



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle PackagePolicy

UIN Number - IRDAN190RP0044V01100001

Policy Number :17090131240100002270

POLICY ISSUING OFFICE:
KHED BRANCH OFFICE (170901),
OFFICE NO.04, 1ST FLOOR, , MUKADAM
LANDMARK BLDG. NO.1, NR.TINBATTI NAKA,
, OPP. JIJAMATA DYAN, KHED, DIST
RATNAGIRI ,
MAHARASHTRA , 415709.
PHONE NUMBER:02356263569
FAX NUMBER:NA / NA
Email:nia.170901@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME: MR. HANIF A. GHANSAR - (1D7805759)
Mr. Mahesh Chandrakant Kondhalkar -
(NIAAG00184759),
PHONE NUMBER: / / 9673370349
LAND/FAX NUMBER:/
EMAIL:rock89mahesh@gmail.com /
rock89mahesh@gmail.com

CLAIM CONTACT:
Ratnagiri Non Suit Claim Hub (179001)
ADDRESS: Naik Complex Shivaji Nagar Ratnagiri
415612 , , MAHARASHTRA , 415612.
PHONE NUMBER: 1234567890 /
MOBILE NUMBER:
Email: ch179001@newindia.co.in

INSURED DETAILS

Insured's Name	SAI SNEHDEEP MEDICAL PVT LTD	Customer ID	POC0475478 (PAN No :NA)
Insured's Address	PLOT NO.12 AND 13,SECTOR 20,KOPARKHAIRNE, NAVI MUMBAI,,, GHANSOLI ,MAHARASHTRA, 400701	Contact Number	/ / XXXXXX7858
		Email	Amjadshaikh@sparkinsure. in
		GSTIN	NA

POLICY DETAILS

Period of cover	03/03/2025 04:34:42 PM to 02/03/2026 11:59:59 PM	Receipt Number	10000089240300031592 - 03/03/25
Previous Insurer	Not applicable	Previous Policy Number	NA

VEHICLE DETAILS

Geographical Area / Zone:	India/A	Year of manufacture:	2025
Type of Commercial Vehicles:	D - Misc-Special Type	Sub Type:	AMBULANCE
Name of the Financier:	Hdfc Bank Ltd	Chassis no./Engine no.:	MC1E4CAA4SP083277/D71 068261
Type of fuel:	Diesel	Cubic capacity (CC):	0
Type of body:	Closed	Gross Vehicle Weight (GVW):	2850
Make/Model:	FORCE MOT/TRAX AMBULANCE	Registration no.	MH-43
Seating capacity including Driver:	10	Variant:	CRUISER AMB DI BS-III NA
Automobile Association membership:	none	Colour:	WHITE
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Navi Mumbai

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value
2918121	0	0	0		2918121

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium (+)Loading for Inclusion of IMT 23 (+) Additional OD Premium for Bi-Fuel/CNG/LPG	19370 2905.56 0	Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000) (+)LL to paid driver conductor cleaner employed for oprn	7267 275 0 50

Policy No. : 17090131240100002270Document generated by QR_RENEWAL at 2025/03/03 16:34:48.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Give your valuable feedback on <https://www.newindia.co.in/portal/policyFeedbackGen>.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



		(+)Additional Premium for Ambulances Hearses	600
Calculated OD Premium	22276	Calculated TP Premium	8192
Total OD Premium (Rs)	22276	Total TP Premium (Rs)	8192
Net Premium (Rs)			30,468
GST (Rs)			5,484
Total Payable (Rs)			35,952
Total Payable in Rs(in words):	RUPEES THIRTY-FIVE THOUSAND NINE HUNDRED FIFTY-TWO ONLY		

GSTIN(Issuing Office)	27AACN4165C3ZP
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:2918121	Compulsory excess in Rs:14591
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	NM	NM

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 30,468
SGST	9	2742
CGST	9	2742
IGST	0	0

In witness where of this policy has been signed at KHED BRANCH OFFICE on this 03-MAR-25
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.

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: 03/03/2025

(MANDAR KALE)
[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 : 17090124P0003587

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C