

DEVELOPMENT HOUSE, 24 Park Street , Kolkata -700016

(www.magmahdi.com)

IRDA REG NO. 149 DATED 22nd MAY,2012

CIN: U66000WB2009PLC136327

In case of any query, assistance or claims, please contact us at 1800 266 3202

UIN: IRDAN149RP0002V01201920 STAND-ALONE OWN DAMAGE POLICY FOR TWO WHEELER

Date: 10/05/2024

Mr DARPANA RAMJI MANE D/O RAMJI MANE, MAHADA COLONY , VASHI NAKA CHEMBUR, BLDG NO 1 ROOM NO 318 SHREE GANE SH CO-OP SOCIETY,F C I MUMBAI MUMBAI MAHARASHTRA 400074 Mobile:8779634279



Agent/ Intermediary Name and Code:LANDMARK INSURANCE BROKERAGE PRIVATE LIMITED BRC0000455

Sub: Risk Assumption Letter

Dear Sir /Madam,

Thank you for choosing Magma-HDI General Insurance Company Limited as your preferred General Insurance Company. Please find enclosed Policy No. P0025400018/4115/100059, which has been issued based on the details furnished to us as below:

Insured & Vehicle Details					
Name of Insured	Mr DARPANA RAMJI MANE				
Period of Insurance	11/05/2024 TO 10/05/2025				
Vehicle Make/Model	BAJAJ / SPIRIT STANDARD				
RTO	MUMBAI				
Vehicle Registration No.	MH 01 UI 2050				
Vehicle Registration Date	23/11/2021				
Engine No.	DFG5D0FGDF12BG				
Chassis No.	DF12BV0DFB12DF0BD				
Winnovative PDF Tools Demo					
Previous Policy No	94514120120				
Previous Policy Period	11/05/2023 TO 10/05/2024				
Previous Year NCB%	20				
Previous Insurer Name	BHARTI AXA GENERAL INSURANCE COMPANY LIMITED				
Previous Policy Type	Standalone OD				

The information received from you is reproduced in the proposal attached with this Risk Assumption Letter and your proposal has been processed accordingly. 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.

If you require any changes in the certificate of insurance cum policy schedule, you are requested to inform us by either writing to us at customercare@magma-hdi.co.in or calling our toll free helpline on 1800 266 3202. Absence of any communication from you in this regard within a period of 20 days of date of this letter, would mean that the issued policy is in order and as per your proposal. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered as null and void without the same.

Dear Customer , Magma HDI general Insurance Company may be storing your AML/KYC details and might require you to update the information submitted from time-to-time, in accordance with and requirements under the Master Guidelines on Anti-Money Laundering/ Counter Financing of Terrorism (AML/CFT), 2022 issued by the Insurance Regulatory Development Authority of India.

Thanking You, Regards

For Magma HDI General Insurance Co Ltd. Mayork Tantin

Authorised Signatory







DEVELOPMENT HOUSE, 24 Park Street , Kolkata -700016 any query, assistance or claims, please contact us at 1800 266 3202 UIN: IRDAN149RP0002V01201920 In case of any STAND-ALONE OWN DAMAGE POLICY FOR TWO WHEELER

