दि न्यू इन्डिया एश्योरन्स कंपनी लि.

THE NEW INDIA ASSURANCE COTTON 3400H (Government of India Undertaking)



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

Insured's Name	GANGARAM MARUTI TOTRE					
	Inst	red's Details		Issuin	g Office Details	
Customer ID	: PO66774546		Office Code	: Manchar (151611)		
Address	:	A/P. KURWANDI, 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 ,410503	
Phone No	:	7057422189	Phone No		02133-223047	
E-mail/Fax	:	/	E-mail/Fax		nia.151611@newindia.co.in /	
PAN No	1:		S.Tax Regn. No		AAACN4165CST178	
GSTIN/UIN		NA / NA	GSTIN		27AAACN4165C3ZP	
	:		SAC	į.	997139 (Other non-life insurance services excl RI)	

		Poli	cy Details				
Policy Number		15161147182400000223	Business Source Code				
Period of Insurance	:	From:06/02/2019 01:12:34 PM To: 05/02/2020 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF	:	Mr. DIRECT_151611 MANCHAR - (DI00001420)		
Date of Proposal	:	06-Feb-19	Agent/Bancassurance	1:	Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHII HANUMANT TEMGIRE (S100156800)		
Prev. Policy no.	_  :		Phone No		9623857257 / NA		
Client Type	:	Non-Corporate	E-mail/Fax	٠,	nikhiltemgire1@gmail.com, / / /		

Premium	GST	Total(RS)	Total Rupees (In Words)	Receipt No. & Date
60	0	60	RUPEES SIXTY ONLY	151611811800000000652 06/02/19
Stamp Duty	₹1			

POLICY SCHEDULE (Individual)

Name of the Insured	Sex	Date of Birth / Age	Occupation	Status of Insured	Existing Disabilities	Nominee	Details	Sum Insured	Excess (%)
						Name	Relation	1	-
GANGARAM MARUTI TOTRE	Male	02/06/1954	Agricultural ist	Earning Member	NO	MR. BHAS KAR TOTR	Son	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 Details insolidated Stamp fees paid by GRAS GRN No.MH005985987201819M Rate of Tax Amount in INR Premium dtd. 17/09/2018 vide Cheque No. 786999 ₹60 SGST dtd. 13/09/2018 and the stamp duty under 0 0 CGST 0 this policy is Rs. 1/-

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 06th day of February,2019.

For and on behalf of The New India Assurance Company Limited

Signature valid

Policy No.: 15161147182400000223 Document generated by 37531 at 06/02/2019 13:17:14 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 02.06

For redressasof 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 इन्डिया एश्योरन्स कंपनी लि.

THE NEW INDIA ASSURÂNCE COPLYD 34004" / "Government of India Undertaking" (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 Email

: 02133-223047

: nia.151611@newindia.co.in

Fax

Collection Number

: 15161181180000000652

Collection Date

: 06/02/2019

Business Source Code

: DI00001420

PAN No of Payer

Received with thanks from GANGARAM MARUTI TOTRE.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code
15161147182400000223	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.	1516111810001219	N.A.	

Total = ₹ 60.00

Utilization details of the Collected Amount

Premjum 60.00		GST		Stamp Duty	Excess Amount
		0.00	CANAL SECTION AND ASSESSMENT	0.00	0
SI no.	Agency Code		Agency Name		Department Code
1	NIAAG00087491		NIKHIL HANUMANT TEMGIRE		4/

For The New India Assurance Company Limited Revenue Stamp



Cashier's Initial

Authorized Signatory

Note

Date of Issue: 06/02/2019

 $1. {\sf Please} \ {\sf note} \ {\sf the Policy Number}, {\sf Collection Number} \ {\sf and date} \ {\sf in all future correspondence}. \ .$ 

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 valid

Policy No.: 15161147182400000223 Document generated by 37531 at 06/02/2019 13:17:14 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.