## दि न्यू इन्डिया एश्योरन्स कंपनी लि.

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





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

Insured's Name		ISAQ MUSA SHAIKH					
	Ins	ured's Details	Jacobs Office Barrier				
Customer ID	:	PO67621640	Office Code	Issuing Office Details			
Address		A/P. RAKSHEWADI, TAL. KHED,	KHED Address		: Manchar (151611)		
		DIST. PUNE  RAJ GURU NAGAR "MAHARASHTRA, 410505	Address	;	Trimurti Complex,A Wing, 1st floor, Shop No 6, Pune Nasik Highway, Manchar, Tal Ambegaon, Dist Pune ,410503		
Phone No	:	9011204549	Phone No		00400 0000 17		
E-mail/Fax		1			02133-223047		
PAN No			E-mail/Fax	:	nia.151611@newindia.co.in /		
GSTIN/UIN	- '		S.Tax Regn. No	:	AAACN4165CST178		
30711470114		NA / NA	GSTIN		27AAACN4165C3ZP		
	!		SAC	:	997139 (Other non-life insurance services excl RI)		

D 11 11 11		Poli	cy Details		
Policy Number	:	15161147182400000358	D. C.		
Period of Insurance	:	From:11/03/2019 01:00:16 PM To: 10/03/2020 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF		Mr. DIRECT_151611 MANCHAR - (DI00001420)
Date of Proposal	:	11-Mar-19	Agent/Bancassurance	1	Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHIL
Prev. Policy no.	:		Phone No	-	HANUMANT TEMGIRE (SI00156800)
Client Type		Non-Corporate			9623857257 / NA
		[Non-corporate	E-mail/Fax		nikhiltemgire1@gmail.com, / / /

Premium	GST	Total(RS)	Total Burner (f. 191	
60	0		Total Rupees (In Words)	Receipt No. & Date
**	U	60	RUPEES SIXTY ONLY	15161181180000000877 -
Stamp Duty	₹ 1			11/03/19

POLICY SCHEDULE (Individual)

Name of Sex the Insured		Date of Birth / Age	Occupation		Existing Disabilities	Nominee Details		Sum	Excess
ISAO MUSA	Male	0010014	2.55	7, 740		Name	Relation	insured	(%)
SHAIKH	Male	02/06/1970 , 48	Agricultural ist	Earning Member	NO	MRS. RUB INA SHAI	Spouse	100000	0

Special Conditions: NA

Subject to Janata Personal Accident Insurance Policy Clause as attached hereto.

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

Premium and GST Details

Consolidated Stamp fees paid GRAS GRN No.MHC059859872018 Rate of Tax

Amount in INR

Premium SGST

₹60

CGST

dtd. 17/09/2018 vide Cheque No. 786999 dtd. 13/09/2018 and the stamp duty under

0

this policy is Rs.1/-IGST

0 0

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 11th day of March,2019.

For and on behalf of 161 The New India Assurance Company Limited

Signature yalid

Policy No. : 15161147182400000358 Document generated by 37531 at 11/03/2019 13:06:31 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

(15.03.1) sales 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.

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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 MANCHAR

Phone

02133-223047

Email

nia.151611@newindia.co.in

Fax

Collection Number

: 15161181180000000877

Collection Date

: 11/03/2019

**Business Source Code** 

: DI00001420

PAN No of Payer

Received with thanks from ISAQ MUSA SHAIKH.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code
15161147182400000358	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.	1516111810001474	N.A.

Total = ₹ 60.00

Utilization details of the Collected Amount

Premium		GST		Stamp Duty	Excess Amount
60.00		0.00	24 1 1000	0.00	0
SI no.	Agency Code		Agency Name	or confl.	Department Code
1	NIAAG00087491		NIKHIL HANUN	MANT TEMGIRE	47

For The New India Assurance Company Limited

Revenue Stamp

Date of Issue: 11/03/2019

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: 15161118P0000658

IRDA Registration Number: 190

Signature valid

Policy No.: 15161147182400000358 Document generated by 37531 at 11/03/2019 13:06:31 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.