दि ओरिएण्टल इंश्योरॅस कम्पनी लिमिटेड

THE ORIENTAL INSURANCE-OCK

NAGRIKSURAKSHA INDIVIDU

LICY SCHEDULE

Pelicy No.

171100/48/2020/1851

Prev. Policy No.

Cover Note Dt

Cover Note No. Insured's Circle

95555893

Issue Office Code : 171100

basined's Name

DINESH KUMAR TIWARI (GSTIN: 0)

lesue Office Name: DO 1 VADODARA (GSTIN.

24AAACT0827R2Z4)

Address

D 26 SANTOSHI NAGAR SOC NR.

MAHESHANA NAGAR NIZARPURA VADODARA

Address

1 1ST FLOOR, A.G. CHAMBERS,

UNIVERSITY ROAD, FATEHGUNJ,

VADODARA

BARODA 390001

GUJARAT 390002

Tel /Fax /Email

: 1/0/NA Tel Fax/Email

0265-2794854, 2791023, 2791022,

2792136 / 0265-2796381 / 171100@orientalinsurance.co.in

AgentiBroker Details

Dev.Off.Code

: NZ0000000639

Agent/Broker

: BAD000057218 MASKE NILESH BALASAHEB

Address

D/11, TULJA NAGAR SOC.Nr.NATHDWAR TOWN SHIP, DABHOI

ROAD BARODA BARODA, GUJARAT, 390001

Tel /Fax /Email

2794854/9825419322/2793681/NA

Penad of Insurance :

FROM 12:34 ON 10/06/2019 TO MIDNIGHT OF 09/06/2020

Collection No & Dt

CSH 3211003579 - 10/06/2019

GST INVOICE NO 241810131737

UIN:0 Total:

Gross Premium

GST

Starro Duty

For and on behalf of

The Oriental Insurance Company Limited

ATUL JERATH General Manager

Coincurance Details : Nt.

Particulars of the Persons Covered

Sr. No.	Name of Person Covered	Age	Relationship	Occupation	Dissoled/Injur ed/Sick	Sum Insured		Cumulative
						Personal Accident	Hospitalistion Section 20%	bonus
1	PRIYANSH D TIWARI		9 Dependant Child	OTHERS	N.	80,000	20,000	

Assignce Details

Sr. No. Name

Assignee Name

Share %

Relationship

1 PRIYANSH D TIWARI

NITA D TIWARI

100

Mother

Total Sum insured in

Place:

Date :

10/06/2019

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.

in case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

Page 1 of 2

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee

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