



10000089240900425129 -

TAMIL NADU

# POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle PackagePolicy

UIN Number - IRDAN190RP0044V01100001

# Policy Number: 73070131240100003441

POLICY ISSUING OFFICE: KOVILPATTI.B.O. (730701), 913,CATHOLIC CENTRE, MAIN ROAD, KOVILPATTI TAMIL NADU , 628501 PHONE NUMBER:04632220386 / 04632220326 / 9159097999 FAX NUMBER:NA / NA Email:nia.730701@newindia.co.in

BUSINESS CHANNEL/CPSC User: NAME: Turtlemint Insurance Broking Services Private Limited - (BR00000175), PHONE NUMBER:18002660101 / LAND/FAX NUMBER:02261149800/ EMAIL:payment@turtlemint.com / po\_turtlemintinsurance@turtlemint.com

CLAIM CONTACT: Tirunelveli Non Suit Claim Hub (739005) ADDRESS: 84 A, Tirvandrum Road, Ist Floor Palayamkottai, Tirunelveli - 627002 , , , TAMIL NADU 627002. PHONE NUMBER: 04622573102 / 04622573107 MOBILE NUMBER: Email: ch739005@newindia.co.in

#### **INSURED DETAILS**

Insured's Name	N.V.B & CO	Customer ID	POA7855322 (PAN No :NA)
Insured's Address	NO-2/186 , AANCHANEYAR KOIL STREET,KALLADIKUPPAM VILLAGE,KIZMAMPATTU POST, GINGEE T K , VILLUPURAM, PERIA THATCHUR ,TAMIL NADU, 605651	Contact Number	/ / XXXXXX6452
		Email	pakkiripr@gmail.com
		GSTIN	33AARFN7244C1Z9

Receipt Number

Name of registration

authority:

13/09/2024 01:26:39 PM to 12/09/2025 11:59:59 PM

# POLICY DETAILS Period of cover

			13/09/24
Previous Insurer	Not available	Previous Policy Number	A
VEHICLE DETAILS			
Geographical Area / Zone:	India/A	Year of manufacture:	2023
Type of Commercial Vehicles:	D - Misc-Special Type	Sub Type:	ROAD ROLLERS
Name of the Financier:	HDFC BANK LIMITED	Chassis no./Engine no.:	WHB0H279HHAA00842/32 G95429439
Type of fuel:	Diesel	Cubic capacity (CC):	0
Type of body:	Closed	Gross Vehicle Weight (GVW):	11180
Make/Model:	WRITGEN VO/PAVER	Registration no.	TN-16-U-5681
Seating capacity including Driver:	1	Variant:	WRITGEN HC119I
Automobile Association		Colour:	PURE ORANGE

# **INSURED DECLARED VALUE (Rs)**

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value
4000000	0	0	0		4000000

# SCHEDULE OF PREMIUM

membership:

Note Issue Date:

Cover Note No/Cover

Own Damage		Liability	
(+)Loading for Inclusion of IMT 23 1141.56		Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000)	7267 275 0
		(+)LL to Non-fare Paying Passengers (Employee of Insurd but not Workmen under WCA)(1)	75

### THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



		(+)LL to paid driver conductor cleaner emplo oprn	yed for 50
Calculated OD Premium	8752	Calculated TP Premium	7667
Total OD Premium (Rs)	8752	Total TP Premium (Rs)	7667
Net Premium (Rs)			16,419
GST (Rs)			2,956
Total Payable (Rs)			19,375
Total Payable in Rs(in words)	RUPES NINETEEN THOUSA	ND THREE HUNDRED SEVENTY-FIVE ONLY	

GSTIN(Issuing Office)	33AAACN4165C4ZV
SAC	997134 (Motor vehicle insurance services)

Limitation 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 use FOR a) Organised racing b) Pace Making c) Reliability Trials d) Speed Testing

Limits of Liability:Limit of the amount the Company's Liability Under Section II 1(i) in respect of any one accident: as per the Motor Vehicles Act, 1988. Limit of the amount of the Company's Liability Under Section II 1(ii) in respect of any one claim or series of claims arising out of one event: Up to Rs. 7,50,000

For individual covers (OD) in RS:4000000	Compulsory excess in Rs:20000
Imposed excess in Rs:0	Voluntary excess in Rs:0

Persons or classes of persons entitled to drive: 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 requirement of Rule 3 of the Central Motor Vehicles Rules, 1989.

#### PA cover for Owner Driver

Name of Nominee	Age of Nominee			Relationship to the Nominee
NA	NA	NA	NA	NA

# PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
NA	NA	NA	NA

# Premium and GST Details

	Rate Of Tax	AMOUNT IN INR
Premium		Rs 16,419
SGST	9	1478
CGST	9	1478
IGST	0	0

Data of Tay

In witness where of this policy has been signed at KOVILPATTI.B.O. on this 13/09/2024
WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, conditions and exceptions applicable to Package/Liability policy attached/available on the web site http://newindia.co.in; IMT Endorsement Number(s) printed herewith attached 21,23,40,7

# 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 clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 1 lakh or a claim for refund of premium exceeding Rs 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 website.

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 XI of M.V. Act,

For and on behalf of The New India Assurance Company Limited

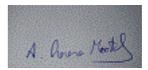
Amount in IND

### THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



1988.

Date of Issue: 13/09/2024



(Mr GANESAMOORTHY A) [BRANCH MANAGER]

Duly Constituted Attorney(s)

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.

Tax Invoice No: 73070124P0005208

**IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C**