

**Service Branch Address:**

Office no.311,S No-307,Shanti Nagar,,W3-Hadapsar,PUNE - 411013.

Jun 18, 2025

Mr.KUNDAN PRAKASH JADHAV  
SNO 9 HOUSE NO 938 MANJARI ROAD NEAR MHATOBA MANDIR  
MALWADI MANJARI BK

SOLAPUR - 412307, MAHARASHTRA

Telephone :

Mobile : 70xxxxxx61



**NEXT RENEWAL  
IS ON  
17/06/2026**

**Certificate of Insurance and Policy No.**  
VGC1353928000100

**Policy Period:Period of insurance**  
From 12:41:36 hours on 18/06/2025 To Midnight of 17/06/2026

Dear Customer,

Thank you for choosing Royal Sundaram as the Insurer of your vehicle. We are delighted to have you as our customer. Please find enclosed Goods Carrying Vehicle Policy No. VGC1353928000100 which has been issued based on the details mentioned below:

|                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Name of the Insured: Mr.KUNDAN PRAKASH JADHAV                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| Mobile No.: 70xxxxxx61                                                                                                                                                                                                                                                                                                                                                                                                       | Email ID: SPA*****@GMAIL.COM          |
| Make of the Vehicle: Tata Motors Ltd.                                                                                                                                                                                                                                                                                                                                                                                        | Model Description: SIGNA 2823.K BSVI  |
| Engine No.: B56B6A220D06112C6386 0472                                                                                                                                                                                                                                                                                                                                                                                        | Chassis No.: MAT797015M3C06330        |
| Premium Amount (Rs.) 56,896.36                                                                                                                                                                                                                                                                                                                                                                                               | Add-on Covers Opted : No              |
| This policy is issued after pre-inspection on . Any Pre-existing damages observed during the pre-inspection is not covered in this policy.                                                                                                                                                                                                                                                                                   |                                       |
| Previous Policy No.                                                                                                                                                                                                                                                                                                                                                                                                          | P032402241433296                      |
| Previous Policy Insurance Co.                                                                                                                                                                                                                                                                                                                                                                                                | SBI GENERAL INSURANCE COMPANY LIMITED |
| Based On your declaration on No claim being made in expiring policy, we have extended next slab of no claim discount in your policy (0 %)                                                                                                                                                                                                                                                                                    |                                       |
| Does the vehicle have valid Pollution Under Control (PUC) Certificate: Yes                                                                                                                                                                                                                                                                                                                                                   |                                       |
| Pollution Certificate Number (PUC) :                                                                                                                                                                                                                                                                                                                                                                                         |                                       |
| PUC expiry date :                                                                                                                                                                                                                                                                                                                                                                                                            |                                       |
| *In line with the Central Motor Vehicle Act, 1989 and as per the directive of Hon'ble Supreme Court of India, it is mandated that insured must produce a valid "Pollution Under control" Certificate as and when asked by the insurer and it is the responsibility of the insured to renew the same before expiry of the validity of the PUC certificate. Absence of Valid certificate may lead to cancellation of insurance |                                       |
| <b>CPA Status</b>                                                                                                                                                                                                                                                                                                                                                                                                            |                                       |
| Waived off -Waiver details- The registered owner driver, have other vehicles policy along with CPA cover                                                                                                                                                                                                                                                                                                                     |                                       |

The policy is processed based on the information declared by you. While the information regarding the vehicle, insured (yourselves), detail of covers and terms/conditions could be ascertained from the Certificate of Insurance and Policy Schedule (Enclosed), some of the very critical ones like No Claim Bonus extended, KYC Details, status of Compulsory Personal Accident (CPA) Cover and details regarding Vehicle Inspection if any etc. are furnished above.

Coverage of risk is subject to realization 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 dishonor or any other reason or misrepresentation of any information, the insurance cover shall be void ab-initio.

Please check all the information printed in these pages for its correctness and should there be a discrepancy, reach us (Contact details provided below) for suitable rectification. In case there is no response within 15 days of policy inception, it will be deemed that all information provided are correct and all future transactions would be based on such information only.

