



CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LTD.			GST Invoice No.: 3379559264798		
ADDRESS: PUNE BRANCH - 1 3RD FLOOR, WELLESLEY COURT, CTS NO 15 B, DR. AMBEDKAR ROAD CAMP, PUNE DR. B.A. CHOWK S.O CITY: PUNE STATE: MAHARASHTRA GSTIN: 27AABCC6633K1ZJ			DATE: 17/12/2024 PAN: AABCC6633K SAC Code: 997134 SAC Description: Motor vehicle insurance services		
Business Location: PUNE BRANCH - 1			Cover Note No.: -		
Policy Number: 3379/04195139/000/00		Customer Code: 190000020832144		Policy Type: Package - Goods Carrying Vehicle	
Name & Communication Address: DATTATRAY BABAN PACHANGE DHOK SANGVI NIMGAON BHOGI PUNE, NIMGAON BHOGI B.O, PUNE MAHARASHTRA, PIN- 412220 GST No.: 27AKUPP6466D1ZJ Mobile-9890161113			Name and Registration Address: DHOK SANGVI NIMGAON BHOGI PUNE, NIMGAON BHOGI B.O, PUNE MAHARASHTRA, PIN- 412220 Mobile-9890161113		
Period of Insurance: from 17/12/2024 16:56 hours to midnight on 16/12/2025			Business or Profession: Individual		Geographical Area: No Extension
Certificate Number: 3379/04195139/000/00			Issue Date: 17/12/2024		

PARTICULARS OF THE VEHICLE INSURED									
Date of Registration: 17/12/2024				Place of Registration: PUNE			Registration Mark: NEW		
Make: BHARATBENZ		Model: 3528C - 8X4 BSVI		Variant: 8X4 BSVI		Vehicle Colour: -		Year of Mfg: 2024	
Type of Body: TIPPER		Fuel Used: DIESEL		Engine No: 926956D0179947			Chassis No: MEC854FBLRP171314		
Cubic Capacity: 7200		K. Watts: -	Gross Vehicle Weight(GVV): 35000		GVW as per RC: 0	Public/Private Carrier: PUBLIC		Registration Mark(Trailer): -	
Contract No: -									
Licensed Passenger Carrying Capacity: 2		Driver 1	Cleaner: 0	Conductor: 0	Total Seating Capacity Including Driver: 3		Chassis No.(Trailer): -		

IDV (Insured Declared Value)				
Value of Chassis (Rs): 6166773	Value of Body (Rs): 0	For Vehicle (Rs): 6166773	For Trailer (Rs): 0	Non-Electrical Accessories (Rs): 0
Electrical/Electronic Accessories (Rs): 0		Value of CNG/LPG Kit (Rs): 0		Total Value (Rs): 6166773

A. OWN DAMAGE					B. LIABILITY				
	SI	No. of Person	IMT	Premium (Rs)		SI	No. of Person	IMT	Premium (Rs)
Basic OD	6,166,773	3.00		112,649.00	Basic TP				43,950.00
IMT 23	112,649	00	23	16,897.00	Paid Driver		1	40	50.00
TOTAL				129,546.00	Legal Liability to			40	100.00
Own Damage Premium				129,546.00	TOTAL				44,100.00
Experience Based Discount (85%)				110,114.10	TOTAL PREMIUM (B)				44,100.00
TOTAL (A)				19,432.00	C. PERSONAL ACCIDENT COVERS				
D. ADD-ON COVERS (BENEFITS)					TOTAL PREMIUM (C)				.00
	Benefit No.	Option No.							
Waiver of Reduction in Depreciation for Partial Loss Claims	2	100%		10,545.00	TOTAL (A+B+C+E)				74,077.00
ADD-ON COVERS PREMIUM				10,545.00	TOTAL CONSIDERATION				74,077.00
Add-On Covers Discount				.00	CGST				5,344.00
TOTAL ADD-ON COVERS PREMIUM (D)				10,545.00	SGST				5,344.00
E. OTHER CHARGES (NON PREMIUM)					IGST				
Chola value added services				0.00	AMOUNT COLLECTED				84,765.00
TOTAL OTHER CHARGES (NON PREMIUM) (E)				0.00					

LIMITATIONS AS TO USE: The Policy covers use of the vehicle for any purpose other than: a) Organised Racing. b) Use while drawing a Trailer, except the towing (other than for reward) of any one disabled mechanically propelled vehicle. c) Pace Making. d) Reliability Trial. e) Speed Testing. f) Use for carrying passengers in vehicles; except employees not exceeding the number permitted in the registration document and coming under the purview of Workmen's Compensation Act 1923.

1. As per Sec 147 of MV Act issued policy the premium received only to an extent of liability fixed by IRDA/Central Govt
2. Sec 150 (2) (b) that the policy is void on the ground that it was obtained by, nondisclosure of any material fact or by representation of any fact which was, false in some material particular;
i. Or
ii. (c) that there is non-receipt of premium as required under section 64VB of, the Insurance Act, 1938.
3. No Application for compensation shall be entertained unless it is made within 6 Months from the date of occurrence of the Accident
4. No Sum shall be payable by an Insurer in case a person driving the vehicle does not have a valid driving license or is under the influence of Alcohol or Drug.

DRIVER CLAUSE: Any person including insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the Person holding an effective learner's license may also drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules 1989.

