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	:	MADHURI SAMPAT BOMBALE		A			
		ured's Details		lecuin	or Office Det II		
Customer ID	:	PO67618801	Office Code : Mancher (151614)				
Address		A/P. CHAVAN MALA, (PABAL ROAD),		- 1:	Manchar (151611)		
		TAL. KHED, 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	:	9689980409	Phone No		00400 000047		
E-mail/Fax					02133-223047		
PAN No			E-mail/Fax	:	nia.151611@newindia.co.in /		
			S.Tax Regn. No		AAACN4165CST178		
GSTIN/UIN		NA / NA	GSTIN		27AAACN4165C3ZP		
	·		SAC	1:	997139 (Other non-life insurance services excl RI)		

Policy Number		15161147182400000354	licy Details				
Period of Insurance			Bu	sine	ess Source Code		
•	1.	From:11/03/2019 12:23:37 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	:	Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHIL HANUMANT TEMGIRE (SI00156800)		
Prev. Policy no.	:		Phone No	1	COORDET TENGINE (SI00156800)		
Client Type		Non-Corporate			9623857257 / NA		
	1.	Non-Corporate	E-mail/Fax		nikhiltemgire1@gmail.com, / / /		

Premlum	GST	Total(RS)	Total Rupees (In Words)		
60	0	JISSE SHOWER CO.		Receipt No. & Date	
	0	60	RUPEES SIXTY ONLY	15161181180000000873 -	
Stamp Duty	₹ 1 '	CV2400009		11/03/19	

POLICY SCHEDULE (Individual)

Name of the Insured	Sex	Date of Birth / Age	members co	Status of	Existing	Nomine	e Details	Sum	
are mource		birui / Age		Insured	Disabilities		- Decails	Insured	Excess (%)
MADHURI	r .	-		1871	77 17 16 71	Name	Relation		1707
SAMPAT BOMBALE	Female	19/07/1997	Agricultural ist	Earning Member	NO	SAMPAT B OMBALE	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

Premium		Rate of Tax	Amount in INR
SGST			₹60
CGST		0	0
IGST	e	0	0
1031		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 The New India Assurance Company Limited India Assurance

Signature yalid

Policy No.: 15161147182400000354 Document generated by 37531 at 11/03/2019 12:31:57 Hours

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

abof 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

Address

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

,410503 MANCHAR

Phone Email

: 02133-223047

: nia.151611@newindia.co.in

Collection Number

: 15161181180000000873

Collection Date

: 11/03/2019

**Business Source Code** 

PAN No of Payer

: D100001420

Received with thanks from MADHURI SAMPAT BOMBALE.

The amount received/Adjusted is towards -

Policy No.	100			
	A/C Description	Amount₹	A/C Code	Sub A/C Code
15161147182400000354	Bank-151611	60.00	9100.151611	
Total = ₹ 60.00			3100.131011	BA00017303-151611-9100

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date		Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A
Cash	60.00	N.A.	N.A.	N A				PD Balance
Total = ₹	60.00	11.576.10	114.04.	IN.A.	A STATE OF THE STA	N.A.	1516111810001470	N.A.

Utilization details of the Collected Amount :

Premium 60.00		GST		Stamp Duty	Evene Amount
		0.00		0.00	Excess Amount
SI no.	Agency Code		Agency Name		
1 NIAAG00087491		NIKHIL HANUMANT TEMGIRE		Department Code	

For The New India Assurance Company Limited

Revenue Stamp

Cashier's Initial

Authorized Signatory

Note

Date of Issue: 11/03/2019

 $1. {\sf Please}$  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: 15161118P0000654

IRDA Registration Number: 190

Signature valid

Policy No.: 15161147182400000354 Document generated by 37531 at 11/03/2019 12:31:57 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.