

Service Branch Address: Office no.311,S No-307,Shanti Nagar,,W3-Hadapsar,PUNE - 411013.

Sep 10, 2025

Mrs.KRUTIKA RAMESH SHINDE
VADGAON SHINDE TAL. HAVELI ASHIRWAD
NIWAS PUNE MAHARASHTRA 9096417545

PUNE,MAHARASHTRA
411047
Telephone :
Mobile: 90xxxxxx45

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 – Liability only [Reprint]

Certificate of Insurance and Policy No. VGT0573285000100		Policy Period:Period of insurance From 11:09 hours on 11/09/2025 To Midnight of 10/09/2026			
INSURED DETAILS					
Name of Insured		Insured Date of Birth	Geographical Area	Business/Profession	Registration Authority
Mrs.KRUTIKA RAMESH SHINDE		08/12/1995	India		PUNE
VEHICLE DETAILS					
Registration Number	MH12HD0603	Model Description	Navistar MN 25	Gross Vehicle Weight(Kgs)	25,000
Engine Number	BA11ZD0011	Type of Body	OPEN	Seating Capacity (including Driver)	2
Chassis Number	MA1QDAHHC6F91088	Public Carrier/Private Carrier	Public Carrier	Fuel Type	Diesel
Make of the Vehicle	MAHINDRA	Year of Manufacture	2011	Total Premium (in Rs.)	49,283
LIMITATIONS AS TO USE: As per Motor Vehicles Rules, 1989 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) Speed testing d) Reliability Trials			DRIVER: Persons or class of persons permitted to drive public/private carrier • 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 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. Under Section II-1 (ii) of the Policy -Damage to Third Party Property - Rs750,000. In respect of any one claim or series of claims arising out of one event.					
Nominee Name : LEGAL HEIR			Nominee Age : 30		Relationship with : SPOUSE
Guardian Name :			Guardian Age : 0		Guardian Relation :
Personal Accident Cover for Owner - Driver under Section IV Capital Sum Insured : Rs. 0					
B - LIABILITY					
1. Basic premium including premium for TPPD		43,950.00			
2. Less: For restricted TPPD cover for Rs.6000/-(IMT 20)		0.00			
3. Trailers		0.00			
4. Bi-fuel kit (CNG)		0.00			
Add:Personal Accident Benefits					
5. Geographical Area Extn.Endt.IMT-1		0.00			
6. Under Section IV (Owner Driver), CSI Rs.0		0.00			
7. P.A Cover to Paid Driver, CSI Rs. 0(IMT 17)		0.00			
Legal Liability					
8. To Paid Driver/Cleaner (IMT 28)		50.00		ADD: SGST	
9. To Coolies (IMT 39)		0.00		ADD: CGST	
10.NFPP to employees (IMT 37)		0.00			
11. NFPP to non - employees (IMT 37-A)		0.00			
12. Usage of Commercial and Private Purpose - IMT 34		0.00			
13. Indemnity to Hirer_Liability- IMT - 45		0.00			
TOTAL LIABILITY PREMIUM (B)		44,000.00		TOTAL PREMIUM	
				49,283.00	
In Witness whereof this Policy has been signed at Chennai on 10/09/2025 in lieu of Cover note No. dated Receipt No. CBCEAP3706997.Subject to IMT Endt. Nos & Memorandum 28. 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.					
For Royal Sundaram General Insurance Co. Limited					
Consolidated Stamp Duty Paid to Govt of TamilNadu					
This document is digitally signed, hence counter signature / stamp is not required.					

For Legal interpretation, English version will hold good.

GSTIN :27AABCR7106G1ZJ

PAN Number:AABCR7106G

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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

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 : VGT0573285000100
GST Invoice Number : VGT057328500000
Invoice Date : 11/09/2025

Address of insured:
Insured Name: Mrs.KRUTIKA RAMESH SHINDE
VADGAON SHINDE TAL. HAVELI ASHIRWAD
NIWAS PUNE MAHARASHTRA 9096417545

PUNE
State:MAHARASHTRA
Pincode: 411047

HSN SAC	Taxable Value	CGST		SGST/UTGST		IGST		Total Amount
		Rate	Amount	Rate	Amount	Rate	Amount	
997134	50.00	9.00%	4.50	9.00%	4.50			59.00
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"

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