

## Bajaj Allianz General Insurance Company Ltd.

Registered and Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune

### Transcript of Proposal for Private Car Package Policy

Dear AMJAL A PETKAR,

We wish to inform you that the contract under policy number 'OG-26-2047-1801-00002961' has been finalized based on the information and declaration given by you, the transcript whereof is mentioned below. You are requested to reconfirm the same. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back within a period of 15 days from date of your receipt of this, failing which it will be deemed that you are satisfied with the correctness of the details mentioned below. Kindly note that as the contents and declarations contained in this transcript is the basis on which we have issued the policy to you, we advise you to please ensure that you have provided/disclosed and or not withheld any material facts/information and declarations, as Policy becomes Void ab initio if material facts are not provided/disclosed and or withheld and in such case no claim, if any, will be considered by us apart from forfeiture of the premium.

Details provided by you:

#### A. Proposer details

1. Proposer Name : AMJAL A PETKAR
2. Proposer Address : NA, NA  
,, ADDRESS LINE 3, ADDRESS LINE 5-411001
3. Proposer Mobile Number : \*\*\*\*\*5358
4. Proposer Residential Number : NA
5. Proposer e-mail id : \*\*\*\*\*ICY@GMAIL.COM
6. Proposer Profession : NA

#### B. Vehicle Details

| Registration Number | Month / Year of Regn | Vehicle Make | Vehicle Model | Vehicle Sub Type      | Cubic Capacity/Kilowatt | Fuel Type | Year of Manufacture | Seating Capacity |
|---------------------|----------------------|--------------|---------------|-----------------------|-------------------------|-----------|---------------------|------------------|
| MH46X7311           | NOV/2013             | MARUTI       | EECO          | GREEN 5 SEATER AC HTR | 1196                    | CNG/LPG   | 2013                | 5                |

  

| Engine Number | Chassis Number     | Vehicle IDV (in Rs.) | Electrical Accessories IDV (in Rs.) | Non-Electrical Accessories IDV (in Rs.) | CNG/LPG Unit (Extra fitted) IDV (in Rs.) | Total IDV (in Rs.) |
|---------------|--------------------|----------------------|-------------------------------------|-----------------------------------------|------------------------------------------|--------------------|
| G12BN300787   | MA3ERLF1S003 24600 | 1,99,818.00          | 0                                   | 0                                       | 0                                        | 1,99,818.00        |

### **C. Coverage opted**

1. Period of Insurance : From 20-SEP-2025 00:01(Hrs)  
To 19-SEP-2026 Midnight
2. Is your vehicle fitted with external LPG/CNG kit : No.
3. Electrical Accessories cover Opted (If Applicable) : No.
4. Non - Electrical Accessories cover Opted (If Applicable): : No.
5. Is Voluntary Excess opted : No.  
Amount of voluntary excess opted : Rs.NA.
6. Whether PA cover is opted for owner-driver : Yes.
7. compulsory deductible : Rs.1,000.00
8. Is any additional compulsory deductible imposed and agreed upon : No.  
Amount of additional compulsory deductible imposed : NA.
9. Whether geographical area extension is opted : No.  
Details of Countries to which geographical area extension cover is given : NA.
10. Is LL to person for Paid driver/Operation/Maintenance opted : No.
11. Whether PA cover is opted for paid driver other than owner driver : No.  
Sum Insured for Paid Driver : Rs.NA.
12. Whether PA cover is opted for passengers : Yes.  
Sum Insured per Passenger : Rs.1,00,000
13. Is TPPD restricted to statutory limit of Rs.6,000? : No.
14. Pre Existing damages in the vehicle : NA.
15. 1 Premium for Liability coverage, quoted and agreed upon is :
16. 1 Premium for OD coverage, quoted and agreed upon is :
17. Do you have valid PUC certificate of the vehicle : NA
18. Do you have valid Fitness certificate of the vehicle : NA
19. Total Premium (excluding Goods and Service Tax (GST)) for Liability and OD coverages, quoted and agreed upon is :
20. NCB (No Claim Bonus) claimed by you and granted by us based on your declaration of no claim during your previous previous policy : -20 %.
21. About the last insurance company  
(i) Insurance Provider : The New India Assurance Company Limited.  
(ii) Previous Policy No : 17090131240100000865, Previous Policy Expiry Date :19-SEP-25
22. Whether your vehicle is Hypothecated and if so the details of Pledgee whose name is registered by us : Yes.  
Name of Pledgee : CHOLAMANDALAM INV AND FIN COM LTD.
23. Add on Cover(s) optedm3: No.Plan name:NA
24. To support our Go Green initiative, send policy copy link on registered mobile number / email id: YES

Please note Cover Note No. / issued to you basing on the above information.  
In case of Disagreement or objection or any changes with respect to information and contents mentioned hereinabove, please contact our toll free number & register your objections/changes/disagreement to the contents of this transcript or you may also send us email or written correspondence at the following details within a period of 15 days from date of your receipt of this transcript along with Policy:

I/We hereby unconditionally allow the Company to share all my / our information being collected in this proposal form or through telephonic / email / web-inputs means or other means, as updated from time to time within group entities.

