



LIBERTY GENERAL INSURANCE LIMITED
POS COMMERCIAL VEHICLE PACKAGE POLICY - MISCELLANEOUS AND SPECIAL TYPE OF VEHICLES
CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

IMPORTANT 1)The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque.
2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.
3) In the event of misrepresentation, fraud or non-disclosure of material facts, the company reserves the right to cancel the policy from inception.

Policy issuing office :Unit 1501&1502, 15th Floor, Tower 2, One International Center, Senapati Bapat Marg, Prabhadevi, Mumbai – 400013, Maharashtra Phone: +91 226700 1313	
Policy Servicing office : 'The Capitol', 4th Floor, New D.P.Road,, Near Ashoka Hotel, Vishal Nagar,, Pimple Nilakh,, PUNE, PUNE, MAHARASHTRA-411027 PH: +91 020 30856567 Fax:	
PolicyRef No.	201440030125700043300000
Geographical Area	India
Insured	ANURADHA NAGESH DAS
Address	W/O: NAGESH DAS, AT SHELGAON POST PHISARE TAL KARMALA, PHISARE, SOLAPUR, PHISARE, MAHARASHTRA, 413203 ,,,MAHARASHTRA,SOLAPUR,VIHAL- 413203
Contact Number	9673973622
Customer GSTIN	
UIN CODES:	IRDAN150RP0033V01201213
Period of Insurance	From: 13:15 Hrs of 09/04/2025 To: Midnight of 08/04/2026
Policy Issued on	09/04/2025
Covernote No	201440030125700043300000
Covernote Date	09/04/2025
RTO Location	AKLUJ
Zone:	Zone C
POSP Name:	YASMIN ILIYAS
POSP Code:	POS1021611
Aadhar Card/Pan Number:	DQIPS5412P
POSP Conatct Number:	9067887858
Agent Name	
Agent Code	
Agent Contact No	

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION

Registration Mark & No.	Year of Manufacture/ Date of Registration/ Invoice Date	Engine No.	Chassis No.	Vehicle Class	Vehicle Sub Class	Trailer Registration No	Trailer Chassis No	Trailer IDV	Make	Model Build	Type of Body	CC/HP/KW	GVW	Licensed Carrying capacity including Driver
New	2025/09-04-2025/09-04-2025	381369SGP05983	BNAA45ACSTA20442	MiscDPackage	AGRICULTURAL TRACTORS (>6HP)	NA	NA	NA	SWARAJ	724 XM ORCHARD TRACTOR	OPEN	27.00	0	1

IDV (INSURED DECLARED VALUE)

IDV Of Vehicle `	Chassis IDV `	Body IDV `	Trailers `	Non Electrical Accessories `	Electrical /electronic Accessories `	Bi-Fuel kit (CNG/LPG) `	Total Value `
522,500.00	522,500.00	0.00	0	0.00	0.00	0	522,500.00

Section I - OWN DAMAGE (A)	Section II - LIABILITY (B)
Own Damage Premium on Vehicle and accessories	Third Party Premium
Basic Cover	Basic Cover
Basic OD	Basic TP
EXTENSIONS UNDER OWN DAMAGE SECTIONS	EXTENSIONS UNDER THIRD PARTY SECTION
Cover for lamps, tyres, tubes etc. - IMT 23	PA Benefits
LOADING UNDER OWN DAMAGE SECTION	Legal Liability
TOTAL OWN-DAMAGE PREMIUM (A)	Legal liability to Driver(1)/Cleaner(0)/Conductor(0) - IMT28
Section I - ADD ON COVERS (C)	DISCOUNTS UNDER THIRD PARTY SECTION
TOTAL OWN-DAMAGE PREMIUM + ADD-ON COVER PREMIUM (A+C)	TOTAL LIABILITY PREMIUM (B)
	Section III - PA OWNER DRIVER (D)
	Net Premium Taxable Value (A+B)
	State Cess
	CGST(MAHARASHTRA)(9%)
	SGST(MAHARASHTRA)(9%)
	TOTAL POLICY PREMIUM

NOMINATION DETAILS

Name of the Nominee	Relationship with Insured	Name of Appointee (if nominee is minor)	Relationship with the Nominee
	NA	NA	NA

Hire Purchase/Lease/Hypothecated with :KOTAK MAHINDRA BANK LTD, .

