies	Not Opted	
57	Less : Anti Theft	Not Opted	
58	Less: Vehicles Specially Designed/Modified For	Not Opted	
	Handicapped Persons	The option	
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	Add : Add-on Premium	Not Opted	
	Nominee	Details	
64	Nominee Name	LEGAL HEIR	
65	Nominee Relationship with Insured	Legal Executor	
66	Nominee Age in Y or M	21Y	
67	Nominee %	100	
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)

# IMT.15. PERSONAL ACCIDENT COVER TO THE INSURED OR ANY NAMED PERSON OTHER THAN PAID DRIVER OR CLEANER

(Applicable to private cars Including three wheelers rated as private cars and motorized two wheelers with or without side car [not for hire or reward])

In consideration of the payment of an additional premium It rs hereby agreed and understood that the Company undertakes to pay compensation on the scale provided below for bodily Injury as hereinafter defined sustained by the insured person in direct connection with the vehicle insured or whilst mounting and dismounting from or traveling in vehicle Insured and caused by violent accidental external and visible means which independently of any other cause shall within six calendar months of the occurrence of such Injury result In:-

curerian months of the occurrence of such my	ary resure iii.
Details of Injury	Scale of Compensation
i) Death	100%
ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
iii) Loss of one limb or sight of one eye	50%
iv) Permanent Total Disablement from injuries other than named above	100%

#### Provided always that :-

- (1) compensationshall be payable under only one of the items (i) to (iv) above In respect of any such person arising out of any one occurrence and total liability of the insurer shall not in the aggregate exceed the sum of Rs......\*during any one period of insurance in respect of any such person.
- (2) no compensation shall be payable in respect of death or Injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) Intentional self Injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person Is under the influence of Intoxicating liquor or drugs.
- (3) Such compensation shall be payable only with the approval of the insured named in the policy and directly to the injured person or his/her legal representative(s) whose receipt shall be a full discharge In respect of the Injury of such person.

Subject otherwise to the terms exceptions conditions and limitations of this policy. \*The capital Sum Insured (CSI) per passenger is to be inserted.

