



Third party (TPA) Medical College & Hospital Vehicle Insurance policies List

S. No	Insurance Period Covered Date	Vehicle No.	Vehicle Type	Payer Insurance Company
1	30/09/2023 to 29/09/2024	MH-16-BC-1105	FORCE Traveller Ambulance	THE NEW INDIA ASSURANCE COMPANY LTD.
2	18/07/2023 to 17/07/2024	MH-16-CD-2300	STARBUS ULTRA	UNITED INDIA INSURANCE CO.LTD.
3	11/02/2023 to 10/02/2024	MH-16-CC-7517	BALENO	THE NEW INDIA ASSURANCE COMPANY LTD.
4	02/05/2023 to 01/05/2024	MH-16-BZ-0269	TATA/MAGIC	THE NEW INDIA ASSURANCE COMPANY LTD.
5	19/04/2023 to 18/04/2024	MH-17-C-0968	TATA/BUS	THE NEW INDIA ASSURANCE COMPANY LTD.
6	26/08/2023 to 25/08/2024	MH-16-CY-8526	TOYOTA/INNOVA CRYSTA	CHOLAMANDALA M MS GENERAL INSURANCE CO.LTD.
7	14/08/2023 to 13/08/2024	MH-16-CD-8998	TATA/NEXON EV	BAJAJ ALLIANZ GENERAL INSURANCE CO.LTD.



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle PackagePolicy

UIN Number - IRDAN190RP0044V01100001

Policy Number :15180431230100001595

POLICY ISSUING OFFICE: RAHURI BRANCH 151804 (151804), SITAPLAZA COMPLEX, , NAGAR MANMAD ROAD , RAHURI , MAHARASHTRA , 413705. PHONE NUMBER:02426233069 / 02426233070 FAX NUMBER:02426233070 / NA Email:nia.151804@newindia.co.in	BUSINESS CHANNEL/CPSC User: NAME: M/S. Pravara Institute Of Research & Education, - (2D11723547), PHONE NUMBER: / / LAND/FAX NUMBER:/ EMAIL:pirens@pravara ren.nic.in /	CLAIM CONTACT: PUNE CLAIM HUB (150001) ADDRESS: 572/575, Shanta Commercial Complex, Near Gokhale Hall, Sadashiv Peth, Laxmi Road, PUNE 411030 , , MAHARASHTRA , 411030. PHONE NUMBER: 02024430697 / MOBILE NUMBER: Email: ch15@newindia.co.in
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INSURED DETAILS

Insured's Name	PAD. DR. VITHALRAO VIKHE PATIL FOUNDATIONS COLLEGE	Customer ID	PO24493857 (PAN No :NA)
Insured's Address	OF AGRICULTURE, VADGAON GUPTA ,TAL NAGAR,DIST AHMEDNAGAR, AHMEDNAGAR ,MAHARASHTRA, 414001	Contact Number	/ /
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	30/09/2023 12:00:01 AM to 29/09/2024 11:59:59 PM	Receipt Number	15180481230000002420 - 21/09/23
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	15180431220100001586

VEHICLE DETAILS

Geographical Area / Zone:	India/C	Year of manufacture:	2015
Type of Commercial Vehicles:	D - Misc-Special Type	Sub Type:	AMBULANCE
Name of the Financier:		Chassis no./Engine no.:	MC1E4CHA9GP034847/D6 3018022
Type of fuel:	Diesel	Cubic capacity (cc):	0
Type of body:	Ambulance	Gross Vehicle Weight (GVW):	3510
Make/Model:	FORCE MOTO/Traveller Ambulance (3350/BS4)	Registration no.	MH-16-BC-1105
Seating capacity including Driver:	10	Variant:	FORCE Traveller Ambulance
Automobile Association membership:		Colour:	S WHITE
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Ahmednagar

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
472500	0	0	0	0	472500

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium (-)Calculated NCB Discount(50%) (+)Loading for Inclusion of IMT 23	2363 1358.44 354.38	Basic TP Premium (+)LL to paid driver conductor cleaner employed for oprn (+)Additional Premium for Ambulances Hearses (+)PA cover for unnamed person(9)	7267 50 600 450
Calculated OD Premium	1359	Calculated TP Premium	8367

Policy No. : 15180431230100001595 Document generated by 26955 at 2023/09/21 14:35:31.

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>.



Total OD Premium (Rs)	1359	Total TP Premium (Rs)	8367
Net Premium (Rs)			9,726
GST (Rs)			1,750
Total Payable (Rs)			11,476
Total Payable in Rs(in words):	RUPEES ELEVEN THOUSAND FOUR HUNDRED SEVENTY-SIX 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:472500	Compulsory excess in Rs:2363
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	N	N

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 9,726
SGST	9	875
CGST	9	875
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 21/09/2023 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 16,21,23,40.
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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.

Date of Issue: 21/09/2023

For and on behalf of The New India Assurance Company Limited



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 : 15180423P0002952

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE
Commercial Vehicle Package Policy Enhanced Covers

UIN Number - IRDAN190RP0044V01100001

Policy Number :15180431230300000930

POLICY ISSUING OFFICE:
RAHURI BRANCH 151804 (151804),
SITAPLAZA COMPLEX, , NAGAR MANMAD
ROAD , RAHURI ,
MAHARASHTRA , 413705.
PHONE NUMBER:02426233069 /
02426233070
FAX NUMBER:02426233070 / NA
Email:nia.151804@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME:
M/S. Pravara Institute Of Research & Education, -
(2D11723547),
PHONE NUMBER: / /
LAND/FAX NUMBER:/
EMAIL:pirens@pravara.ren.nic.in /

CLAIM CONTACT:
PUNE CLAIM HUB (150001)
ADDRESS: 572/575, Shanta Commercial Complex,
Near Gokhale Hall, Sadashiv Peth, Laxmi Road, PUNE
411030 , , MAHARASHTRA , 411030.
PHONE NUMBER: 02024430697 /
MOBILE NUMBER:
Email: ch15@newindia.co.in

INSURED DETAILS

Insured's Name	DR VITTHALRAO VIKHE PATIL FOUNDATION	Customer ID	PO06418956 (PAN No :NA)
Insured's Address	A/P VILAD GHAT MIDC, AHMEDNAGAR, AHMEDNAGAR, AHMEDNAGAR , MAHARASHTRA, 414001	Contact Number	/ /
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	18/07/2023 12:00:01 AM to 17/07/2024 11:59:59 PM	Receipt Number	15180481230000001466 - 11/07/23
Previous Insurer	UNITED INDIA INSURANCE CO. LTD.	Previous Policy Number	1625003122P103495636

