दि न्यू इन्डिया एश्योरन्स कंपनी लि.

THE NEW INDIA ASSURANCE CO. PTD 34 54 (Government of India Undertaking)





JANATA PERSONAL ACCIDENT (INDIVIDUAL) INSURANCE POLICY (IRDA/NL-HLT/NIA/P-P/V.1/55/14-15)

Insured's Name	:	DASTAGIR FAKIR PATHAN			
	Insu	red's Details		Issuin	g Office Details
Customer ID	:	PO66652946	Office Code		Manchar (151611)
Address		A/P. PIMPALGAON KHADAKI, TAL. AMBEGAON, DIST. PUNE MANCHAR ,MAHARASHTRA, 410503	Address	:	Trimurti Complex,A Wing, 1st floor, Shop No 6, Pune Nasik Highway, Manchar, Tal Ambegaon, Dist Pune
Phone No		8657864565	Phone No		02133-223047
E-mail/Fax	:	1	E-mail/Fax		
PAN No	:		S.Tax Regn. No		nia.151611@newindia.co.in / AAACN4165CST178
GSTIN/UIN	:	NA / NA	GSTIN		27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

		Poli	cy Details		XX			
Policy Number	:	15161147182400000195	Business Source Code					
Period of Insurance	:	From:01/02/2019 03:01:29 PM To: 31/01/2020 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF		Mr. DIRECT_151611 MANCHAR - (DI00001420)			
Date of Proposal	:	01-Feb-19	Agent/Bancassurance	:	Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHIL HANUMANT TEMGIRE (S100156800			
Prev. Policy no.	:		Phone No	:	9623857257 / NA			
Client Type	:	Non-Corporate	E-mail/Fax	:	nikhiltemgire1@gmail.com, / / /			

Premium	GST	Total(RS)	Total Rupees (In Words)	Receipt No. & Date
60	0	60	RUPEES SIXTY ONLY	15161181180000000621 -
Stamp Duty	₹ 1			01/02/19

POLICY SCHEDULE (Individual)

Name of the Insured	Sex	Date of Birth / Age	Occupation	Status of Insured	Existing Disabilities	Nomine	Details	Sum Insured	Excess (%)
						Name	Relation		
DASTAGIR FAKIR PATHAN	Male	11/08/1993	Agricultural ist	Earning Member	NO	MRS. SHA HJAN PAT HAN	Mother	100000	0

Special Conditions: NA Subject to Janata Personal Accident Insurance Policy Clause as attached hereto. NOTE:

WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'.

Premium and GST Gensolidated Stamp fees paid by GRAS GRN No.MH005985987201819M Rate of Tax Amount in INR dtd. 17/09/2018 vide Cheque No. 786999 Premium ₹60 dtd. 13/09/2018 and the stamp duty under SGST 0 0 CGST this policy is Rs.1/-0 0 IGST

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 01st day of February,2019.

For and on behalf of The New India Assurance Company Limited

Signature yaild

Policy No.: 15161147182400000195 Document generated by 37531 at 01/02/2019 15:06:21 Hours.

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

Date 2019 02:9 For reduces also 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.

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





COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office

: Manchar (151611)

Address

: Trimurti Complex, A Wing, 1st floor, Shop No 6, Pune Nasik Highway, Manchar, Tal Ambegaon, Dist Pune

410503

Phone

: 02133-223047

Email

: nia.151611@newindia.co.in

Fax

Collection Number

15161181180000000621

Collection Date

: 01/02/2019

Business Source Code

PAN No of Payer

: DI00001420

Received with thanks from DASTAGIR FAKIR PATHAN.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code
1516114/182400000195	Bank-151611	60.00	9100.151611	BA00017303-151611-9100

Total = ₹ 60.00

Your Payment/Adjustment Details are as under

• Mode	Amount ₹	Cheque No.	Cheque Date		Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Cash	60.00	N.A.	N.A.	N.A.		N.A.	1516111810001175	N.A.

Total = ₹ 60.00

Utilization details of the Collected Amount

Premium		GST		Stamp Duty	Excess Amount
60.00		0.00		0.00	0
SI no.	Agency Code		Agency Nam	ne e	Department Code
1	NIAAG00087491		NIKHIL HANU	JMANT TEMGIRE	47

For The New India Assurance Company Limited Revenue Stamp



Date of Issue: 01/02/2019

Cashier's Initial

Authorized Signatory

Note -

1 Please note the Policy Number, Collection Number and date in all future correspondence.

2.NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

Tax Invoice No:

IRDA Registration Number: 190

Signature yalid

Policy No.: 15161147182400000195 Document generated by 37531 at 01/02/2019 15:06:21 Hours.

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