The above information is to be read in conjunction with the policy certificate of issuance and policy schedule and shall be considered null and void without the same.

**To read the "policy" & "add on" terms, conditions, exceptions and applicable endorsement, please log on to our website [www.royalsundaram.in](http://www.royalsundaram.in). Should you have any queries, please contact our Customer Service helpline number 1860-425-0000,1860-258-0000. You may also write to [customer.services@royalsundaram.in](mailto:customer.services@royalsundaram.in)**

Assuring you of our best services at all times.

Yours sincerely,

Authorized Signatory

cc0778931ebc6dea8895ee5ea6939bb5

**Note: To download the claim form and to know more about Royal Sundaram products please log on to [www.royalsundaram.in](http://www.royalsundaram.in)**

**Service Branch Address:**

Office no.311,S No-307,Shanti Nagar,,W3-Hadapsar,PUNE - 411013.

Jun 18, 2025

Mr.KUNDAN PRAKASH JADHAV  
SNO 9 HOUSE NO 938 MANJARI ROAD NEAR  
MHATOBA MANDIR  
MALWADI MANJARI BK

SOLAPUR MAHARASHTRA  
412307  
Telephone:  
Mobile: 70xxxxxx61

Intermediary Code: OA512096  
Intermediary Name: Moseem Iliyas Shaikh .  
Contact: 8421887858  
-

**CERTIFICATE OF INSURANCE & POLICY SCHEDULE**

(See Form 51 of The Central Motor Vehicles Rules, 1989) Motor Vehicles Act, 1988

**Goods Carrying Vehicle Policy [Reprint]**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------------|
| <b>Certificate of Insurance and Policy No.</b><br>VGC1353928000100                                                                                                                                                                                                                                                                                                                                                                                   |                           |                            | <b>Policy Period:Period of insurance</b><br>From 12:41:36 hours on 18/06/2025 To Midnight of 17/06/2026                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                        |                   |
| <b>INSURED DETAILS</b>                                                                                                                                                                                                                                                                                                                                                                                                                               |                           |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |
| Name of Insured                                                                                                                                                                                                                                                                                                                                                                                                                                      | Insured Date of Birth     | Geographical Area          | Business/Profession                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Registration Authority | Registration Date |
| Mr.KUNDAN PRAKASH JADHAV                                                                                                                                                                                                                                                                                                                                                                                                                             | 11/02/1993                | India                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | SOLAPUR                | 16/11/2021        |
| <b>INSURED'S DECLARED VALUE (IDV) (in Rs.)</b>                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |
| For the Vehicle                                                                                                                                                                                                                                                                                                                                                                                                                                      | For Trailers              | Non Electrical Accessories | Electrical / Electronic Accessories                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Value of CNG Kit       | Total IDV         |
| 3,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                            | 0                         | 0                          | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 0                      | 3,000,000         |
| <b>VEHICLE DETAILS</b>                                                                                                                                                                                                                                                                                                                                                                                                                               |                           |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |
| Registration Number                                                                                                                                                                                                                                                                                                                                                                                                                                  | MH45AF6088                |                            | Type of Body                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | TIPPER                 |                   |
| Engine Number                                                                                                                                                                                                                                                                                                                                                                                                                                        | B56B6A220D06112C6386 0472 |                            | Public Carrier/Private Carrier                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Public Carrier         |                   |
| Chassis Number                                                                                                                                                                                                                                                                                                                                                                                                                                       | MAT797015M3C06330         |                            | Year of Manufacture                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2021                   |                   |
| Make of the Vehicle                                                                                                                                                                                                                                                                                                                                                                                                                                  | Tata Motors Ltd.          |                            | Gross Vehicle Weight (Kgs)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2,80,00                |                   |
| Model Description                                                                                                                                                                                                                                                                                                                                                                                                                                    | SIGNA 2823.K BSVI         |                            | Total Premium (in Rs.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 56,896                 |                   |
| Fuel Type                                                                                                                                                                                                                                                                                                                                                                                                                                            | Diesel                    |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |
| <b>LIMITATIONS AS TO USE: As per Motor Vehicles Rules, 1989</b><br>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.<br>The Policy does not cover use for<br>a) Organised racing b) Pace Making c) Speed testing<br>d) Reliability Trials                                                                   |                           |                            | <b>Persons or Classes of Persons entitled to Drive:</b><br><i>Any person including the Insured</i><br>• Provided that a person driving holds an effective driving licence at the time of the accident and is not disqualified from holding or obtaining such a License.<br>• Provided also that the person holding an effective learner's license may also drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of The Central Motor Vehicles Rules 1989. |                        |                   |
| <b>LIMITS OF LIABILITY:</b><br>Under Section II-1 (i) of the Policy - Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988.<br>Under Section II-1 (ii) of the Policy - Damage to Third Party Property - Rs 750000 (as per IMT 20) - In respect of any one claim or series of claims arising out of one event.<br>Personal Accident cover for Owner - Driver under section IV: CSI - Rs.0 |                           |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |
| <b>Note: Warranted that at no time the gross laden weight of the vehicle exceeds the gross vehicle weight mentioned in the schedule of the policy.</b>                                                                                                                                                                                                                                                                                               |                           |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |
| <i>Deductible under Section -I : In respect of each and every claim. (Compulsory Deductible [Rs.1,500] and Imposed Deductible [Rs. 0])</i>                                                                                                                                                                                                                                                                                                           |                           |                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                   |