VEHICLE DETAILS

Geographical Area / Zone:	India/C	Year of manufacture:	2022
Type of Commercial Vehicles:	C - Passenger Carrying	Sub Type:	C2-School Bus(Carrying>6)
Name of the Financier:	SVC CO OP BANK LTD	Chassis no./Engine no.:	MAT784056NFD01904/33L NGD05CXX509402
Type of fuel:	Diesel	Cubic capacity (cc):	3300
Type of body:	Closed	Gross Vehicle Weight (GVW):	0
Make/Model:	TATA MOTOR/STARBUS ULTRA	Registration no.	MH-16-CD-2300
Seating capacity including Driver:	56	Variant:	STARBUS ULTRA 56 SEATER
Automobile Association membership:		Colour:	STD WHITE
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Ahmednagar
FASTag ID:			

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
2298665	0	0	0	0	2298665

ENHANCED COVER

Nil Depreciation Add On Cover

SCHEDULE OF PREMIUM

Own Damage		Liability		
Basic OD Premium	5792	Basic TP Premium	12192	
(-)Calculated NCB Discount(20%)	1332.25	(+)Add Legal liability to passengers	40230	
(+)Loading for Inclusion of IMT 23	868.86	(+)LL to paid driver conductor cleaner employed for		
(+)Nil Depreciation Cover Premium	7534.99	oprn		

Signature valid

Digitally Signed
by AGATHA YEE
PAN: A11
Date: 13.07.11
15:01:26 IST

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 approach Insurance Ombudsman. For details of office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://www.newindia.co.in>.

Policy No. : 15180431230300000930 Document generated by 38622 at 2023/07/11 15:01:25

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 <http://www.newindia.co.in/portal/policyFeedbackGen>.





Calculated OD Premium	11996	Calculated TP Premium	52522
Total OD Premium (Rs)	11996	Total TP Premium (Rs)	52522
Net Premium (Rs)			64,518
GST (Rs)			11,614
Total Payable (Rs)			76,132

Total Payable in Rs(in words): RUPEES SEVENTY-SIX THOUSAND ONE HUNDRED THIRTY-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 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:2298665	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 64,518
SGST	9	5807
CGST	9	5807
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 11/07/2023
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 23,40,7.

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, 1988.

For and on behalf of The New India Assurance Company Limited

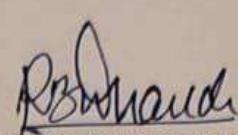
Policy No. : 15180431230300000830 Document generated by 38622 at 2023/07/11 15:01:25.
Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001, TOLL FREE No. 1 800 209 1415.

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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>.



Date of Issue: 11/07/2023


Duly Constituted Attorney(s)

NIL DEPRECIATION ADD ON COVER UNDER COMMERCIAL VEHICLE PACKAGE POLICY

(Endorsement Wording for Add on cover - Nil Depreciation)

UIN Number - IRDAN190RP0044V01100001/A0009V01202021

ENDORSEMENT ATTACHED TO AND FORMING PART OF POLICY NO. 1518043123030000930

Additional Premium: Rs. 7535

In consideration of payment of an additional premium by the Insured, it is hereby agreed and declared that notwithstanding anything to the contrary contained in the Policy, the Company hereby undertakes to indemnify:

1. Depreciation on replacement of parts including tyres, tubes, rubber / plastic for Partial Loss Claims.
2. Exclusion and depreciation under IMT 21 & IMT 23 respectively (wherever applicable).
3. Midterm inclusion of cover is not permitted.
4. Total Loss and Constructive Total Loss will be settled on the basis of IDV.
5. Depreciation waiver is applicable for two claims only.

The Company shall not be liable to make any payment in respect of:

1. Replacement of accessories, extra fittings and/or any internal improvements in the Insured Vehicle unless specifically covered in IDV.
2. Any damage occurred due to overturning in case of Miscellaneous D vehicle, unless covered under the policy by IMT 47.

Subject otherwise to the terms, exceptions, conditions and limitations of this Policy.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 11/07/2023


R. B. Shinde
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 : 15180423P0001728

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C

दि न्यू इंडिया एश्योरन्स कंपनी लि.

भारत सरकार का उपकार // "Government of India Undertaking"

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



कामशीर्षल वाहनाचा विमा दावा करण्यासाठी
रपॉट सध्ये करणे अनिवार्य आहे.

For Commercial Vehicle Spot Survey
Compulsory in Case of Accident.

POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Package Policy

UIN Number - IRDAN190RP0044V01100001

Policy Number : 15180431220100003498

POLICY ISSUING OFFICE:
RAHURI BRANCH 151804 (151804),
SITAPLAZA COMPLEX, NAGAR MANMAD
ROAD, RAHURI,
MAHARASHTRA, 413705.
PHONE NUMBER: 02426233069 /
02426233070
FAX NUMBER: 02426233070 / NA
Email: nia.151804@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME:
M/S. Pravara Institute Of Research & Education, -
(2011723547),
PHONE NUMBER: / /
LAND/FAX NUMBER: / /
EMAIL: pirens@pravara.ren.nic.in /

CLAIM CONTACT:
RAHURI BRANCH 151804 (151804)
OR
CUSTOMER CARE NUMBER: 1800-209-1415

INSURED DETAILS

Insured's Name	DR. VIKHE PATIL MEDICAL HOSPITAL & MEDICAL COLLEGE	Customer ID	PO77356000 (PAN No : NA)
Insured's Address	A/P-OPP.GOVT MILK DAIRY,VADGAON GUPTA (VILAD GHAT) MIDC AHMEDNAGAR,TAL-AHMEDNAGAR,DIST-AHMEDNAGAR, AHMEDNAGAR, MAHARASHTRA, 414001	Contact Number	/ / XXXXXX0231
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	11/02/2023 12:00:01 AM to 10/02/2024 11:59:59 PM	Receipt Number	15180481220000006494 - 07/02/23
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	15180431210100004871

VEHICLE DETAILS

Geographical Area / Zone:	India/B	Year of manufacture:	2020
Type of Commercial Vehicles:	D - Misc-Special Type	Sub Type:	AMBULANCE
Name of the Financier:		Chassis no./Engine no.:	MA1XE2GRKL2A85155/GRL 4A55384
Type of fuel:	Diesel	Cubic capacity (cc):	0
Type of body:	Ambulance	Gross Vehicle Weight (GVW):	0
Make/Model:	MAHINDRA & BOLERO	Registration no.	MH-16-CC-7517
Seating capacity including Driver:	6	Variant:	BOLERO PLUS AMBULANCE AC
Automobile Association membership:		Colour:	WHITE
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Ahmednagar