CERTIFICATE OF INSURANCE CUM SCHEDULE /TAX INVOICE										
Policy Servicing Office			EASTERN EXPRES	S HIGHWAY, SI	ON WADALA LINK ROAD,	, EVERARD NAGAR, SIG	ON EAST, ,MUME	AI -400022 ,MAHARASH	ITRA , PH: (22) 67284837
Policy No Insured Address Contact Number Email ID: GST Number	P0025400018/4115/100059 Mr DARPANA RAMJI MANE D/O RAMJI MANE NO 1 ROOM NO 318 SHREE GANE SH CO-OP SOCIETY,F C I MUMBAI MUMBAI MAHARASHTRA 400074 Mobile:8779634279 POLICYBOSSTESTING@GMAIL.COM Unregistered			Period Of Insurance Agent No.:	EVERARD NAGAR, SION EAST, ,MUMBAI -400022 ,MAHARASHTRA , PH: (22) 6728483 00:00 Hrs of 11/05/2024 To Midnight of 10/05/2025 BRC0000455					
		INS	SURED MOTOR V	EHICLE DETA	ILS AND PREMIUM CO	MPUTATION				
Registration Mark & No. & RTA Location	Year of Manufacture	Engine	No.	(Chassis No. Make/Model/Type of Body		e of Body	CUBIC CAPACITY	SEATING (CAPACITY
MH 01 UI 2050 / MUMBAI	2021	DFG5D0FGI	DF12BG	DF12E	F12BV0DFB12DF0BD BAJAJ SPIRIT STANDARD/SCOOTER 60		60	2		
					DECLARED VALUE)					
IDV of Vehicle ₹ 19600	Non Electri	cal Accessories ₹	Electrical/elect	ronic Accessori		Bi-Fuel kit(LPG/CNG) ₹ Other accessories ₹ 0 / 0 0		Total Va		
	OWN DAMAG	SE .		₹						
Basic OD				334.77					Е	SHARTI AXA
Sub Total	Total 334.77 Insurer Name					GENERAL INSURANCE				
Less:										COMPANY LIMITED
No claim bonus 25%			83.69	Policy (Liability Cover) S	(Liability Cover) Start Date 28/0				28/04/2024	
Sub-Total Deductions			83.69	Policy (Liability Cover) Expiry Date				27/04/2029		
Total Own Damage Premium			251.00	Policy Number 560451201				5120120120		
				Premium (Computation					
					Total Package Premi	um				251.00
	CGST @ 9%						22.59			
					SGST @ 9%					22.59
					TOTAL					296.00
LIMITATIONS AS TO USE - TH	e Policy covers use o	of the vehicle for any	v purpose other	than a) Hire o	r Reward b)Carriage o	f goods (other than	samples or pe	rsonal luggage) c)Orc	anized racin	g d)Pace
LIMITATIONS AS TO USE - 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)Use in connection with Motor Trade										
Driver Clause: 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.										
LIMITS OF LIABILITY										
Under Excess in respect of Section I Compulsory : Rs. 10										
Subject to I.M.T Endorsemen	t Nos. IMT 22	,	<u>/ IIIIO va</u>	itive P	Dr Tools	Demo				

Pollution Under Control(PUC)

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 at the time of issuance of policy.

Date of Signature of proposal 10/05/2024
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.

Premium Collection Details :- [Collection No - ReceiptDate - Amount] : P/400018/25/100002150- 10/05/2024, ₹ 296
Premium Amount in Word's (₹) :- Two Hundred Ninety-Six Only

case of Claims, please contact us at 1800 266 3202

Date of Issue: 10/05/2024 Place: Kolkata

Consolidated Stamp Duty on the issue of General Insurance Policies Paid vide G.O No. 1870 FT, dated 27.12.2018 GST Number of MHDI - 27AAGCM1685C1Z1 GST Invoice Number - POL270525000279 Accounting Code for Service - 997134, Motor vehicle insurance services

Place of Supply: MAHARASHTRA (27)

Whether Tax is payable on Reverse Charge - No UIN: IRDAN149RP0002V01201920

UIN: IRDAN149F0002V01201920
This is a valid Tax invoice in terms of Sub-rule 2 of Rule 54 of CGST Rule 2017. Further, being an Insurance Company, issuing of e-invoice and QR Code are not applicable on us in terms of Notification No 13 and 14 of 2020 dated 21st March 2020 issued from Central Board of Indirect Taxes and Customs. I/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.

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. Please note that any misrepresentation, non disclosure or withholding of material facts will lead to cancellation of policy ab initio with forfeiture of premium and non consideration of claim, if any.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 31st October of the next financial year. For Complete details of coverage, terms, conditions & exclusion please refer the standard policy wording attached with this schedule

IMPORTANT - 1) The Validity of this Certificate of Insurance cum Schedule is subject to realisation of the premium cheque.

2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.

3) This document is digitally signed, hence counter signature / stamp is not required.

4) For detailed terms & conditions please refer our website www.magmahdi.com

5) The coverage provided in this policy is only for Own Damage and no other liability in connection with the vehicle.

Authorised Signatory

For Magma HDI General Insurance Co. Ltd.