Document Code:

Certificate of insurance & policy schedule continued in Page 2

cc0778931ebc6dea8895ee5ea6939bb5



You can reach us through the details given below Mon - Sat 8.00am to 9.00pm and Sunday up to 5.00pm



Call:1860 425 0000,1860 258 0000



SMS:type <MOTORCLAIMS> and send to 567675



E-Mail:customer.services@royalsundaram.in



www.royalsundaram.in

## **CERTIFICATE OF INSURANCE & POLICY SCHEDULE (CONTINUED)**

(See Form 51 of The Central Motor Vehicles Rules, 1989) Motor Vehicles Act, 1988

### **Goods Carrying Vehicle Policy [Reprint]**

**Policy No. VGC1353928000100**

| <b>A - OWN DAMAGE</b>                                                                                                                                                                                                                                                                                                             | <b>Premium in Rs.</b>                                  | <b>B - LIABILITY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Premium in Rs.</b>                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| 1.a) Basic premium on Vehicle<br>b) Non-Electrical Accessories<br>2. Additional GVW over 12,000 Kgs<br>3. Electrical & Electronic Accessories @ 4% (IMT 24)<br>4. Bi-Fuel Kit (CNG/LPG) @ 4% (IMT 25)                                                                                                                             | 5,178.00<br>0.00<br>432.00<br>0.00<br>0.00             | 1. Basic premium including premium for TPPD<br>2. Reduction in TPPD to Rs.6000/-<br>3. Trailers Endt. IMT-30<br>4. Bi – Fuel Kit (CNG/LPG) IMT-25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 43,950.00<br>0.00<br>0.00<br>0.00                                                                                 |
| <b>ADD:</b><br>5. Trailer<br>6. Overturning Risk<br>7. Geographical Area Extn.Endt.IMT-1<br>8. Cover for Lamps, Bumpers, etc. Endt. IMT – 23<br>9. Fibre Glass Tanks<br>10. Additional Towing Charges. Rs.0<br>11. 60% on OD Premium for Driving Tuition<br>12. Usage of Commercial and Private Purpose - IMT 34                  | 0.00<br>0.00<br>0.00<br>841.50<br>0.00<br>0.00<br>0.00 | <b>ADD::</b><br><b>Personal Accident Benefits</b><br>5. Geographical Area Extn. Endt.IMT-1<br>6. Under Section IV- Rs.0<br>7. PA to Paid Driver/ Cleaners Endt. IMT-17<br>8. Indemnity to Hirer IMT-44<br>9. Enhanced PA cover , Owner Driver, CSI Rs.0<br>10. Enhanced PA cover, Paid Driver, CSI Rs.0.00<br><b>Legal Liability:</b><br>11. To Paid Driver/Cleaner(not exceeding 7 persons)<br>Endt. IMT-28<br>12. To Paid Driver/Cleaner/Coolies(exceeding 7 persons)<br>Endt. IMT-39A<br>13. To Coolies Endt. IMT-39<br>14. NFPP - Employees Endt. IMT-37<br>15. NFPP Other than Employees Endt. IMT-37A<br>16. Usage of Commercial and Private Purpose - IMT 34<br><b>17. TOTAL LIABILITY PREMIUM (B)</b> | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>50.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br><b>44,000.00</b> |
| <b>LESS:</b><br>13. 50% Discount for vehicles specially designed/modified for blind, handicapped and mentally challenged persons<br>14. Discount for Anti-theft Devices Endt. IMT-10<br>15. Discount for vehicles plying within insured own premises<br>16. 0% NCB                                                                | 0.00<br>0.00<br>0.00<br>0.00                           | 18. ADD: Underwriting Loading%<br>19. Confined to own sites<br><b>20. Total Premium (A+B)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 0.00<br>0.00<br><b>50,452.00</b>                                                                                  |
| <b>Add: Additional Cover for Package Policies</b><br>18. Depreciation Waiver Clause ( IRDAN102A0001V01201011)<br>19. Windshield Glass (IRDAN102A0002V01201011)<br>20. EMI Protector Clause (IRDAN102A0003V01202021)<br>Limit. Rs.0.00<br>21. Loss of Income Cover (IRDAN102A0005V01202021)<br>Limit in Rs.0.00 Duration: 0 months | 0.00<br>0.00<br>0.00<br>0.00                           | <b>ADD: SGST</b><br><b>ADD: CGST</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 3,222.18<br>3,222.18                                                                                              |
| <b>22. TOTAL OWN DAMAGE PREMIUM (A)</b>                                                                                                                                                                                                                                                                                           | <b>6,452.00</b>                                        | <b>22. TOTAL PREMIUM PAYABLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>56,896.36</b>                                                                                                  |