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
446181	0	0	0	0	446181

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium (-)Calculated NCB Discount(35%)	5363 1877.08	Basic TP Premium (+)LL to paid driver conductor cleaner employed for opn (+)Additional Premium for Ambulances Hearses	7267 50 360
Calculated OD Premium	3487	Calculated TP Premium	7677

Signature valid
Digitally signed
by AGAM JEE
PAN/ID: 14533818T
Date: 12/04/2021
Policy in Rs. 300000/-
Total Rs. 300000/- vide Receipt No. 0000204047202122
Dated: 12/04/2021
Policy No. 15180431220100003498 Document generated by 35568 at 2023/02/07 14:53:38.
Regd. & Head Office: New India Assurance Bldg, 87 M.G. Road, Fort, Mumbai - 400 001, TOLL FREE No. 18002091415.

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

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प्रधान कार्यालय : दि न्यू इंडिया एश्योरन्स बिल्डीग, 87, महात्मा गांधी मार्ग, फोर्ट, मुंबई - 400 001. फोन : 022 - 22708100 / 22708400.

CIN NO. L66000MH1919GOI000526 - GSTIN No. 27AACN4165C3ZP - IRDA REGN. NO. 190 of 3



Total OD Premium (Rs)	3487	Total TP Premium (Rs)	7677
Net Premium (Rs)			11,164
GST (Rs)			2,010
Total Payable (Rs)			13,174

Total Payable in Rs(in words): RUPEES THIRTEEN THOUSAND ONE HUNDRED SEVENTY-FOUR 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:446181	Compulsory excess in Rs:2231
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	N	N

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 11,164
SGST	9	1,005
CGST	9	1,005
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 07/02/2023
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 21,40.

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.

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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.

Date of Issue: 07/02/2023

For and on behalf of The New India Assurance Company Limited



Policy No. : 15180431220100003488 Document generated by 35568 at 2023/02/07 14:53:38.
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>.



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 : 15180422E0007727

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C





[B]

MH-16-BZ-0269

POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE
Private Car Package Policy

UIN Number - IRDAN190RP0042V01100001

Policy Number :15180431230100000293

POLICY ISSUING OFFICE:
RAHURI BRANCH 151804 (151804),
SITAPLAZA COMPLEX, , NAGAR MANMAD
ROAD , RAHURI ,
MAHARASHTRA , 413705.
PHONE NUMBER:02426233069 /
02426233070
FAX NUMBER:02426233070 / NA
Email:nia.151804@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME:
M/S. Pravara Institute Of Research & Education, -
(2D11723547),
PHONE NUMBER: / /
LAND/FAX NUMBER:/
EMAIL:pirens@pravara.ren.nic.in /

CLAIM CONTACT:
PUNE CLAIM HUB (150001)
ADDRESS: 572/575, Shanta Commercial Complex,
Near Gokhale Hall, Sadashiv Peth, Laxmi Road, PUNE
411030, , , MAHARASHTRA , 411030.
PHONE NUMBER: 02024430697 /
MOBILE NUMBER:
Email: ch15@newindia.co.in

INSURED DETAILS

Insured Name	VIKHE PATIL FOUNDATION	Customer ID	PO88843867 (PAN No :NA)
Insured Address	A/P-VILAD GHAT NAGAR,TAL-AHMEDNAGAR,DIST-AHMEDNAGAR, AHMEDNAGAR MIDC ,MAHARASHTRA, 414111	Contact Number	/ /
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	02/05/2023 03:29:08 PM to 01/05/2024 11:59:59 PM	Receipt Number	1518048123000000445 - 02/05/23
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	15180431220100000139

VEHICLE DETAILS

Registration Number	MH-16-BZ-0269	Chassis no./Engine Number	MAT445502HDN01301/27 5ID07NSYSC2311
Make / Model	TATA/MAGIC	Variant:	FACE LIFT HT
Year of manufacture	2017	Type of body / Type of Fuel	Saloon/Diesel
Colour	ARCTIC WHITE	Cubic capacity(cc) /Wattage(kW):	702cc
Seating capacity including Driver	8	Name of registration authority	Ahmednagar
Geographical Area / Zone	India	Name of the Financier	PRAVARA SAHAKARI BANK LTD
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none
FASTag ID:			

INSURED DECLARED VALUE (in Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
214216	0	0	0	0	214216

SCHEDULE OF PREMIUM

Own Damage		Liability		
Basic OD Premium	2604	Basic TP Premium		2094
(-) (#) Total NCB Discount(25%)	651	(+) Legal Liability Premium for Paid Driver(0)		50
Calculated OD Premium	1954	(+) PA premium for UnNamed/Hirer/Pillion Persons(7)		350
Total OD Premium	1954	Calculated TP Premium		2494
Net Premium in Rs		Total TP Premium		2494
GST in Rs				4,448
Signature valid				800

Dated- 12/04/2021 and the stamp duty under the
Policy is Rs. -

Policy No.: 15180431230100000293. Document generated by 30622 at 2023/05/02 15:32:55.

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>.





Total Payable in Rs		
Total Payable in Rs(in words):	RUPEES FIVE THOUSAND TWO HUNDRED FORTY-EIGHT ONLY	
5,248		
GSTIN(Issuing Office)		
SAC	27AAACN4165C3ZP	
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. 7,50,000		
For individual covers (OD) in RS:214216	Compulsory excess in Rs:1000	
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
none	0	NM	NM

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 4,448
SGST	9	400
CGST	9	400
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 02/05/2023 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 16,22,7.

Important notice:

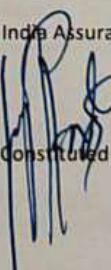
The insured is not indemnified, if, the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicles Act, 1988 is recoverable from the insured: see clause headed "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, 1988.

Date of Issue: 02/05/2023

For and on behalf of The New India Assurance Company Limited


Duly Constituted Attorney(s)



Policy No. : 15180431230100000293 Document generated by 39622 at 2023/05/02 15:32:55.
Regd. & Head Office: New India Assurance Bldg, 87 M.G. Road, Fort, Mumbai - 400 001, TOLL FREE No. 1 800 200 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>.