Toll free Number : 1800-102-5858,1800-209-5858

Email address : Bagichelp@bajajallianz.co.in  
Website : www.bajajallianz.com

Contact our policy servicing branch at: Bajaj Allianz General Insurance Co. Ltd., Tower No 07 , 4th Floor , CommerZone,, Next to Yerwada Jail , Samrat Ashok Path ,, Yerwada Pune 411006., PUNE-411006 PH:020-66240100.

**INSURANCE ACT, 1938 SECTION 41 - PROHIBITION OF REBATES**

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 of 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 a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. ANY PERSON IN BREACH OF COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO RUPEES TEN LAKH. Bajaj Allianz General Insurance Co Ltd



**BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED**  
Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune-411006(India)  
IRDAI Registration No. 113  
Corporate Identity Number: U66010PN2000PLC015329

**Certificate of Insurance ( PRIVATE CAR PACKAGE POLICY)**

**UIN : IRDAN113RP0025V01200102**

**Policy Number:** OG-26-2047-1801-00002961

**Customer ID:** 478628131

**Particulars of Vehicle Insured:**

| Registration Number | Place of Registration | Engine Number | Chassis Number        | Make & Model  |
|---------------------|-----------------------|---------------|-----------------------|---------------|
| MH46X7311           | MH46-PANVEL           | G12BN300787   | MA3ERLF1S0032460<br>0 | MARUTI - EECO |

| Sub Type              | Year of Mfg | NCB % | CC   | Seating Capacity |
|-----------------------|-------------|-------|------|------------------|
| GREEN 5 SEATER AC HTR | 2013        | -20   | 1196 | 5                |

**Name of Registration Authority** : MH46-PANVEL

**Name and Address of Insured** : AMJAL A PETKAR  
: NA, NA, , ADDRESS LINE 3, ADDRESS LINE  
5-411001

**Geographical Area** : .00

**Business or Profession** : NA

**Effective date of commencement of Insurance for the purpose of act:**

Policy Inception Date: From 00:01 O' Clock on 20-SEP-2025

Policy Expiry Date: Midnight on 19-SEP-2026

**Persons or Class of Persons entitled to drive:**

Any person including the insured:

- a) 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.  
b) 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 Vehicles Rules, 1989.

**IMT-Endorsements/Add on Package**

7, 16, 22, 25,

**Beneficiary Details:**

| Beneficiary1 | Beneficiary2 | Beneficiary3 | Beneficiary4 | Beneficiary5 |
|--------------|--------------|--------------|--------------|--------------|
|              |              |              |              |              |

**Limitations as to Use:**

The Policy covers use for any purpose other than

- a) Hire or Reward, b) Carriage of goods (other than samples or personal luggage), c) Organized racing, d) Pace Making, e) Speed testing, f) Reliability Trials, g) Any purpose in connection with Motor Trade

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.

**Policy issuing office and correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc:**

Bajaj Allianz General Insurance Co. Ltd., Tower No 07 , 4th Floor , CommerZone,, Next to Yerwada Jail , Samrat Ashok Path , Yerwada Pune 411006., PUNE-411006 PH:020-66240100

**Date of issue :19-SEP-2025**

For & On Behalf of

For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858( chargeable, add area code before this number in case of mobile call) Email us at Bagichelp@bajajallianz.co.in or Visit our Website www.bajajallianz.com

Corporate Identification Number U66010PN2000PLC015329

**Bajaj Allianz General Insurance Company Ltd.**

A handwritten signature in black ink, appearing to be 'Vijay', written over a light blue rectangular background.