LIMITATIONS AS TO USE - Use only for agricultural and forestry purposes:The Policy does not cover (1) Use for hire or reward or for racing pace making reliability trial or speed testing. (2) Use for the carriage of passengers for hire or reward. (3) Use whilst drawing a greater number of trailers in all than is permitted by law.

The Policy does not cover use for a)Organized racing, b)Pace Making, c)Reliability Trial, d)Speed Testing e)Use whilst drawing a trailer except the towing (other than for reward) of any one disabled Mechanically propelled vehicle (only for passengers carrying vehicles).

DRIVERS CLAUSE

Persons or Classes of Person entitled to drive:Any person including the 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 and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

Limits of Liability

Deductible Under Section-I	Compulsory Deductible:Rs2612.5	Under Section II-I(i) of the policy (Death of or bodily injury):	Such amount as is necessary to meet there requirements of the Motor Vehicles Act, 1988.	Under Section II-I(ii) of the policy(Damage to third party property)	7,50,000.00	P.A. cover for owner-Driver under section-III: CSI	NA
Subject to I.M.T Endorsement Nos.		IMT 28, IMT 7, IMT 21,IMT 23,					

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 M.V. Act,1988. In witness whereof this Policy has been signed at Mumbai on 09/04/2025	
Receipt No:	For Liberty General Insurance Limited
Invoice No: 1461700043300000	
In case of claim ,Please contact us at : Toll Free No -18002665844, Email id – care@libertyinsurance.in Insurance is the subject matter of solicitation;	
Date of Issue :09/04/2025	
Place: PUNE	
Stamp Duty of Rs. xxx/- is paid as provided under Article (xxxx) of Indian Stamp Act, 1899 and included in Consolidated Stamp Duty Paid to the Government of Maharashtra Treasury vide Order of Addl. Controller of Stamps, Mumbai at General Stamp Office, Fort, Mumbai 400001., vide this Order No (LOA/ENF-2/CSD/128/2024/(Validity Period Dt. 30/12/2024 to 29/12/2025)/OW.NO.5591/ Dated 24/12/2024).	
LGI Branch GSTIN :27AABCL9950A1ZL	
IRDA Registration No. 150	
CIN No. U66000MH2010PLC209656	
SAC Code:997134 Description of Service:General Insurance Service	
Place of Supply : MAHARASHTRA	
Tax is not payable under reverse charge by the recipient.	Authorised Signatory
I/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	
IMPORTANT NOTICE	
The Insured is not indemnified if the vehicle 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 legal interpretation English version will be good.	



Details of Vehicle Type and Usage

1. Fuel Type of the vehicle

☐ Petrol

☒ Diesel

☐ Any Other

2. Whether the Vehicle is driven by Non-Conventional source of Power

☐ Yes

☐ No

If yes please give details

☐ Bi-fuel

☐ CNG

☐ LPG

☐ Externally Fitted

☐ Manufactured

Fitted

3. Will the vehicle be exclusively used for: a) Private, Social, Pleasure and Professional Purposes

☐ Yes

☒ No

b) Carriage of goods other than Samples or Personal Luggage

☐ Yes

☒ No

4. Whether the Vehicle used for Commercial purposes ?

☒ Yes

☐ No

5. Whether the vehicle is used for Driving tuitions ?

☐ Yes

☒ No

6. Whether the vehicle is limited to own premises?

☐ Yes

☒ No

7. Whether the vehicle is specially designed for use of Blind/Handicapped/ Mentally Challenged Person

☐ Yes

☒ No

If so, whether the same is endorsed as such by RTA?

☐ Yes

☒ No

8. Whether the rally cover is required?

☐ Yes

☒ No

9. Whether the vehicle is fitted with Fibre Glass Tank?

☐ Yes

☒ No

10. Whether the vehicle belongs to the Embassy/Consulate of a foreign country?

☐ Yes

☒ No

If so, is the Duty element is included in the IDV?

☐ Yes

☐ No

11. Whether insured is first registered owner of the vehicle?

☒ Yes

☐ No

12. Whether the vehicle is confined to Sites? (Applicable to Miscellaneous Vehicles)

☐ Yes

☐ No

13. Whether the Misc-D vehicle is also used for Private purposes (Excluding use for hire or reward)?

☐ Yes

☒ No

14. Whether Cover required for lamps, tyres /tubes mudguard/side parts. (IMT 23 Cover)

☒ Yes

☐ No

15. Whether Cover for Overturning loading required? (Applicable to MISC D only)

☐ Yes

☐ No

16. If the vehicle is owned by schools/corporate, will it be used exclusively for transportation of own staff / Students and guests?