दि न्यू इंडिया एश्योरन्स कंपनी लि.

"भारत सरकार का उपक्रम" / "Government of India Undertaking"

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



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Commercial Vehicle Liability Only Policy

UIN Number - IRDAN190RP0004V01200203

Policy Number :15180431230200000176

POLICY ISSUING OFFICE:
RAHURI BRANCH 151804 (151804),
SITAPLAZA COMPLEX, , NAGAR MANMAD
ROAD , RAHURI,
MAHARASHTRA , 413705.
PHONE NUMBER:02426233069 /
02426233070
FAX NUMBER:02426233070 / NA
Email:nla.151804@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME:
M/S. Pravara Institute Of Research & Education, -
(2D11723547),
PHONE NUMBER: / /
LAND/FAX NUMBER:/
EMAIL:pirens@pravara.ren.nic.in /

CLAIM CONTACT:
PUNE CLAIM HUB (150001)
ADDRESS: 572/575, Shanta Commercial Complex,
Near Gokhale Hall, Sadashiv Peth, Laxmi Road, PUNE
411030 , , MAHARASHTRA , 411030.
PHONE NUMBER: 02024430697 /
MOBILE NUMBER:
Email: ch15@newindia.co.in

INSURED DETAILS

Insured's Name	MR VITTHALRAO VIKHE PATIL MEMORIAL HOSPITAL AND MEDICAL COLL EGE	Customer ID	POA4606184 (PAN No :NA)
Insured's Address	A/P MIDC NR.GOVT MILK DAIRYDIST.: AHMADNAGAR,,TAL-AHMEDNAGAR,DIST - AHMEDNAGAR, AHMEDNAGAR M I D C ,MAHARASHTRA, 414111	Contact Number	/ /
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	19/04/2023 12:00:01 AM to 18/04/2024 11:59:59 PM	Receipt Number	15180481230000000225 - 18/04/23
Previous Insurer	THE NEW INDIA ASSURANCE COMPANY LTD.	Previous Policy Number	15180431220200000138

VEHICLE DETAILS

Geographical Area / Zone:	India/C	Year of manufacture:	2001
Type of Commercial Vehicles:	C - Passenger Carrying	Sub Type:	C2-Four Wheeler(Carrying >6)
Name of the Financier:		Chassis no./Engine no.:	708588/837389
Type of fuel:	Diesel	Cubic capacity (cc):	3500
Type of body:	Bus	Gross Vehicle Weight (GVW):	0
Make/Model:	TATA MOTOR/1510	Registration no.	MH-17-C-9068
Seating capacity including Driver:	49	Variant:	49 Seater
Automobile Association membership:	Consolidated Stamps fees paid by DD of Rs.300000/- vide challan No. MH000269106202122M Dt.07/04/2021 Total Rs. 300000/- vide Receipt No. 0000204047202122		
Cover Note No/Cover Note Issue Date:	/	Name of registration authority:	Shrirampur
FASTag ID:	Dated- 12/04/2021 and the stamp duty under the Policy is Rs. -		

INSURED DECLARED VALUE (Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
0	0	N/A	N/A	N/A	0

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium	0	Basic TP Premium (+Add Legal liability to passengers (+Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000) (+LL to paid driver conductor cleaner/Employee/Opnr	14343 41219 275 100

Signature valid

Digital signature
by ARGAVATEE
PAVAN
Date: 13.04.18
15:23:24 IST

Policy No. : 15180431230200000176 Document generated by 38622 at 2023/04/18 15:23:23.

Regd. & Head Office: New India Assurance Bldg, 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 201 1122

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 the redressal mechanism, you may also approach Insurance Ombudsman. For details of our office addresses and address of office of Insurance Ombudsman, please visit <http://www.newindia.co.in/portal/InsuranceOmbudsman>.

प्रधान कार्यालय : दि न्यू इंडिया एश्योरन्स बिल्डिंग, 87, महात्मा गांधी मार्ग, फोर्ट, मुंबई - 400 001. फोन : 022 - 22708100 / 22708400.

CIN NO.L66000MH1919GOI000526 - GSTIN No. 27AACN4165C3ZP - IRDA REGN.NO.190.

Page 1 of 3



Calculated OD Premium	0	Calculated TP Premium	55937			
Total OD Premium (Rs)	0	Total TP Premium (Rs)	55937			
Net Premium (Rs)			55,937			
GST (Rs)			10,068			
Total Payable (Rs)			66,005			
Total Payable in Rs(in words):	RUPEES SIXTY-SIX THOUSAND FIVE 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) Organized racing b) 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:0	Compulsory excess in Rs:NA					
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
NA	NA	NA	NA

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 55,937
SGST	9	5034
CGST	9	5034
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 18/04/2023
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 21,40.

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 1 lakh 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.

Date of Issue: 18/04/2023

Issued on behalf of The New India Assurance Company Limited



Policy No. : 15180431230200000178 Document generated by 98922 at 2023/04/18 15:23:23.

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>.

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Administration	Medical College
Secretary General	1444
Director (Technical)	333
Deputy Director	333
B.A. Admin. Officer	333
Principal	272
PRO.	272
Reception	272

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



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 : 15180423P0000248

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C



Policy No. : 15180431230200000178 Document generated by 38632 at 2023/04/18 15:23:23.
Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001, TOLL FREE No. 1 800 208 1415.

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

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>.



MH-16
CY-8526



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Standalone Motor Own Damage Policy for Private car - Enhanced Covers

UIN Number - IRDAN190RP0001V01201920

Policy Number :15180431232000001233

POLICY ISSUING OFFICE:
RAHURI BRANCH 151804 (151804),
SITAPLAZA COMPLEX, , NAGAR MANMAD
ROAD , RAHURI ,
MAHARASHTRA , 413705.
PHONE NUMBER:02426233069 /
02426233070
FAX NUMBER:02426233070 / NA
Email:nia.151804@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME:M/S. Pravara Institute Of Research &
Education, - (2D11723547),
PHONE NUMBER: //
LAND/FAX NUMBER://
EMAIL:plrens@pravara.ren.nic.in /

CLAIM CONTACT:
PUNE CLAIM HUB (150001)
ADDRESS: 572/575, Shanta Commercial Complex,
Near Gokhale Hall, Sadashiv Peth, Laxmi Road, PUNE
411030 , , MAHARASHTRA , 411030.
PHONE NUMBER: 02024430697 /
MOBILE NUMBER:
Email: ch15@newindia.co.in

INSURED DETAILS

Insured Name	DR VVP F'S MEDICAL COLLEGE&HOSPITAL	Customer ID	POA6268232 (PAN No :NA)
Insured Address	A/P-VADGAON GUPTA AHMEDNAGAR,TAL-AHMEDNAGAR,DIST-AHMEDNAGAR, AHMEDNAGAR M I D C ,MAHARASHTRA, 414111	Contact Number	//
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	26/08/2023 12:00:01 AM to 25/08/2024 11:59:59 PM	Receipt Number	15180481230000001909 - 14/08/23
Previous Insurer	CHOLAMANDALAM MS GENERAL INSURANCE CO. LTD.	Previous Policy Number	TCH97638680
Related Bundled/Liability Policy No.:	TCH97638680	Bundled/Liability Policy period:	26/08/2022 to 25/08/2025
Bundled/Liability Insurer:	CHOLAMANDALAM MS GENERAL INSURANCE CO. LTD.		