**Authorized Signatory**



## BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113)

Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune-411006(India)

### PRIVATE CAR PACKAGE POLICY SCHEDULE

UIN : IRDAN113RP0025V01200102

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc:  
Bajaj Allianz General Insurance Co. Ltd., Tower No 07 , 4th Floor , CommerZone,, Next to Yerwada Jail , Samrat Ashok Path ,, Yerwada Pune 411006., PUNE-411006 PH:020-66240100

| INSURED DETAILS                  |                                                  |
|----------------------------------|--------------------------------------------------|
| Insured Name                     | AMJAL A PETKAR                                   |
| Insured Address                  | NA, NA , , ADDRESS LINE 3, ADDRESS LINE 5-411001 |
| Geographical Area                | India                                            |
| Customer ID                      | 478628131                                        |
| Bank Reference No 1              |                                                  |
| GSTIN / UIN                      | NA                                               |
| Place of Supply/ State Code/Name | 27 - Maharashtra                                 |

| POLICY DETAILS     |                                |
|--------------------|--------------------------------|
| Policy Number      | OG-26-2047-1801-00002961       |
| Policy Issued on   | 19-SEP-2025 19:04 PM           |
| Policy Period      | From : 20-SEP-2025 00:01 (Hrs) |
|                    | To : 19-SEP-2026 Midnight      |
| Cover Note Details | /                              |
| Previous Policy No | 17090131240100000865           |
| Invoice No         | 463537912/1                    |
| Company GST No     | 27AABCB5730G1ZX                |
| Company PAN        | AABCB5730G                     |

| Registration Number |       | Place of Registration | Engine Number              | Chassis Number                    | Make & Model                      | SubType               |
|---------------------|-------|-----------------------|----------------------------|-----------------------------------|-----------------------------------|-----------------------|
| MH46X7311           |       | MH46-PANVEL           | G12BN300787                | MA3ERLF1S0032<br>4600             | MARUTI - EECO                     | GREEN 5 SEATER AC HTR |
| NCB %               | CC/KW | Seating Capacity      | Year Of Manufacturing      | Trailer Registration Number       | Hypothecation Details             |                       |
| -20                 | 1196  | 5                     | 2013                       | -,-                               | CHOLAMANDALAM INV AND FIN COM LTD |                       |
| Vehicle IDV         |       | Value For Trailers    | Non electrical accessories | Electrical/Electronic accessories | Value of CNG/LPG kit              | Total Value           |
| 1,99,818.00         |       | 0                     | 0                          | 0                                 | 0                                 | 1,99,818.00           |

| Own Damage Premium(Rs.)                                                 |  |          | Liability Premium(Rs.)                      |  |          |
|-------------------------------------------------------------------------|--|----------|---------------------------------------------|--|----------|
| Own Damage Premium                                                      |  | 2,204.00 | Basic Third Party Liability                 |  | 3,416.00 |
| Special Discount                                                        |  |          | CNG/LPG Unit                                |  | 60.00    |
| Total OD Premium - A                                                    |  | 2,204.00 | PA Cover for Owner-Driver - SI - Rs.1500000 |  | 331.00   |
| Total Premium (Net Premium) (A+B)                                       |  | 6,261.00 | Period: From 20-Sep-2025 To 19-SEP-2026     |  |          |
| State GST (9%)                                                          |  | 563.00   | PA Cover For 5 Passenger Of Rs. 100000 each |  | 250.00   |
| Central GST (9%)                                                        |  | 563.00   | Total Act Premium - B                       |  | 4,057.00 |
| Final Premium ( Rupees Seven Thousand Three Hundred Eighty Seven Only ) |  | 7,387.00 |                                             |  |          |

\*\*Note: The above Total OD Premium is inclusive of all applicable Loading /Discounts viz (Automobile association membership, Voluntary Excess, Anti Theft, Handicap Person, Driver Tuition, Fiber Glass, CNG/LPG Unit, Geographical Extension, Imported Vehicle Etc. wherever Applicable)

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year  
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

For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858( chargeable, add area code before this number in case of mobile call) Email us at [gichelp@bajajallianz.co.in](mailto:gichelp@bajajallianz.co.in) or Visit our Website [www.bajajallianz.com](http://www.bajajallianz.com)