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We at MAGMA HDI prefer receiving premium amount through cheque No. TW./202405100001134 MAGMA HD Call Us: 1800 266 3202 General Insurance Company Ltd. (Information for fields marked with asterisk [*] is mandatory) Proposal Form for Stand-Alone Own Damage Policy for Two Wh Customer ID 20003875291 *Proposal For: Three Wheeler *Type of Vehicle : Two Wheeler Used Private Car *Vehicle Insured is: *Coverage Comprehensive Package Cover Third Party Liability only Cover Third Party, fire & theft only Cover Standalone OD Cover Third Party and Fire only Cover Third Party and Theft only Cover Required: Intermediary Code: BRC0000455 Intermediary Name: LANDMARK INSURANCE BROKERAGE PRIVATE LIMITED * Period of Insurance: 11/05/2024 Time: 00:00 ,To Midnight of 10/05/2025 (Note: Cover shall not commence earlier than the date and time of acceptance of risk and/or issuance of cover note and subsequent to payment of premium) 1. Name (Registered Owner of the Vehicle): Mr DARPANA RAMJI MANE PAN No: EUCPM9617R *DOB: ✓ M *Marital Status: 26/09/1999 *Gender: *Occupation: Others Sinale Saving Bank Name Branch Name Current Account No. MICR IESC 2. *Address where Vehicle Registered and Based D/O RAMJI MANE,MAHADA COLONY, VASHI NAKA CHEMBUR,BLDG, NO 1 ROOM NO 318 SHREE GANE SH CO-OP SOCIETY,F C I MUMBAI, MUMBAI, MAHARASHTRA 400074, 8779634279, POLICYBOSSTESTING@GMAIL.COM ,Mobile:8779634279 Unregistered 3. *Communication Address (For policy dispatch) D/O RAMJI MANE,MAHADA COLONY, VASHI NAKA CHEMBUR,BLDG, NO 1 ROOM NO 318 SHREE GANE SH CO-OP SOCIETY,F C I MUMBAI, MUMBAI, MAHARASHTRA 400074 Unregistered 4. City where the vehicle will primarily be used: MUMBAT √ Yes 94514120120 5. Have you been previously insured in respect of this vehicle? No Policy No. No √ Yes If so, are you entitled to No Claim Bonus from your previous Insurer? If Yes, Kindly indicate the percentage: 20% 35% 45% 55% I/We hereby declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring policy period (Copy of Policy enclosed). I/We further undertake that if this declaration is found incorrect, all benefits under the Policy in respectof Section1 of the Policy will stand forfeited. Signature of Proposer 6. About the Motor Vehicle to be Insured DF12BV0DFB12DF0BD *Make BAJAJ *Chassis No Speedometer reading as on date RTO where vehicle will be registed Date of Registration /Purchase *Vehicle IDV *Model SPIRIT STANDARD MUMBAT ₹ 19600 Trailer(s) Identification No. *Year of Manufacture NOVEMBER - 2021 23/11/2021 *CC/GVW Licensed Carrying Capacity (No of Passengers Including driver) *Registration No. Type of Body SCOOTER Colour of the vehicle DFG5D0FGDF12BG Vehicle Make (Indigenous or Imported) SPIRIT STANDARD Note: Either Registration no or Engine and Chassis Number is mandatory Zone -A Zone -B
Petrol Diesel Minnowative PDF Tools.Demo *Vehicle Rate Under: *Fuel Used: Others (please specify) National/State Highways

Between 50 and 100 Kms City/Town Road Private Road *Type of Permit Express Way District Roads * Average Monthly usage : Less Than 50 Kms ☐ Between 50 an Whether any modification or conversion has been done in the vehicle from the maker's standard specification? Ahove 251 Kms If Yes, please give details of such modifications/conversions.... Is the vehicle in good state of repair? If No, please furnish details Where will the vehicle be generally parked? Roadside Public Parking Road Outside Parking lot open or covered Within compound of residence open Within compound of residence covered 7. Financier Details: Hypothecation Hire Purchase Lease Financier Name : 8. Nominee Details: Nominee Name: DOB Relationship Appointee Name & age *If Nominee is minor (below 18 yrs) Appointee Name is mandatory. 9. Insured Declared value of the Vehicle: The IDV of the vehicle will be deemed to be the Sum-Insured for the purpose of the Policy and will be fixed on the basis of the manufacturerâC**s listed selling price of the brand and model as the vehicle proposed for insurance at the time of commencement of insurance / renewal and adjusted for depreciation as per the schedule specified below. Age of the Vehicle % of Depreciation Insured Decleared Value 1st Year (₹) 3rd Year (₹) Not exceeding 6 months 5% *Vehicle Chassis Value 19600 Exceeding 6 months but not exceeding 1 year Vehicle Body Value 15% Non- Electrical Accessories (Other than factory fitted): Details Exceeding 1 year but not exceeding 2 years Exceeding 2 years but not exceeding 3 years 30% Electrical Accessories (Other than factory fitted) Details

