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

POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Package Policy

UIN Number - IRDAN190RP0044V01100001

Policy Number :17090131250100000370

POLICY ISSUING OFFICE:	BUSINESS CHANNEL/CPSC User:	CLAIM CONTACT:
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	NAME: MR. HANIF A. GHANSAR - (1D7805759) Mr. Mahesh Chandrakant Kondhalkar - (NIAAG00184759), PHONE NUMBER: / / 9673370349 LAND/FAX NUMBER:/ EMAIL:rock89mahesh@gmail.com / rock89mahesh@gmail.com	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	VISHWAS LAXMAN MANE	Customer ID	POC2586004 (PAN No :BJQPP2886R)
Insured's Address	RAJ RAJESHWARI COMPOUND SONALI VILLAGE TAL- BHIWANDI DIST - THANE,,, BHIWANDI ,MAHARASHTRA, 421302	Contact Number	/ / XXXXXX7858
		Email	sparkpolicy@gmail.com
		GSTIN	NA

POLICY DETAILS

Period of cover	13/05/2025 06:33:32 PM to 12/05/2026 11:59:59 PM	Receipt Number	10000089250500352584 - 13/05/25
Previous Insurer	ICICI LOMBARD GENERAL INSURANCE CO. LTD.	Previous Policy Number	3004299429603000B00

VEHICLE DETAILS

Geographical Area / Zone:	India/C	Year of manufacture:	2013
Type of Commercial Vehicles:	C - Passenger Carrying	Sub Type:	C2-Four Wheeler(Carrying >6)
Name of the Financier:	HDFC BANK LTD ,	Chassis no./Engine no.:	MB1PBYC7D4366/CRHZA17406
Type of fuel:	Diesel	Cubic capacity (CC):	5495
Type of body:	Closed	Gross Vehicle Weight (GVW):	0
Make/Model:	ASHOK LEYL/AL 4/100	Registration no.	MH-04-FK-2599
Seating capacity including Driver:	53	Variant:	AL 4/88 SEATING 43
Automobile Association membership:	none	Colour:	RRR
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Thane - MH 04
FASTag ID:			

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value
1100000	0	0	0		1100000

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium (+)Loading for Inclusion of IMT 23 (+) Additional OD Premium for Bi-Fuel/CNG/LPG	2952 442.78 0	Basic TP Premium (+)Add Legal liability to passangers (+)LL to paid driver conductor cleaner employed for	14343 45604 0

Signature Not Verified
Digitally signed by DHIRAJ KUMAR
Date: 2025.05.13 18:33:41 IST

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		oprn	50
Calculated OD Premium	3395	Calculated TP Premium	59997
Total OD Premium (Rs)	3395	Total TP Premium (Rs)	59997
Net Premium (Rs)			63,392
GST (Rs)			11,410
Total Payable (Rs)			74,802
Total Payable in Rs(in words):	RUPEES SEVENTY-FOUR THOUSAND EIGHT HUNDRED TWO ONLY		

GSTIN(Issuing Office)	27AAACN4165C3ZP
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 e) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled Mechanically propelled vehicle.	
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:1100000	Compulsory excess in Rs:1500
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
none	0	none	none	none

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 63,392
SGST	9	5705
CGST	9	5705
IGST	0	0

In witness where of this policy has been signed at KHED BRANCH OFFICE on this 13-MAY-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 policy attached/available on the web site http://newindia.co.in; IMT Endorsement Number(s) printed herewith attached 21,23,37,7.
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 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,

For and on behalf of The New India Assurance Company Limited

1988.

Date of Issue: 13/05/2025

(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 : 17090125P0000615

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C