दि न्यू इन्डिया एश्योरन्स कंपनी लि.

THE NEW INDIA ASSURANCE СОРЕТЬ! ЗЧФН" / "Government of India Undertaking" (Government of India Undertaking)



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

Insured's Name	:	KIRAN DASHARATH KALE		-			
	Inst	ured's Details		laguis	000		
Customer ID	:	PO66743055	Office Code Mancher (151014)				
Address		A/P PETH TAL AMPECACAL DIGT			Manchar (151611)		
		A/P. PETH, TAL. AMBEGAON, DIST. PUNE PUNE ,MAHARASHTRA, 410512	Address	!	Trimurti Complex,A Wing, 1st floor, Shop No 6, Pune Nasik Highway, Manchar, Tal Ambegaon, Dist Pune .410503		
Phone No		9762456237	Phone No	-			
E-mail/Fax		/	The state of the s		02133-223047		
PAN No			E-mail/Fax	- :	nia.151611@newindia.co.in /		
			S.Tax Regn. No		AAACN4165CST178		
GSTIN/UIN		NA / NA	GSTIN		27AAACN4165C3ZP		
	- 1		SAC	1	997139 (Other non-life insurance services excl RI)		

		Poli	cy Details			
Policy Number	15161147182400000205	Business Source Code				
Period of Insurance	:	From:05/02/2019 02:23:02 PM To: 04/02/2020 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF	:	Mr. DIRECT_151611 MANCHAR - (DI00001420)	
Date of Proposal		05-Feb-19	Agent/Bancassurance	3	Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHIL HANUMANT TEMGIRE (SI00156800)	
Prev. Policy no.	1:		Phone No	1.	9623857257 / NA	
Client Type	:	Non-Corporate	E-mail/Fax	1:	nikhiltemgire1@gmail.com, / / /	

Premium	GST	Total(RS)	Total Rupage (In Manda)	T
60	0	·	Total Rupees (In Words)	Receipt No. & Date
00	0	60	RUPEES SIXTY ONLY	15161181180000000633 -
Stamp Duty	₹1			05/02/19

POLICY SCHEDULE (Individual)

Name of the Insured	Sex				Occupation	Status of Insured	Existing Disabilities	Nomine	e Details	Sum Insured	Excess (%)
ICID and	2007	-		West Till Is		Name	Relation	111111111111111111111111111111111111111	(70)		
KIRAN DASHARAT H KALE	Male	07/12/1991	Agricultural ist	Earning Member	NO	MR. BABA JI D KAL	Brother	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 Detalismsolidated Stamp fees paid by

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 05th day of February,2019.

For and on behalf of The New India Assurance Company Limited

Signature valid

Policy No.: 15161147182400000205 Document generated by 37531 at 05/02/2019 14:29:39 Hours.

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

Gate-Yors 02 - 5.
For redizes 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.

दि न्यू इन्डिया एश्योरन्स कंपनी लि.

ment of India Undertaking" THE NEW INDIA ASSURANCE COLLTEN 3400H (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 Email

: 02133-223047

Fav

nia.151611@newindia.co.in

Collection Number

15161181180000000633

Collection Date

05/02/2019

Business Source Code

DI00001420

PAN No of Payer

Received with thanks from KIRAN DASHARATH KALE.

The amount received/Adjusted is towards

Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code	
15161147182400000205	Bank-151611	60.00	9100.151611	BA00017303-151611-9100	

Total = ₹ 60.00

Your Payment/Adjustment Details are as under

- Mo	ode Am	ount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Referençe No.	Scroll/BG/A
Cash	60.00		N.A.	N.A.	N.A.	NI A	1516111010001100	PD Balance
Total	= ₹ 60.00					IN.A.	1516111810001198	N.A

Premium		GST		Stamp Duty	Excess Amount
60.00		0.00		0.00	0
SI no.	Agency Code	Agency Code		Agency Name	
1	NIAAG00087491			JMANT TEMGIRE	Department Code

For The New India Assurance Company Limited

Revenue Stamp



Date of Issue: 05/02/2019

Cashier's Initial

Authorized Signatory

Note

EPlease 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 valid

Policy No.: 15161147182400000205 Document generated by 37531 at 05/02/2019 14:29:39 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.