Note - For vehicles more than 5 years old, please contact the Company for fixing the IDV

40%

Bi- Fuel/ CNG/LPG Kit

Total IDV:

Trailer(s)/ Side Car Value (only for 2 wheelers):

00

19600

00

Not Applicable

00

Not Applicable

Exceeding 3 years but not exceeding 4 years

Exceeding 4 years but not exceeding 5 years

We at MAGMA HDI prefer receiving premium amount through cheque							
10. Extended Covers/ Extra Benefits at Additional Premium:							
Extension of Geographical Area:	Vehicle is fitted with Fibre Glass Fuel Tank		Yes No				
Bangladesh Bhutan Nepal	Vehicle will be used for Driving Tuitions		res No				
Maldives Pakistan Sri Lanka	Imported vehicle without payment of custor	ms duty	Yes 📝 No				
Compulsory Personal Accident for ₹ 15,00,000/- Per Yes No N/A Annum (If owner has a valid driving license)	Is the vehicle Company Yes Maintained?	No					
	Will the vehicle be let out on occasional Hire	e? Yes	✓ No				
Whether the vehicle is certified as Vintage Car by Vintage and Classic Car Club of India ? Yes No	Vehicle used for commercial purposes:		No				
Do you want to opt for wider legal liability to Paid Driver Yes No No N/A	Do you wish to include Personal Accident co Personal Accident cover for the Owner/Driv		ed occupants of the	vehicle in excess o	if the compulsory		
Other employees (If Yes, No. of persons tobe covered)	Sum Insured per person to be Rs 0 Nominee Details : Name						
Do you want to cover loss of accessories due to burglary, housebreaking or theft? Yes No	Age Relationship If yes, please indicate the Sum-Insured per person (In multiples of Rs.10000/- for a maximum of Rs.1 lakh per person for Two Wheelers and Rs. 2 lakhs per person for Private Cars. The number of persons to be covered for the						
(Applicable only for Two-Wheelers)	purpose of this Add-on will be equivalent to	the registered	carrying capacity o	f the vehicle)	e covered for the		
Do you wish to have an enhanced Personal accident cover for Yourself/ Your Driver/Unnamed occupants of the vehicle? Yes No N/A	Do you wish to cover Hospital Cash for hospitalisation arising out of accident for Yourself/Your Driver/Unnamed occupants of the vehicle?						
If Yes, please provide the Sum Insured per person			_				
Do you wish to include Personal Accident cover for named persons? Yes No V/A	<u>l</u>						
If YES, give name and Capital Sum Insured (CSI) opted for :							
(Note : The maximum CSI available per person is Rs. 2 lakhs in case of Private Cars and Rs.1 Lakh in the case of	motorized Two wheeler)						
11. Add On Coverage at additional :							
12. Restrictions of Cover/ Discounts:	Is the vehicle designed for use of Blind / Har	ndicapped/Men	tally challenged per	sons and duly endo	rsed as such by		
Vehicle fitted with Anti-theft device approved by ARAI: Yes No No	RTA ?						
Vehicle will be used within own premises : Yes No N/A	Are you a member of Automobile Association of India?						
Third Party Property Damage cover restricted to 6000 Yes No No N/A (Third Party Property Damage cover of Rs 1 lakh for 2 wheelers and Rs 7.5 lakhs for Private cars)	If yes, please state a. Name of Association b. Membership No. c. Date of expiry						
*Voluntary Deductible :							
Two Wheeler : V None 500/- 750/- 1,000/- 1,500/- 3,00			- 4				
I hold a valid and effective PUC and/or fitness certificate, as applicable, for the vehicle mentioned herein at	pove and undertake to renew the same during	the policy peri	oa.				
Winnovative P	DF Tools Demo			Cianatu	ero of Dropocor		
13. Previous Insurance Details:				Signatu	re of Proposer		
Previous Insurer Name: BHARATI	Type of cover: Standalone OD						
Policy/ Cover note number: 94514120120 Has any Insurance Company ever:	Period of Insurance: From 11/05/2023 To 10/ Claims reported in last 5 years	/05/2024					
1) Declined the proposal 2) Cancelled & Refused to renew	Year 1	2	3	4	5		
3) Required an increase in Premium 4) Imposed special conditions or excess	Type of Claims (OD/TP)						
	No. of Claims Amount						
14. Driver Details:	Amount						
a. Age & Date of Birth of the Owner : Age: Yrs DOB: / / b. Age & Date of Birth of the Driver : Age: Yrs DOB: / /							
c. Does the driver suffer from defective vision or hearing or any physical infirmity?							
If YES, please give details of such infirmity d. Has the driver ever been involved/convicted							
for causing any-accident of loss?							
If YES, give details as under including the pending prosecutions: -Driver's Name :							
-Date of Accident: -Loss / Cost (Rs.)							
-Circumstances of Accident / Loss 15. Premium Details							
Total Premium (Including GST): ₹ 296.00 Payment Mode : Cash Cheque DD							
Cheque/DD, Cheque No Bank/Branch Date.							
Do you wish to have this Policy credited to an eIA? (Please select any one)							
No, I do not have an eIA and do not wish to open one Yes, Credit this Policy to my e-Insurance accounts.	ınt						
If yes, Please share existing e-Insurance Account No :							
Please select Insurance Repository Name (you have opened your account with) M/s NSDL Database Management Limited M/s Karvy Insurance Repository Limited							
M/s Central Insurance Repository Limited M/s CAMS Repository Services Limited (Please select)	any one) Or						
I do not have existing e-Insurance account and I am interested in creating a new e-Insurance account (I	Please submit electronic insurance account op	ening form (eI	A form) along with	relevant documents	s)		
My CKYC No. (Central Know Your Customer registry number) is (if available): 50001576192993 Representative Details (only if eIA is to be opened for any other person other than Proposer and primary Insured)							
First Name:							
Middle Name : Last Name : Conder:							
Gender: DOB:							
PAN: Address Line 1:							
Address Line 2 : Address Line 3 :							
Pin Code : Telephone Number :							
Mobile Number : Relationship :							
Other Relationship: Email Id:							
UID : LandMark :							
State :							
City:							

