दि न्यू इन्डिया एश्योरन्स कंपनी लि.

THE NEW INDIA ASSURANCE CO. LTD. 3400H (Government of India Undertaking)





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

Insured's Name	:	SANTOSH POPAT BHAGAT		2017 (00)	1		
	Inst	red's Details	Issuing Office Details				
Customer ID	:	PO65982074	Office Code	: Manchar (151611)			
Address	1	A/P. NIMGAON KHANDOBA, TAL. KHED, DIST. PUNE PUNE ,MAHARASHTRA, 412406	Address	:	Trimurti Complex, A Wing, 1st floor, Shop No 6, Pune Nasik Highway, Manchar, Tal Ambegaon, Dist Pune ,410503		
Phone No		8605000829	Phone No	:	02133-223047		
E-mail/Fax	1:	J.	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)		

		Poli	cy Details				
Policy Number	:	15161147182400000086	Business Source Code				
Period of Insurance	:	From:07/01/2019 03:07:10 PM To: 06/01/2020 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF	:	Mr DIRECT 151611 MANCHAR - (DI00001420)		
Date of Proposal	1	07-Jan-19	Agent/Bancassurance		Mr. NIKHIL HANUMANT TEMGIRE (NIAAG00087491) NIKHIL HANUMANT TEMGIRE (SI00156800)		
Prev. Policy no.			Phone No	:	9623857257 / NA		
Client Type	1:	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	15161181180000000491 - 07/01/19
Stamp Duty	₹1.			

POLICY SCHEDULE (Individual)

Name of the Insured	Sex	Date of Birth / Age	Occupation	Status of Insured	Existing Disabilities	Nomine	e Details	Sum Insured	Excess (%)
						Name	Relation		
SANTOSH POPAT BHAGAT	Male	04/07/1972	Agricultural ist	Earning Member	NO	MISS AM RUTA	Daughter	100000	0

Special Conditions: NA

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

NOTE: 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
 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 07th day of January,2019.

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

For and on behalf of The New India Assurance Company Limited

Signature valid

this policy is Rs. 1/-Policy No.: 1516114718240000086 Document generated by 37531 at 07/01/2019 15:13:07 Hours.

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

For tedressaled 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 COPLIDE 3400 H (Government of India Undertaking)



COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuina 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

151611811800000000491

Collection Date

07/01/2019

Business Source Code

DI00001420

PAN No of Payer

Received with thanks from SANTOSH POPAT BHAGAT.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount₹	A/C Code	Sub A/C Code
15161147182400000086	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
Ca	ash	60.00	N.A.	N.A.	N.A.	N.A.	1516111810001011	N.A

Total = ₹ 60.00

Utilization details of the Collected Amount

Premium		GST	Stamp Duty		Excess Amount
60.00		0.00		0.00	0
SI no.	Agency Code		Agency Name	= allowed	Department Code
1	NIAAG00087491		NIKHIL HANUI	MANT TEMGIRE	47

For The New India Assurance Company Limited Revenue Stamp

Cashier's Initial

Authorized Signatory

Note

Date of Issue: 07/01/2019

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.: 1516114718240000086 Document generated by 37531 at 07/01/2019 15:13:07 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.