#### **No Claim Bonus:**

a) No Claim Bonus will only be allowed provided the policy is renewed within 90 days of the expiry date of the previous year. b) The insured is entitled for a No Claim Bonus (NCB) on the Own Damage Section of the policy, if no claim is made or pending during the preceding year(s), as per the details given below:

| Period of Insurance               | % of NCB on OD Premium | Subject to IMT Endt. Nos. & memorandum 23,28,21 (refer Terms & Conditions for relevant wording)<br>Under Hire Purchase/Lease Agreement /Hypothecated with AU SMALL FINANCE BANK LIMITED                                                             |              |             |                   |  |   |  |               |              |                   |  |   |  |
|-----------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------|-------------------|--|---|--|---------------|--------------|-------------------|--|---|--|
| The preceding year                | 20                     |                                                                                                                                                                                                                                                     |              |             |                   |  |   |  |               |              |                   |  |   |  |
| Preceding two consecutive years   | 25                     | <table><tr><th>Nominee Name</th><th>Nominee Age</th><th>Relationship with</th></tr><tr><td></td><td>0</td><td></td></tr><tr><th>Guardian Name</th><th>Guardian Age</th><th>Guardian Relation</th></tr><tr><td></td><td>0</td><td></td></tr></table> | Nominee Name | Nominee Age | Relationship with |  | 0 |  | Guardian Name | Guardian Age | Guardian Relation |  | 0 |  |
| Nominee Name                      | Nominee Age            | Relationship with                                                                                                                                                                                                                                   |              |             |                   |  |   |  |               |              |                   |  |   |  |
|                                   | 0                      |                                                                                                                                                                                                                                                     |              |             |                   |  |   |  |               |              |                   |  |   |  |
| Guardian Name                     | Guardian Age           | Guardian Relation                                                                                                                                                                                                                                   |              |             |                   |  |   |  |               |              |                   |  |   |  |
|                                   | 0                      |                                                                                                                                                                                                                                                     |              |             |                   |  |   |  |               |              |                   |  |   |  |
| Preceding three consecutive years | 35                     |                                                                                                                                                                                                                                                     |              |             |                   |  |   |  |               |              |                   |  |   |  |
| Preceding four consecutive years  | 45                     |                                                                                                                                                                                                                                                     |              |             |                   |  |   |  |               |              |                   |  |   |  |
| Preceding five consecutive years  | 50                     | Date and Signature of Proposal/Renewal notice 18/06/2025                                                                                                                                                                                            |              |             |                   |  |   |  |               |              |                   |  |   |  |