Declaration: I/We hereby declare that the statements made by me/us in this Proposal Form are true to the best of my / our knowledge and belief and I/We hereby agree that this declaration between me/us and the Magma HDI General Insurance Co. Ltd.	n shall form thebasis of the contract						
I/We also declare that any additions or alterations carried out after the submission of this Proposal Form would be conveyed to Magma HDI General Insurance Co. Ltd immediately.							
1/We hereby agree to receive a One Page Motor Insurance Policy in Physical Form, to be read along with the detailed Terms and Conditions available on the website www.magmahdi.com							
I/We further confirm that the existing damages as per the pre inspection report, if any, have duly been shared with me & my consent has been obtained for the same. I/We hereby declare and undertake that the amount paid by me/us as premium for the aforementioned vehicle is out of my/our lawful and declared source of Income.							
and the control of the trade and the another part of may be premium to the distribution to the control of the c							
I wish to get all policy related communications on My Whatsapp Number: and allow to make welcome calls, Services calls or any other communication(electronic or otherwise), subject to the provision of							
applicable law. The salient features of the policy,terms and conditions of this proposal have been explained to me/us in language, and I/we agree to the same.							
Place: Kolkata Date: 10/05/2024	Signature of Proposer						
SECTION 41 INSURANCE LAWS (AMENDMENT) ACT, 2015 - PROHIBITION OF REBATES							
1.No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind or risk relating to lives or property in India, any rebate of the							
whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate except such rebate as may be allowed in accordance							
with the prospectus or tables of the Insurer.							
2.If any person fails to comply with sub-regulation (1) above, he shall be liable to payment of a fine which may extend to Ten Lakh Rupees.							

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