दि न्यू इन्डिया एश्योरन्स कंपनी लि.

THE NEW INDIA ASSURANCE CO: ETD. OT 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		NAGESH KUNDLIK SHEWALE				
	Ins	ured's Details	Issuing Office Details			
Customer ID : PO66348747			Office Code : Manchar (151611)			
Address	:	A/P. VALATI, 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	:	9096922180	Phone No	- T.	02133-223047	
E-mail/Fax	;	/	E-mail/Fax	1,	nia.151611@newindia.co.in /	
PAN No.	:		S.Tax Regn. No		AAACN4165CST178	
GSTIN/UIN	<u>:</u>	NA / NA	GSTIN		27AAACN4165C3ZP	
	:		SAC	:	997139 (Other non-life insurance services excl RI)	

		Poli	cy Details				
Policy Number		15161147182400000151	Business Source Code				
Period of Insurance	;	From:21/01/2019 03:36:16 PM To: 20/01/2020 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF	71.3	Mr DIRECT 151611 MANCHAR - (DI00001420)		
Date of Proposal	:	21-Jan-19	Agent/Bancassurance	:	Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHIL HANUMANT TEMGIRE (SI00156800)		
Prev. Policy no.	_  :	ef and the state	Phone No		9623857257 / NA		
Client Type	_1:	Non-Corporate	E-mail/Fax	1:	nikhiltemgire1@gmail.com, / / /		

Premium	GST	Total(RS)	Total Rupees (In Words)	Receipt No. & Date
60	0	60	RUPEES SIXTY ONLY	15161181180000000566
Stamp Duty	₹1			21/01/19

POLICY SCHEDULE (Individual)

Name of the Insured	Sex	Date of Birth / Age	Occupation	Status of Insured	Existing Disabilities	Nominee Details		Sum	Excess (%)
						Name	Relation		1,07
NAGESH KUNDLIK SHEWALE	Male	29/11/1988	Agricultural ist	Earning Member	NO	MRS. PAL LAVI	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 solidated Stamp fees paid by

GRAS GRN No.MH005985987201819M Rate of Tax Amount in INR Premium dtd. 17/09/2018 vide Cheque No. 786999 SGST 0 dtd. 13/09/2018 and the stamp duty under CGST 0 this policy is Rs.1/iG5T 11 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 21st day of January,2019.

For and on behalf of The New India Assurance Company Limited

Signature yalid

Policy No.: 15161147182400000151 Document generated by 37531 at 21/01/2019 15:42:19 Hours.

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

es 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.

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ent of India Undertaking" THE NEW INDIA ASSURANCE CO. P.TD. 34 54 (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

15161181180000000566

Collection Date

21/01/2019

**Business Source Code** 

DI00001420

PAN No of Payer

Received with thanks from NAGESH KUNDLIK SHEWALE

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code
15161147182400000151	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	Referençe No.	Scroll/BG/A PD Balance
Cash	60.00	N.A.	N.A.	N.A.	N.A.	1516111810001111	N.A.

Total = ₹ 60.00

Utilization details of the Collected Amount

Premium	ım GST		NEDGEN OF STREET	Stamp Duty	Excess Amount
60.00		0.00	0.00		0
SI no.	Agency Code		Agency Nan	ne la	Department Code
1	NIAAG00087491		NIKHIL HAN	UMANT TEMGIRE	47

For The New India Assurance Company Limited Revenue Stamp

Cashier's Initial

Authorized Signatory

Note -

Date of Issue: 21/01/2019

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.: 15161147182400000151 Document generated by 37531 at 21/01/2019 15:42:19 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.