Corporate Identification Number U66010PN2000PLC015329

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sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

|                    |                                                     |                    |                                |
|--------------------|-----------------------------------------------------|--------------------|--------------------------------|
| <b>Broker Code</b> | <b>10105701</b>                                     | <b>Contact No.</b> | <b>09067887858/09067887858</b> |
| <b>Broker Name</b> | <b>SPARKSHIELD INSURANCE BROKER PRIVATE LIMITED</b> |                    |                                |
| <b>E-Mail ID.</b>  | <b>AMJAD@SPARKSHIELD.IN</b>                         |                    |                                |

|                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |                          |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|--------------------------|
| <b>Limitation as to Use</b>                                    | The Policy covers use of the vehicle for any purpose other than : Hire or reward, Carriage of goods( other than samples or personal luggage),Organised racing,Pace making, Speed testing, Reliability trials. Any purpose in connection with Motor Trade.                                                                                                                                                                                                                              |                         |                          |
| <b>Driver</b>                                                  | 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 when not used for the transport of goods/passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989. |                         |                          |
| <b>Limits of Liability</b>                                     | Under section II-I(i) of the policy -> Death of or bodily injury : Such amount 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 : Rs. 7,50,000.00                                                                                                                                                                                                                                        |                         |                          |
| <b>Existing Damage Details</b>                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |                          |
| <b>Nominee Details</b>                                         | <b>Name :NA - Relationship :NA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                         |                          |
| <b>Subject to Warranties/ IMT-Endorsements/ Add on Package</b> | 7, 16, 22, 25, & null & Plan Description:                                                                                                                                                                                                                                                                                                                                                                                                                                              |                         |                          |
| <b>Additional Details</b>                                      | Coinsurance Details: - . Transaction Id: -                                                                                                                                                                                                                                                                                                                                                                                                                                             |                         |                          |
| <b>Premium Details</b>                                         | Receipt No. 2047-00671041, Date 19-SEP-25 ** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque.                                                                                                                                                                                                                                                                                                                                              |                         |                          |
| <b>Excess Details</b>                                          | Compulsory Excess:                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Additional Excess: Rs.0 | Voluntary Excess: Rs..00 |
|                                                                | Rs.1,000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |                          |
|                                                                | Theft Excess: Rs.0                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                         |                          |

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.

It is mandatory to keep your policy with updated contact (Mobile No., Email ID and PAN Card) and bank account details, to process any of your service requests faster and hassle-free in future.

You can update the same through Caringly yours App {Link}, WhatsApp Service { Say Hi on WhatsApp - +91 75072 45858}, Contact our 24-Hour Call Center at 1800-209-5858, 1800-102-5858, Give a Missed Call on 8080945060, SMS WORRY to 575758, Email bagichelp@bajajallianz.co.in, website {http://www.bajajallianz.com}, contact your agent or nearest branch.

Warranted that insured named herein or owner of the vehicle insured holds a valid Pollution Under Control (PUC) and / or Fitness Certificate on the date of commencement of the Policy. If the PUC and/or Fitness Certificate is not found to be valid on the date of commencement of the Policy, the Company reserves its right to consider the policy void ab initio.

For & On Behalf of

**Bajaj Allianz General Insurance Company Ltd.**



**Authorized Signatory**

This document is digitally signed, hence counter signature / stamp is not required.Consolidated Stamp Duty paid towards Insurance Policy Stamps vide Order No. ADJ/CS/42/07/7383/07 Dated 18th April2007 of General Stamp Office, Mumbai.



Allianz 

*Caringly yours*

Principal Location : Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006 PH:66026666 | Services Account  
997134 - Motor vehicle insurance services. No reverse charge is payable on these services.

For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858( chargeable, add area code before this number in case of mobile call) Email us at [ba-gichelp@bajajallianz.co.in](mailto:ba-gichelp@bajajallianz.co.in) or Visit our Website [www.bajajallianz.com](http://www.bajajallianz.com)

Corporate Identification Number U66010PN2000PLC015329

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## Bajaj Allianz General Insurance Company Ltd.

Bajaj Allianz General Insurance Co. Ltd, Tower No 07 , 4th Floor , CommerZone, Next to Yerwada Jail ,  
Samrat Ashok Path , Yerwada Pune 411006., PUNE - 411006  
Contact No: 020-66240100; Fax No: 020-66240100

### RECEIPT

**Receipt Number** 2047-00671041

**Receipt Date** 19/09/2025

**Business Channel** MD

Received with thanks from AMJAL A PETKAR

(Customer ID : 478628131 ) a total sum of Rupees Seven Thousand Three Hundred Eighty Seven Only by,

| Instrument Type | Instrument No. | Instrument Date | Bank Name | Branch Name | Amount |
|-----------------|----------------|-----------------|-----------|-------------|--------|
| Online Payment  | 112248861      | 19/09/2025      | NA        | NA          | 7,387  |

**Total Amount** **Rs. 7,387.00**

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

\* Cheque/DD/PO receipt is valid subject to realisation of the instrument.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.



Authorised Signatory

**Regd.Office: Bajaj Allianz House,Airport Road, Yerwada, Pune - 411006**