LIMITS OF LIABILITY: Under Section II-1 (1) of the Policy - Death or bodily injury such amount as is necessary to meet the requirements of the Motor Vehicle Act, 1988. Under Section II - 1 (ii) of the Policy - Damage to Third Party Property - Rs.750000 P.A. Cover for the Owner cum Driver Under Section III (CS) - Rs.00 Deduction Under Section 1: Rs.1500 Additional compulsory deductibles under Section 1 Rs.0.00
Additional Imposed deductibles under Section 1 Rs.0
Subject to I.M.T. Endt. Nos. and Memorandum: 23,21,40 .
Coverage Under this policy is subject to realisation of premium cheque(s). In case of dishonor of cheque(s). No separate intimation will be given and the policy stands cancelled from inception.

Product Plan:
Applicable benefits: 2
The policy wordings with detailed terms, conditions, warranties exclusions and the list of Ombudsman details are available on our website www.cholainsurance.com.
Date and Signature of the proposal 17/12/2024.

Warranties: -
Warranted that NCB under this Policy is based on representation regarding NCB and absence of claim under the previous Policy. If the information be found incorrect or false in any aspect, this Policy shall be void ab initio and no benefit shall be payable by the company.
This policy has been issued upon declaration by the Assured that a valid Pollution Under Control (PUC) Certificate is held on the date of commencement of the Policy
It is hereby warranted the coverage under this Policy commences only from the Risk Start time and Date as mentioned in the Policy schedule. No Liability shall attach under this Policy in respect of any Accident/Loss prior to the time and date of commencement of Period of insurance

Nil Dep: Notwithstanding anything contained in the Policy, it is warranted that Maximum Liability of the company under Nil Dep cover shall not exceed 2 claims during the Policy Period.

No Claim Bonus will only be allowed provided the policy is renewed within 90 days of the expiry date of the previous policy.

CVAS NEW:
As per GR 36A-PA for Owner driver refers to the Owner of the insured vehicle holding an effective driving licence.

Nominee Details:

Financier Name & Address:

Intermediary Name: PROBUS INSURANCE
BROKER PRIVATE LIMITED

Code: 2016023030050001

Contact No: 9175702318

POSP Name:

POSP PAN
No.:

POSP
Aadhaar No.:

Note: The Motor Policy Schedule cum Certificate of Insurance is an important document issued based on your declaration. We request you to verify the details and ensure that everything is in order. In case of any discrepancies, please contact us within 15 days from the date of issuance of policy.

Place: CHENNAI

Date: 17/12/2024

Receipt No:

Receipt Date:

For Cholamandalam MS General Insurance Company Ltd.
@CholaSign1

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule and also as per Notification No. 13/2020-CT dated 21-03-2020. This policy schedule shall be in lieu of Tax Invoice and hence no separate GST invoice required In compliance with Rule 54(2) of CGST Rules, 2017.

Duly Constituted Attorney(s)

Consolidated Stamp Duty Paid Vide G.O Rt No , Commercial Taxes and Registration (j1) Department, Tamil Nadu dated

I/We hereby certify that the policy to which this certificate relates as well as this certificate of insurance are issued in accordance with the provisions of Chapter X and Chapter XI of the Motor Vehicles Act, 1988.
IMPORTANT NOTICE: The insured is not indemnified if the vehicles is used or driven otherwise than in accordance with this schedule. Any payment made by the company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988, is recoverable from the insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY"
For Information/Claims: Contact Toll Free Helpline at 1800 208 5544: sms "CHOLA" to 56677 For CARE contact 1800 103 5354;
E-mail: customercare@cholams.murugappa.com: www.cholainsurance.com
Note: UIN for this product and the related add on covers availed under this policy are as mentioned in the attached sheet ,which forms part of the Policy Schedule.

Whether tax is payable under reverse charge basis - No.
Cholamandalam MS General Insurance Company Ltd.

Regd.&Head Office:Dare House, 2nd Floor, No.2, N.S.C Bose Road, Chennai-600 001, India
CIN: U66030TN2001PLC047977 | IRDAI Reg. No. 123

**An ISO 9001 : 2015 Certified
Company For Motor Claims**

To :
Customer Name : DATTATRAY BABAN PACHANGE
Address :
DHOK SANGVI NIMGAON BHOGI PUNE
-,NIMGAON BHOGI B.O,PUNE,MAHARASHTRA,PIN- 412220
Mobile- 9890161113
Dear Sir/Madam
Ref: Vehicle details updation in your Motor Insurance Policy 3379/04195139/000/00
On behalf of Chola MS we would to thank you for choosing us as your preferred insurer. Your vehicle details are updated in our records as per the details below.We request you to confirm the correct / missing information and send this letter back to the address given, to update the same in our records. If there are any corrections, we request you to provide the Registration Certificate (RC) for our records and future reference.
Vehicle Registration : NEW
Engine : 926956D0179947
Chassis : MEC854FBLRP171314
Documents to be sent to:
Manager (Operations),
Cholamandalam MS General Insurance Ltd
1st Floor, Hari Nivas Tower, 163, Thambu Chetty Street,
Parrys Corner,
Chennai - 600001
We request you to reply within 7 days of receipt of this letter. Alternatively, request you to e-mail your above Vehicle details with scanned copy of Registration Certificate to the following e-mail ID, quoting your policy number. customercare@cholams.murugappa.com
For any further clarifications please feel free to call our toll free # 1800 208 5544.

DATE : 17/12/2024

Yours faithfully,

For Cholamandalam MS General Insurance Company Ltd.
@CholaSign1



Authorised Signatory

Product : Motor Commercial Vehicle
Name : Package Policy - For Goods
Carrying Vehicles
UIN : IRDAN123RP0003V03100001
NA

**UIN for Add-on
Covers**

Sl.No	Add on cover Name	IRDA BAP UIN	UIN
1	Waiver of Reduction in Depreciation	IRDAN123RP0003V02100001/A0011V02201213	