VEHICLE DETAILS

Registration Number	MH-16-CY-8526	Chassis no./Engine Number	MBJJB8EM3016283240822 /2GDA675395
Make / Model	TOYOTA/INNOVA CRYSTA	Variant:	INNOVA CRYSTA 2.4 G MT
Year of manufacture	2022	Type of body / Type of Fuel	Station Wagon/Wagon/Diesel
Colour	S WHITE	Cubic capacity(cc) /Wattage(kW):	2393cc
Seating capacity including Driver	7	Name of registration authority	Ahmednagar
Geographical Area / Zone	India	Name of the Financier	THE SHAMRAO VITHAL CO OP BANK LTD
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none
FASTag ID:			

INSURED DECLARED VALUE (IN Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
1595200	0	0	0	0	1595200

Cover Description	Cover Opted	Cover Description	Cover Opted	Cover Description	Cover Opted
Additional Towing Charges	No	Engine Protection Cover	Yes	Return to Invoice Cover	Yes
No Claim Bonus Protection Cover	No	Loss of Contents Cover	No	Road Tax	No
High Value PA Cover	No	Personal Belongings Cover	Yes	Consumable Items Cover	Yes
Nil Depreciation	Yes	Roadside Assistance Cover	No	Key Protect Cover	Yes
Tyre and Alloy Cover	Yes	Hybrid Protect Cover	No		

Signature valid

Digital signed
by GANESH
PAN: 150221
Date: 02/08/14
15:02:21 IST

Policy No. : 15180431232000001233 Document generated by 35568 at 2023/08/14 15:02:26.
Regd. & Head Office: New India Assurance Bldg, 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 200 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 the above 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>.

Consolidated Stamps fees paid by DD of Rs.30000/-
vide challan No. MH000269106202122M Dt.07/04/2021
Total Rs. 30000/- vide Receipt No. 0000204047202122
Dated- 12/04/2021 and the stamp duty under the
Policy is Rs. -





Return To Invoice Cover Details:			
Registration Charges	3150	Total Ex-Showroom Price	1994000
First Year Insurance Premium	98439	Road Tax Amount	279160
Total SI for Return to Invoice	2374749		

SCHEDULE OF PREMIUM

Own Damage	
Basic OD Premium	15998
(-)(#)Total NCB Discount(20%)	3199.65
(+)Consumable Items Cover Premium	2233.28
(+)Engine Protect Cover Premium	3940.14
(+)Key Protect Cover Premium	250
(+)Personal Belongings Cover Premium	500
(+)Premium for nil depreciation cover	7018.88
(+)Return to Invoice Cover Premium	3419.64
(+)Tyre and Alloy Cover Premium	3190.4
Calculated OD Premium	33351
Total OD Premium in Rs	33351
Net Premium in Rs	33,351
GST in Rs	6,004
Total Payable in Rs	39,355
Total Payable in Rs(in words):	RUPEES THIRTY-NINE THOUSAND THREE HUNDRED FIFTY-FIVE ONLY
GSTIN(Issuing Office)	27AACN4165C3ZP
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: Coverage is only for Own Damage of the vehicle and does not cover third party property damage/personal injury/TP death and any other Legal Liability.	
For individual covers (OD) in RS:1595200	Compulsory excess in Rs:2000
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.	

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 33,351
SGST	9	3002
CGST	9	3002
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 14/08/2023
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 ODWTOTADON/ODWTHADDON policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 16,7.

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.

Policy No. : 15180431232000001233 Document generated by 36568 at 2023/08/14 16:02:26.

Regd. & Head Office: New India Assurance Bldg., #7 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 208 1410.

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>.





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.

Date of Issue: 14/08/2023

For and on behalf of The New India Assurance Company Limited

Duly Constituted Attorney(s)

Standalone Motor Own Damage Policy for Private car - Enhanced Covers
(Endorsement Wording for Add on cover - NIL Depreciation)
UIN Number - IRDAN190RP0001V01201920/A0003V01201920

ATTACHED TO AND FORMING PART OF POLICY NO. 15180431232000001233 Additional Premium: Rs. 7018.88

In consideration of payment of an additional premium by the Insured, it is hereby agreed and declared that notwithstanding anything to the contrary contained in the Policy, the Company hereby undertakes to indemnify:

1. Depreciation on replacement of parts including tyres, tubes, rubber/plastic for Partial Loss Claims.
2. Midterm inclusion of cover is not permitted.
3. Total Loss and Constructive Total Loss will be settled on the basis of IDV.

Subject otherwise to the terms, exceptions, conditions and limitations of this Policy.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 14/08/2023

Duly Constituted Attorney(s)

Standalone Motor Own Damage Policy for Private car - Enhanced Covers (Endorsement Wording for Add on cover - Return to Invoice cover)

UIN Number - IRDAN190RP0001V01201920/A0005V01201920

ATTACHED TO AND FORMING PART OF POLICY NO. 15180431232000001233 Additional Premium: Rs.3419.64

In consideration of payment of an additional premium by the Insured, it is hereby agreed and declared that notwithstanding anything to the contrary contained in the Policy, the Company hereby undertakes to pay the On Road Price of the Insured Car, in the Occurrence of any Constructive Total Loss/Total Loss /Theft Claim.

On Road Price Includes:

1. Total Ex-Showroom Price- It includes Current Ex-Showroom Price as on Date of loss and any other Accessories Price paid by Insured at the time of purchasing the Car and included in IDV.
2. Road Tax- Road Tax amount paid to RTO by Insured for the Car.
3. Registration Charges - Registration charges paid by Insured to RTO for the Car.
4. First Year Insurance Premium Full First Year insurance premium paid for the Car.

