



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Two Wheeler Package Policy

UIN Number - IRDAN190RP0043V01100001

Policy Number :72240131240100006474

POLICY ISSUING OFFICE: PERUNDURAI (722401), VRV Complex, Bhavani Main Road, PERUNDURAI , TAMIL NADU , 638052. PHONE NUMBER:04294-220507 FAX NUMBER:NA / NA Email:nia.722401@newindia.co.in	BUSINESS CHANNEL/CPSC User: NAME: DIRECT BUSINESS - (1D4022930) Mrs. Nandhini K - (NIAAG00111497), PHONE NUMBER: / / 9976843017 LAND/FAX NUMBER:/ EMAIL:palanivendhan@gmail.com /	CLAIM CONTACT: Erode Non Suit Claim Hub (729002) ADDRESS: AMMAN COMPLEX, 1st FLOOR, No: 1360, E.V.N Road, Erode - 638011 , , TAMIL NADU , 638011. PHONE NUMBER: 04242219524 / MOBILE NUMBER: Email: ch729002@newindia.co.in
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INSURED DETAILS

Insured Name	VEERANAATH V	Customer ID	PO85921330 (PAN No :NA)
Insured Address	NO.2/1 RAAGAVENDRA BHAVANAM NH2 EXT PAAVENDAR CROSS STREET MARAIMALAI NAGAR TAMIL NADU ,CHENGPALATTU,, MARAIMALAINAGAR ,TAMIL NADU, 603209	Contact Number	/ / XXXXXX4755
		Email	veeranaath@gmail.com
		GSTIN	NA

POLICY DETAILS

Period of cover	28/12/2024 12:00:01 AM to 27/12/2025 11:59:59 PM	Receipt Number	72240181240000004932 - 14/12/24
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	72240131230100006020

VEHICLE DETAILS

Registration Number	TN-19-AF-4214	Chassis no./Engine Number	MBLHAR074HHM09181/H A10AGHHM11018
Make / Model	HERO/SPLENDOR PLUS	Variant:	SPLENDOR PLUS (97 CC)
Year of manufacture	2017	Type of body / Type of Fuel	Metal/Petrol
Colour	BLACK BLUE	Cubic capacity(cc) /Wattage(kW):	97cc
Seating capacity including Driver	2	Name of registration authority	TAMIL NADU
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none

INSURED DECLARED VALUE (in Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value
23142	0	0	0		23142

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium (-) (#) Total NCB Discount(50%)	163 81.46	Basic TP Premium (+) Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000)	714 275
Calculated OD Premium	82	Calculated TP Premium	989
Total OD Premium	82	Total TP Premium	989
Net Premium in Rs			1,071
GST in Rs			192
Total Payable in Rs			1,263
Total Payable in Rs(in words):	RUPEES ONE THOUSAND TWO HUNDRED SIXTY-THREE ONLY		

GSTIN(Issuing Office)	33AACN4165C4ZV
SAC	997134 (Motor vehicle insurance services)

Limitation 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) Any purpose in connection with Motor



Trade

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. 1,00,000

For individual covers (OD) in RS:23142	Compulsory excess in Rs:100
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 with the Insured	Name of the Appointee (if Nominee is a minor)	Relationship to the Nominee
NA	NA	NA	NA	NA

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
none	0	NA	NA

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 1,071
SGST	9	96
CGST	9	96
IGST	0	0

In witness where of this policy has been signed at PERUNDURAI on this 14-DEC-24 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 22,25.

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 1lakh 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, 1988.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 14/12/2024

(MS. J. SHARANYA DEVEE)
[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 : 72240124E0008048

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C