Date and Signature of Proposal/Renewal notice 18/06/2025

In Witness whereof this Policy has been signed at Chennai on 18/06/2025 in lieu of Cover note No. dated Receipt No. CBCEAP3238206. 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 the Motor Vehicles Act, 1988.

**IMPORTANT NOTICE:** The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule.

Consolidated Stamp Duty Paid to Govt of TamilNadu

Authorised Signatory

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

GSTIN : 27AABCR7106G1ZJ

Base Product UIN: IRDAN102RP0005V02201617

PAN Number : AABCR7106G

Enhanced PA Cover Clause UIN:

IRDAN102A0017V01201920

For Legal interpretation, English version will hold good.

cc0778931ebc6dea8895ee5ea6939bb5

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Call:1860 425 0000,1860 258 0000



SMS:type <MOTORCLAIMS> and send to 567675



E-Mail:customer.services@royalsundaram.in



www.royalsundaram.in

## GST Invoice

Royal Sundaram General Insurance Co. Limited  
W3:W3-Hadapsar  
Address: Office no.311,S No-307,Shanti Nagar,,W3-Hadapsar,PUNE - 411013.  
GSTIN: 27AABCR7106G1ZJ

Policy Number : VGC1353928000100  
GST Invoice Number : VGC135392800000  
Invoice Date : 18/06/2025

Address of insured:  
Insured Name: Mr.KUNDAN PRAKASH JADHAV  
SNO 9 HOUSE NO 938 MANJARI ROAD NEAR MHATOBA MANDIR  
MALWADI MANJARI BK  
  
SOLAPUR  
State:MAHARASHTRA  
Pincode: 412307

| HSN<br>SAC | Taxable<br>Value | CGST  |          | SGST/UTGST |          | IGST |        | Total<br>Amount |
|------------|------------------|-------|----------|------------|----------|------|--------|-----------------|
|            |                  | Rate  | Amount   | Rate       | Amount   | Rate | Amount |                 |
| 997134     | 6,502.00         | 9.00% | 585.18   | 9.00%      | 585.18   |      |        | 7,672.00        |
| 9971       | 43,950.00        | 6.00% | 2,637.00 | 6.00%      | 2,637.00 |      |        | 49,224.00       |

Indication if tax payable under reverse charge - No

"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."

**Note:**"This document is digitally signed"

"This document is electronically generated.This document should be issued along with the Policy document.This document stands invalid,if issued separately"

You can reach us through the details given below Mon - Sat 8.00am to 9.00pm and Sunday up to 5.00pm



Call:1860 425 0000,1860 258 0000



SMS:type <MOTORCLAIMS> and send to 567675



E-Mail:customer.services@royalsundaram.in



www.royalsundaram.in

Company: Royal Sundaram General Insurance | Branch: Pune | Requester: G

ADROIT  
REMARKSStatus Remark:  
NA

Report Status:

Recommended



Reg. Owner name **KUNDAN PRAKASH JADHAV**  
Registration No. **MH45AF6088**  
Chassis No. **MAT797015M3C06330**  
Engine No. **0D06112C63860472**



Vehicle Type **Truck**  
Manufacturing Year **2021**  
Meter Reading (In KM) **63847**  
Fuel Used **Diesel**



Vehicle Color **TITANIUM\_WHITE**  
Document **Verified**

## FRONT

|                     |         |
|---------------------|---------|
| Cowl                | Intact  |
| Bonnet              | Intact  |
| Bumper/Mudguard     | Intact  |
| Cabin(Steel/Wooden) | Average |
| Head Light LT       | Intact  |
| Head Light RT       | Intact  |
| Indicator Front RT  | Intact  |
| Indicator Front LT  | Intact  |