This cover is available for private cars up to the age of 3 years only.

Subject otherwise to the terms, exceptions, conditions and limitations of this Policy.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 14/08/2023

Duly Constituted Attorney(s)

Standalone Motor Own Damage Policy for Private car - Enhanced Covers
(Endorsement Wording for Add on cover Key Protect)

UIN Number - IRDAN190RP0001V01201920/A0011V01201920

PRIVATE CAR PACKAGE POLICY ENHANCED COVERS ENDORSEMENT ATTACHED TO AND FORMING PART OF POLICY NO.

15180431232000001233 Additional Premium: Rs. 250

In consideration of payment of an additional premium by the Insured, it is hereby agreed and declared that notwithstanding anything to the contrary contained in the Policy, the Company hereby undertakes to indemnify the Insured the cost incurred towards repairing/ replacing the vehicle keys which are lost, misplaced, stolen or the vehicle lock is broken at the time of burglary or attempted burglary, theft or attempted theft, damage to the keys arising out of an accident by a new set of lock/ lock set (including lock mechanism) & keys including locksmith charges during the Policy Period.

Terms and Conditions:

- i) Only one claim will be payable during the policy period.
- ii) A claim resulting from burglary or theft is supported by an acknowledgement from the Police Authority.
- iii) The replaced keys/ lock/ lockset should be of same nature and kind as the one for which the claim is being made.
- iv) Replacement of key(s) would be done only for broken or damaged keys.
- v) In case of theft/burglary/misplace/loss of key(s) , entire set comprising of key, lock and lockset would be replaced.

Exclusions:

- a. Any damage/ loss to keys/lock/lockset due to malicious activities, any deliberate or criminal act of the Insured or his representatives.
- b. Any loss or damage to the lock or lockset prior to the loss or theft of keys.
- c. Any loss or damage covered under the manufacturer's warranty.
- d. Any loss or destruction of, or damage to, any part of the Insured's vehicle other than the keys of the Insured's vehicle, its associated

Policy No. : 15180431232000001233 Document generated by 36568 at 2023/08/14 16:02:28.
Regd. & Head Office: New India Assurance Bldg., #7 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 208 1415.

Give your valuable feedback on <http://www.newindia.co.in/portal/policy/feedbackGen>.

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>.



MH-16-CD-8998

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



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Standalone Motor Own Damage Policy for Private car - Enhanced Covers

UIN Number - IRDAN190RP0001V01201920

Policy Number :1518043123200000933

POLICY ISSUING OFFICE:
RAHURI BRANCH 151804 (151804),
SITAPLAZA COMPLEX, , NAGAR MANMAD
ROAD , RAHURI ,
MAHARASHTRA , 413705.
PHONE NUMBER:02426233069 /
02426233070
FAX NUMBER:02426233070 / NA
Email:nia.151804@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME:M/S. Pravara Institute Of Research &
Education, - (2D11723547),
PHONE NUMBER: / /
LAND/FAX NUMBER:/
EMAIL:pirens@pravara.ren.nic.in /

CLAIM CONTACT:
PUNE CLAIM HUB (150001)
ADDRESS: 572/575, Shanta Commercial Complex,
Near Gokhale Hall, Sadashiv Peth, Laxmi Road, PUNE
411030, , MAHARASHTRA , 411030.
PHONE NUMBER: 02024430697 /
MOBILE NUMBER:
Email: ch15@newindia.co.in

INSURED DETAILS

Insured Name	DR VVP F'S MEDICAL COLLEGE	Customer ID	POA6268232 (PAN No :NA)
Insured Address	A/P-VADGAON GUPTA AHMEDNAGAR,TAL-AHMEDNAGAR,DIST-AHMEDNAGAR, AHMEDNAGAR M I D C ,MAHARASHTRA, 414111	Contact Number	//
		Email	
		GSTIN	NA

POLICY DETAILS

Period of cover	14/08/2023 12:00:01 AM to 13/08/2024 11:59:59 PM	Receipt Number	15180481230000001471 - 11/07/23
Previous Insurer	BAJAJ ALLIANZ GENERAL INSURANCE CO. LTD.	Previous Policy Number	OG239910182500038310
Related Bundled/Liability Policy No.:	OG239910182500038310	Bundled/Liability Policy period:	14/08/2022 to 13/08/2025
Bundled/Liability Insurer:	BAJAJ ALLIANZ GENERAL INSURANCE CO. LTD.		

VEHICLE DETAILS

Registration Number	MH-16-CD-8998	Chassis no./Engine Number	MAT635018NPGS7580/TZ230X56FJ22055244
Make / Model	TATA MOTOR/NEXON EV	Variant:	NEXON EV 2.0 XZ+LUX
Year of manufacture	2022	Type of body / Type of Fuel	Saloon/BATTERY
Colour	INTNL DYNGRY	Cubic capacity(cc) /Wattage(kW):	105kW
Seating capacity including Driver	5	Name of registration authority	Ahmednagar
Geographical Area / Zone	India	Name of the Financier	SVC CO OP BANK LTD
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none
FASTag ID:			

INSURED DECLARED VALUE (IN Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel kit	Total Value
1602080	0	0	0	0	1602080

Cover Description	Cover Opted	Cover Description	Cover Opted	Cover Description	Cover Opted
Additional Towing Charges	No	Engine Protection Cover	No	Return to Invoice Cover	No
No Claim Bonus Protection Cover	No	Loss of Contents Cover	No	Road Tax	No
High Value PA Cover	No	Personal Belongings Cover	No	Consumable Items Cover	No
Nil Depreciation	Yes	Roadside Assistance Cover	No	Key Protect Cover	No
Tyre and Alloy Cover	No				

SCHEDULE OF PREMIUM

Signature valid	Stamp fees paid by DD or RTGS
Digitally signed by ANGATI YEE PANDEY	vide challan No. MH000269106202122M DT.07/04/2021
Date 20/07/11 15:34:09 IST	Policy No. 1518043123200000933 Document generated by 38622 at 2023/07/11 15:34:08.
POLICY IS ISSUED	Total Rs. 30000/- vide Challan No. MH000269106202122M DT.07/04/2021 Regd. & Head Office: New India Assurance Bldg. 87 M.G. Road, Fort, Mumbai - 400 001, TOLL FREE No. 1 800 209 1415.
	Dated- 12/04/2021 Give your valuable feedback on http://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, you may approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.





