दि न्यू इन्डिया एश्योरन्स कंपनी लि.

THE NEW INDIA ASSURANCE CO. LTD. 34004 (Government of India Undertaking)





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

Insured's Name	;	KISAN ARJUN POKHARKAR			
Insured's Details		Issuing Office Details			
Customer ID	1:	PO65697226	Office Code	:	Manchar (151611)
Address	1	A/P. GHODEGAON, TAL. AMBEGAON, DIST. PUNE GODEGAON (PUNE) MAHARASHTRA, 412408	Address	:	Trimurti Complex,A Wing, 1st floor, Shop No 6, Pune Nasik Highway, Manchar, Tal Ambegaon, Dist Pune ,410503
Phone No	:	9975369266	Phone No	:	02133-223047
E-mail/Fax	:		E-mail/Fax	:	nia.151611@newindia.co.in /
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	NA / NA	GSTIN		27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

		Polic	cy Details		
Policy Number	1:	15161147182400000058	1147182400000058 Bus		
Period of Insurance	:,	From:27/12/2018 02:55:17 PM To: 26/12/2019 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF	:	Mr. DIRECT_151611 MANCHAR - (DI00001420)
Date of Proposal	:	27-Dec-18	Agent/Bancassurance	ŀ	Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHIL HANUMANT TEMGIRE (SI00156800)
Prev. Policy no.		arcs Laws II	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	15161181180000000448 27/12/18
Stamp Duty	₹1	The are	CHANGE THE THE CO.	

POLICY SCHEDULE (Individual)

Name of the insured	Sex	Date of Birth / Age	Occupation	Status of Insured	Existing Disabilities	Nominee Details		Sum Insured	Excess (%)
	on distribution				11-88	Name	Relation		
KISAN ARJUN POKHARKA	Male	22/09/1973 , 45	Agricultural ist	Earning Member	NO	NILAM K POKHARKA R	Spouse	100000	0

		December 1998
Special Conditions:	NA NA	
\	Accident Insurance Policy Clause as attached hereto.	

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

Premit	ım and	GST	Details	

Signature yalid

NOTE:

***	Rate of Tax	Amount in INR
Premium		₹60
SGST	0	0
CGST	0	0
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 27th day of December,2018. Stamp fees paid by

Consolidated Stamp fees paid by

GRAS GRN No.MH005985987201819M dtd. 17/09/2018 vide Cheque No. 786999

dtd. 13/09/2018 and the stamp duty under

this policy is Rs.1/-

Policy No.: 15161147182400000058 Document generated by 37531 at 27/12/2018 15:00:37 Hours.

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

dEdf 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. ЗЧФН" / "Government of India Undertaking" (Government of India Undertaking)

For and on behalf of The New India Assurance Company Limited

Date of Issue: 27/12/2018

Duly Constituted Attorney(s)

Mudrank _____ Dt. ____ consolidated Stamp Fees Paid by Pay Order Number _____ vide receipt

Stamp Duty under the Policy is ₹1/-.

Tax Invoice No:

IRDA Registration Number: 190

Policy No. : 15161147182400000058 Document generated by 37531 at 27/12/2018 15:00:37 Hours.

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

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://newindla.co.in.

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THE NEW INDIA ASSURANCE COPLID 3 ЗЧФН" / "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

Phone Email

: 02133-223047

Fax

: nia.151611@newindia.co.in

Collection Number

Collection Date

: 15161181180000000448 : 27/12/2018

Business Source Code

PAN No of Payer

: DI00001420

Received with thanks from KISAN ARJUN POKHARKAR.

The amount received/Adjusted is towards -

17102400000058	1 400 0	Amount₹	A/C Code		
Total = ₹ 60.00	400	60.00	9100.151611	Sub A/C Code BA00017303-151611-9100	
Your Payment/Adjustment Dataile				303-131611-9100	

Your Payment/Adjustment Details are as under -

Mode Amount ₹ Cheque Cheque Date Cash 60.00		10-1		
Total = ₹ 60.00 N.A. , N.A. N.A.	A FILE	AL A	mererence No.	PO Pala
Utilization details of the Collected America			16111810000956	N.A.

Itilization details of the Collecte Premium	GST	The state of the s			
0.00 Inc. Agents 6	0.00	and appear	Stamp Duty	True	
Agency Code NIAAG00087491		Agency Name	0.00	Exce	ss Amount
[MAAG00087491		NIKHIL HANUMA		Depart	ment Code

For The New India Assurance Company Limited Revenue Stamp



Cashier's Initial

Authorized Signatory

Note -

Date of Issue: 27/12/2018

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.: 15161147182400000058 Document generated by 37531 at 27/12/2018 15:00:37 Hours. 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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