☐ Yes

☒ No

Previous Insurance Details

Name and Address of Previous Insurer

Policy/Covernote no.

Type of Cover:

☐ Package (Comprehensive) Policy

☐ Act only Policy

☐ Bundle Policy

☐ Long Term Policy

☐ SAOD Policy

☐ Others

NCB*/Loading in expiring policy

Claim lodged in last three years:

Year

Expiring Year (1)

Expiring Year (2)

Expiring Year (3)

No.of Claims:

Claim amount

1. Date of purchase of the vehicle by the Proposer:

09/04/2025

2. Whether the vehicle was new or second hand at the time of purchase?

☐ New

☐ Second Hand

3. Is the vehicle in good condition?

☐ Yes

☐ No

If NO, Please give details:

4. Has any insurer ever declined/cancelled the insurance of the proposed vehicle?

☐ Yes

☐ No

5. Policy Period: From

To

Are you entitled for No Claim Bonus on Renewal?

☐ Yes

☒ No

* If yes, Please mention the

0 %

6. Is the vehicle fitted with Anti - Theft Device which is approved by ARAI?

☐ Yes

☒ No

7. Are you a member of the Automobile Association of India?

☐ Yes

☐ No

If Yes, Please state :

Membership No.

Date of expiry:

Driver's Detail

1. Does the owner has a valid driving licence?

☒ Yes

☐ No

2. Vehicle is primarily driven by:

☐ Registered Owner

☒ Any other

Name

Relationship:

Age

3. Does the driver suffer from defective vision or hearing or any physical infirmity?

☐ Yes

☒ No

Give details

4. Driver's qualification:

Driver's experience:

5. Age & Date of Birth of the Owner: Age

Yrs

Date of Birth:

b. Age & Date of Birth of the Driver: Age

Yrs

Date of Birth:

6. Has the driver ever been involved / convicted for causing any accident of loss?

☐ Yes

☒ No

If YES, give details as under including the pending prosecutions:

Driver's Name:

Date of Accident:

Loss/Cost(Rs.):

Circumstances of Accident/Loss

Inspection Details

1. Does the vehicle stands fit for insurance?

☒ Yes

☐ No

☐ Self Inspection

2. Inspection Reference No.:

Conducted on (Mention Date & Time):

Additional Coverage Details

Do you require PA cover for Paid Driver, Cleaners and Conductors?

☐ Yes

☒ No

Name:

CSI

Do you wish to cover Geographical Area Extension under your proposed insurance?

☐ N1660644

☐ Bhutan

☐ Nepal

☐ Sri Lanka

☐ Maldives

☐ Pakistan

Do you require Unnamed PA Cover

1. No. of Passengers

2. Sum Insured per person (unnamed passengers/hirer/pillion rider, two wheelers)

Name

Sum Insured

Name

Sum Insured

3. Do you wish to cover Legal liability towards

a) Driver/Cleaner/Conductor (No. of Persons:1)

☒ Yes

☐ No

b) Unnamed Passangers(No. of passangers)

☐ Yes

☐ No

c)Other Employee(No. of Persons)

☐ Yes

☐ No

d) Soldier/Sailor/Airman employed as Driver

☐ Yes

☐ No

4. Do you wish to have the statutory Third Party Property Damage (TPPD) liability of

Rs. 6,000/- only? (IMT 20)

☐ Yes

☒ No

5. Do you require PA cover for named persons?

☐ Yes

☒ No

Name:

CSI

Nominee:

Relationship

6. The Policy provides additional Third Party Property Damage liability limits of

Rs.1,00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit?

☒ Yes

☐ No

7. Legal liability to persons employed in connection with operation of the vehicle who are 'workmen'.The liability of the Employer under the Workmens' Compensation Act-1923 is covered under the Motor Vehicles Act-1988.

☐ Yes

☒ No

Drivers (No. of persons:)

Employees (Workmen) (No. of persons:)

*I am Environment friendly Customer :

(Note: The Motor Vehicles Act-1988 under Sec.147(1)(ii)(I) covers liability to employees who are workmen within the meaning of Workmen Compensation Act - 1923.)