Own Damage	
Basic OD Premium	16067
(-) (#) Total NCB Discount (20%)	3213.45
(+) Premium for nil depreciation cover	8811.44
Calculated OD Premium	21666
Total OD Premium in Rs	21666
Net Premium in Rs	21,666
GST in Rs	3,900
Total Payable in Rs	25,566
Total Payable in Rs (in words):	RUPEES TWENTY-FIVE THOUSAND FIVE HUNDRED SIXTY-SIX ONLY
GSTIN (Issuing Office)	27AACN4165C3ZP
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: Coverage is only for Own Damage of the vehicle and does not cover third party property damage/personal injury/TP death and any other Legal Liability.	
For individual covers (OD) in Rs: 1602080	Compulsory excess in Rs: 1000
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.	

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 21,666
SGST	9	1950
CGST	9	1950
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 11/07/2023
WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED AB INITIO
 This policy is subject to the Terms, conditions and exceptions applicable to ODWTOTADON/ODWTHADDON policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 16,7.

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 1 lakh 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

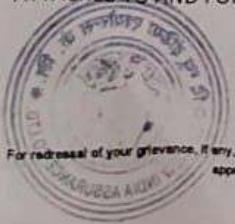
Date of Issue: 11/07/2023

Duly Constituted Attorney(s)

Standalone Motor Own Damage Policy for Private car - Enhanced Covers
 (Endorsement Wording for Add on cover - NIL Depreciation)
 UIN Number - IRDAN190RPO001V01201920/A0003V01201920



ATTACHED TO AND FORMING PART OF POLICY NO. 1518043123200000933 Additional Premium: Rs. 8811.44



Policy No. : 1518043123200000933 Document generated by 38622 at 2023/07/11 15:34:08.
 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>.



In consideration of payment of an additional premium by the Insured, it is hereby agreed and declared that notwithstanding anything to the contrary contained in the Policy, the Company hereby undertakes to indemnify:

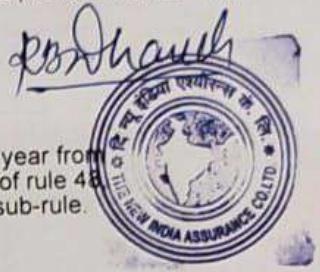
1. Depreciation on replacement of parts including tyres, tubes, rubber/plastic for Partial Loss Claims.
2. Midterm inclusion of cover is not permitted.
3. Total Loss and Constructive Total Loss will be settled on the basis of IDV.

Subject otherwise to the terms, exceptions, conditions and limitations of this Policy.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 11/07/2023

Duly Constituted Attorney(s)

R.D. Shaukh

R.D. SHAUKH
THE NEW INDIA ASSURANCE CO. LTD.

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 : 15180423P0001733

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C



GST (Rs)	10272
Total Payable (Rs)	67344
Total Payable in Rs(in words):	RUPEES SIXTY-SEVEN THOUSAND THREE HUNDRED FORTY-FOUR 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) Organized racing b) 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:0	Compulsory excess in Rs:NA
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 57072.00
SGST	9	5136
CGST	9	5136
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 19/04/2022
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 21,40.

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: 19/04/2022

Duly Constituted Attorney(s)





Total OD Premium (Rs)	4693	Total TP Premium (Rs)	7257
Net Premium (Rs)			11950
GST (Rs)			2152
Total Payable (Rs)			14102
Total Payable in Rs(in words):	RUPEES FOURTEEN THOUSAND ONE HUNDRED TWO ONLY		
GSTIN(Issuing Office)			
SAC	27AACN4165C3ZP		
	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 of 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:520545		Compulsory excess in Rs:2975	
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	1	none	none	none

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
NA	NA	N	N

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 11950.00
SGST	9	1076
CGST	9	1076
IGST	0	0

In witness where of this policy has been signed at RAHURI BRANCH 151804 on this 09/02/2022
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 21,40.

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.

Date of Issue: 09/02/2022

For and on behalf of The New India Assurance Company Limited

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE
PRIVATE CAR BUNDLED POLICY (IRDAN123RP0018V01201819) ISSUED AT: 14:21 HOURS ON 26-AUG-2022

NEW

POLICY DETAILS		PROPOSAL NUMBER AND DATE		PERIOD OF OWN DAMAGE (OD) COVER		PERIOD OF LIABILITY (TP) COVER	
POLICY NUMBER TCM-57638680	PROPOSAL NUMBER AND DATE P16580723 26-AUG-2022	(14:21 HOURS) 26-AUG-2022 To Midnight of 25-AUG-2023		(14:21 HOURS) 26-AUG-2022 To Midnight of 25-AUG-2025			
PREVIOUS POLICY DETAILS		OD POLICY NUMBER		PERIOD OF OD POLICY		TP POLICY INSURER	PERIOD OF TP POLICY
OD POLICY INSURER	OD POLICY NUMBER	To				TP POLICY NUMBER	To
INSURED DETAILS							
NAME THE DR. VITTHALRAO VIKHEPATIL FS. MED. COLLEGE & HOSPITAL		GSTIN 27AAAATP2304C1Z5	PANCARD NUMBER AAATP2304C	UIN 0		CORPORATE	
ADDRESS OPP. GOVT. MILK DAIRY, VADGAON GUPTA M.L.D.C., AHMEDNAGAR, MAHARASHTRA-414111		NOMINEE NAME NOMINEE AGE NOMINEE RELATIONSHIP		MOBILE NUMBER 85****0231		DATE OF BIRTH pure****@redifmail.com	
EMAIL ID							
VEHICLE DETAILS							
VARIANT INNOVA CRYSTA 2.4 G PACKAGE X 7 SEATER XO		MAKE/MODEL TOYOTA / INNOVA	CHASSIS NUMBER MBJJB8EM301828324	ENGINE/ MOTOR NUMBER 2GDA675395	YEAR OF MANUFACTURE 2022		
HYPOTHECATION/LEASE THE SHAMRAO VITTHAL COOPERATIVE BANK LTD AHMEDNAGAR		INVOICE DATE 26-AUG-2022	CC / KW 2393	SEATING CAPACITY 7	FUEL TYPE DIESEL		
GEOGRAPHICAL AREA EXT.		GEOGRAPHICAL AREA INDIA	RTO CITY AHMEDNAGAR	REGISTRATION NUMBER	VEHICLE USAGE		
INSURED DECLARED VALUE (Rs.)							
VEHICLE 1894300	NON ELECTRICAL ACCESSORIES 0	ELECTRICAL ACCESSORIES 0	CNG / LPG 0	TOTAL 1894300			