## LEFT HAND SIDE

|           |        |
|-----------|--------|
| Left Body | Intact |
| Left Door | Intact |

## REAR

|                   |        |
|-------------------|--------|
| Rear Body         | Intact |
| Indicator Rear LT | Intact |
| Indicator Rear RT | Intact |

## RIGHT HAND SIDE

|            |        |
|------------|--------|
| Right Body | Intact |
| Right Door | Intact |

## GLASSES

|                 |        |
|-----------------|--------|
| Front W/S Glass | Intact |
| Window Glass LT | Intact |
| Window Glass RT | Intact |
| Back W/S Glass  | Intact |

## METER

|               |          |
|---------------|----------|
| Odometer Type | Electric |
|---------------|----------|

|          |           |
|----------|-----------|
| Odometer | Working   |
| Battery  | Available |

## BODY/EXTERIOR

|                    |        |
|--------------------|--------|
| Body(Steel/Wooden) | Intact |
| Seat               | Good   |
| Fuel/Tank          | Intact |
| Loader             | No     |
| Silencer           | Intact |

## TYRES &amp; WHEELS

|            |         |
|------------|---------|
| Tyre       | Average |
| Wheel Rims | Intact  |

## DECLARATION BY CUSTOMER

I/We hereby declare, confirm and agree that:- The Motor vehicle proposed for insurance after a break in cover has not met with any accident giving rise to any claim by a Third Party for injury or death caused to any person or damages to any property. I have presented the same vehicle for pre-insurance inspection, which I have proposed for insurance. Identification details noted/photographs taken by the inspecting officials are correct. If later on, at any time it is found that inspected vehicle and damaged/accidental vehicles are different then neither any claim nor any indemnity in respect of either own damage or third party death or injury or property damage loss nor any benefit shall be available to me/us. Vehicle has been visually inspected in my/ our presence. No damage or no fact which is material to acceptance of this proposal has been hidden/ undisclosed/ withheld by me/us. Damages of vehicle as noted/photographs taken by the inspecting officials are correct. I/We also agree that damages mentioned as per inspection photographs/video shall be excluded in the event of any claim being lodged during the policy period.



Customer Signature



Inspection Address:  
Pune Mundhwa, Maharashtra, Mumbai, 400062

Service By  
AKASH ROAD

Created Date Time **18-06-2025 10:24:15**  
Service Date Time **18-06-2025 12:15:30**

## Disclaimer:....

- This is a computer generated report and need not required any signature.
- Our responsibility is limited to proven negligence.
- Damages mentioned in this report or seen in photographs are not admissible in the event of any claim lodged.
- This report shall be verified by QR code. Adroit is not responsible for any manipulation or tempering on report.
- This report is valid for one year from the date of issue.



Authorized Signatory  
License Number: IRDA/IND/SLA-33606

## IMAGES



Head Office:

ADROIT INSPECTION SERVICES PRIVATE LIMITED

H-182, 1st Floor, Sector 63, Noida, Ghaziabad (Uttar Pradesh) - 201301

Phone: 0120-4369000 | Email: mail@adroitauto.in | Website: www.adroitauto.in





Company: **Royal Sundaram General Insurance** | Branch: **Pune** | Requester: **G**

Head Office:

**ADROIT INSPECTION SERVICES PRIVATE LIMITED**

H-182, 1st Floor, Sector 63, Noida, Ghaziabad (Uttar Pradesh) - 201301

Phone: 0120-4369000 | Email: mail@adroitauto.in | Website: www.adroitauto.in





## Inspection Report (CV)

### TATA Signa



Download &amp; Share

Company: **Royal Sundaram General Insurance** | Branch: **Pune** | Requester: **G**

Head Office:

**ADROIT INSPECTION SERVICES PRIVATE LIMITED**

H-182, 1st Floor, Sector 63, Noida, Ghaziabad (Uttar Pradesh) - 201301

Phone: 0120-4369000 | Email: mail@adroitauto.in | Website: www.adroitauto.in



Company: **Royal Sundaram General Insurance** | Branch: **Pune** | Requester: **G**