8. Coverage for liability against Third Party Risks (Death or Bodily Injury) required in respect of

☐ Owner Driver only

☐ Any person other than Paid Driver

If 'YES', give details of such other persons:

Non fare Paying Passengers (No. of persons:

Note: 1. Section146 of Motor Vehicles Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section146 exempts the paid driver.) 2. As per Section 147 (2)(a) The liability is 'as incurred' in the case of death / bodily injury of a third party)

Any other Coverage details

Break In Insurance Declaration

"I/We hereby Declare and Undertake

☐ *That, the vehicle proposed to be insured had,during the period in which it was not covered

by valid and effective insurance policy issued by any insurer/s, met with an accident on at

(Add more date/s with time if vehicle had met with an accident more than once)

☐ *That, the vehicle proposed to be insured had, during the period in which it was not covered by valid

and effective insurance policy issued by any insurer/s, had NOT met with any accident

(*Select the appropriate check box and provide relevant information against selected entry)

I/we understand that all and/or any kind of liabilities arising out of accident/s which had occurred prior

to risk inception date and time as mentioned in the Policy Document issued by Liberty

General Insurance Limited in consideration of these presents will be completely out

of ambit of said Policy and said Company will not be in any manner liable or held responsible therefore.

I/we further undertake that if this declaration and/or any of its part is found to be incorrect in any

manner, all the benefits under the Policy will then stand forfeited and the contract of insurance

will be treated as treated as void ab-initio".

NCB Declaration

I / We declare that the rate of NCB claimed by me/us is correct and that no claim as arisen in the expiring policy period (copy of the policy enclosed) I/We further undertake that if this declaration is found to be incorrect, all benefits under the policy in respect of Section I of the policy will be forfeited.

Declaration

"I am/Iwe are aware that the complete terms and conditions of this insurance policy are available at the official website of the insurer (www.libertyinsurance.in). I/We hereby consent to receiving only the certificate and schedule of insurance upon the undertaking of the insurer that the complete policy terms and conditions will be made available free of cost upon my/our request". I hereby declare and confirm that the PUC certificate of the vehicle proposed for insurance is valid as on date.

Any other Material Information Declaration and Consent

I/We hereby declare that the statements, answers given by me /us in this proposal form are true to the best of my knowledge and belief and I/We hereby agree that this declaration shall form the basis of the contract between me/us and the Liberty General Insurance Ltd.It is hereby understood and agreed that the statements, answers and particulars provided herein above are the basis on which this insurance is being granted and that if, after the insurance is effected, it is found that any of the statements, answers or particulars are incorrect or untrue in any respect, the company shall have no liability under this Insurance.

I/We agree and undertake to convey to Liberty General Insurance Limited any change / alterations carried out in the risk proposed for insurance after submission of this proposal form.

"I/We have insurable interest in the subject matter of this insurance and we hereby declare that the Cost of the same and the premium for this insurance is paid from legal sources of funds."

I, the undersigned proposer hereby declare and confirm that I have understood the features, terms and conditions of the policy and questions contained in the proposal form. I also understand that the answers to the questions contained in the proposal form, forms the basis of the contract of insurance. If any information/statement given in proposal is found to be untrue, the policy shall be treated as void ab initio and the premium paid shall be forfeited to the Company.

Please give details, if you are politically exposed person or relative of politically exposed person.

Please give details, if you are non profit organization.

☐ I hereby agree to receive a one pager policy document.

☒ I hereby confirm having a valid personal accident policy for sum Insured of minimum Rs.15 lakhs.

Prohibition of Rebates (Section 41) of the Insurance Act-1938

1. No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind or risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the prospectus or tables of the Insurer.

2. Any person making default in complying with the provision/s of this section shall be punishable with fine, as may be prescribed under Insurance Act, 1938 or any amendment thereto for the time being in force.

For use by Intermediary only

Cover Note No. issued (if any)

Date of Issuance

Time of Issuance

Period of Insurance: From (Time)

(Date)

To the midnight of

(Date)

Premium Amount (in Rs.)

Bank Name :

Cheque No. / DD No. / Cash:

Date

For Office Use only

Customer ID:

Proposal Number:

Policy / Cover Note Number:

201440030125700043300000

Proposal Checked By:

Date of Receipt:

Date :

Place:

Proposer Name :

Proposer's Sign :

V1 -20042015

Call Toll Free No: 1800 266 5844

www.libertyinsurance.in