SCHEDULE OF PREMIUM

A. OWN DAMAGE (OD) SECTION	AMOUNT (Rs.)	B. LIABILITY SECTION	AMOUNT (Rs.)
BASIC PREMIUM		BASIC PREMIUM	
VEHICLE	31664	THIRD PARTY LIABILITY (INCLUDING TPPD)	24596
NON ELECTRICAL ACCESSORIES (IMT-24)	0	GEOGRAPHICAL AREA EXT. (IMT-1)	0
ELECTRICAL ACCESSORIES (IMT-24)	0	BI FUEL KIT	0
BI FUEL KIT (IMT-25)	0	SUB TOTAL (THIRD PARTY LIABILITY)	24596
SUB TOTAL (BASIC PREMIUM)	31664	PERSONAL ACCIDENT (PA) COVER	
GEOGRAPHICAL AREA EXT (IMT-1)	0	COMPULSORY PA COVER FOR OWNER DRIVER (IMT-15) Rs. 15 LAC	0
IMT 23	0	PA COVER FOR PAID DRIVER (IMT-17) Rs. 2 LAC	300
SUB TOTAL	31664	PA COVER (20000 FOR 7 UNNAMED PERSONS) (IMT-16)	2100
DISCOUNTS		SUB TOTAL (PA COVER)	2400
VOLUNTARY DEDUCTIBLE (IMT-22A)	0	LEGAL LIABILITY	
ANTI THEFT DEVICE (IMT-10)	0	PAID DRIVER (IMT-28)	150
AA MEMBERSHIP (IMT-8)	0	EMPLOYEE (FOR 7 PERSON) (IMT-29)	1050
HANDICAPPED DISCOUNT (IMT-12)	0	NON-FARE PAYING PASSENGER (IMT-37)	0
NCB (0%)	0	UNNAMED PASSENGER (0) ON AMBULANCE/HEARSE (IMT- 46)	0
SUB TOTAL (DISCOUNTS)	0	SUB TOTAL (LEGAL LIABILITY)	1200
ADD-ONS	23563	NET LIABILITY PREMIUM (B)	28196
		TOTAL PREMIUM (A+B)	83423
THEFT AND CONVERSION RISK (IMT-43)	0	CGST (9%)	7508
INDEMNITY TO HIRER (IMT-44)	0	SGST (9%)	7508
		IGST (18%)	0
		UTGST (18%)	0
NET OWN DAMAGE PREMIUM (A)	55227	GROSS PREMIUM PAID	98439

ADD-ON COVERS OPTED IN THE POLICY

CONSUMABLES	NIL DEPRECIATION	ENGINE PROTECT
TURN TO INVOICE	TYRE AND ALLOY	
KEY PROTECT	PERSONAL BELONGINGS	
INCONVENIENCE		

The CPA cover is not opted : The insured vehicle is not owned by an individual.

Note:- 1. Issue of Policy is subject to realisation of cheque if premium is paid by cheque. 2. Consolidated stamp duty paid to state exchequer. 3. The Policy is subject to a compulsory deductible of Rs. 2000 (IMT-22) and Voluntary Deductible of Rs. 0.

PREMIUM PAYMENT DETAILS :

INVOICE NUMBER : TCIU97638680	SAC CODE : 997134	DESCRIPTION OF SERVICE : GENERAL INSURANCE SERVICE
Warranty: Warranted that the insured named herein/owner of the vehicle holds a valid pollution under control (PUC) certificate and/or valid fitness certificate, as applicable, on the date of commencement of the policy and undertakes to renew and maintain a valid and effective PUC and/or fitness certificate, as applicable, during the subsistence of the policy. Further, the company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.		
Limitations As To Use: Use only for social, domestic and pleasure purposes and for the insured's business. The policy does not cover the use for: (1) hire or reward (2) carriage of goods (other than samples or personal luggage) (3) organised racing (4) pace making (5) speed testing (6) reliability trials (7) any purpose in connection with motor trade.		
Driver's Clause: Any person including the insured: provided that the 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 learners 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 Clause: 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 vehicle act 1988, under section II-1 (ii) of the policy damage to third party property is rs. 7.5 lakhs.		
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 reasons of wider terms appearing in the certificate in order to comply with the motor vehicle act, 1988 is recoverable from the insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation, English version will hold good.		
Grievance Clause: For resolution of any query or grievance, insured may contact the respective branch office of the company or may call at (1800-200-5544) or may write an email at (customercare@cholams.murugappa.com). In case the insured is not satisfied with the response of the office, insured may contact the grievance officer of the company at (ramayay@cholams.murugappa.com). In the event of unsatisfactory response from the grievance office, he/she may, subject to vested jurisdiction, approach the insurance ombudsman for the redressal of grievance. Details of insurance ombudsman offices are available at IRDAI website: www.irdai.gov.in, or on the website of general insurance council: www.generalinsurancecouncil.org.in or on the company website (www.cholainsurance.com).		
I/W: 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 M.V. Act, 1988.		
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.		

BROKER NAME : Toyota Tsusho Insurance Broker India Pvt Ltd

SCAN QR CODE TO VIEW THE POLICY

For & On Behalf of
Cholamandalam MS General Insurance Co. Ltd.

Broker Code / IRDAI Composite Licence No. : 381 (Valid up to 01/09/2023).
CIN: U66010KA2008PTC045231
Email ID : box@tibi.co.in
Contact No. : 080-40449900

MIS Code : TTIB/T/MH/WAS1170A
MIS Name : WASAN BROTHERS PVT LTD
Designated Person Name : VIJAYANT SHANTILAL DUDHAWAT



For Insurance Renewal Contact
Sachin-9852330111/Supriya-866989376
Wasan Toyota Insurance Dept.
Kedgaon Industrial, A'Nagar-414005
Ph.No.(0241)2341234
Authorised Signatory

FOR RENEWAL / CLAIMS ASSISTANCE

PLEASE CONTACT INS.CO. & BROKER C/O WASAN TOYOTA PLOT NO 85 & 86, SURVEY NO 71 TO 76, KEDGAON INDUSTRIAL ESTATE, NAGAR-PUNE
ROAD, AHMEDNAGAR-MAHARASHTRA 414005, AHMEDNAGAR, MAHARASHTRA, PIN CODE: 414005 CONTACT NO: +91-9822666569