



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Private Car Package Policy

UIN Number - IRDAN190RP0042V01100001

Policy Number :16030231250100001668

POLICY ISSUING OFFICE: GONDIA BRANCH (160302), 1ST FLOOR, RUNGTA COMPLEX, , JAISTUMBH CHOWK, GANESH NAGAR ROAD, , GONDIA , MAHARASHTRA , 441601. PHONE NUMBER:07182238084 / 07182214159 / 9960435801 FAX NUMBER:NA / NA Email:nia.160302@newindia.co.in	BUSINESS CHANNEL/CPSC User: NAME: Sparkshield Insurance Broker Private Limited - (BR00001976), PHONE NUMBER: / / 8421887858 LAND/FAX NUMBER: / EMAIL:sparkshieldbroker@gmail.com /	CLAIM CONTACT: Gondia Non Suit Claim Hub (169008) ADDRESS: Jaistambha Chowk, Near LIC, Ganesh Nagar Road, Gondia , , MAHARASHTRA , 441601. PHONE NUMBER: 1234567890 / MOBILE NUMBER: Email: ch169008@newindia.co.in
---	--	---

INSURED DETAILS

Insured Name	RAJKUMAR SEKSARIA	Customer ID	POC6622095 (PAN No :NA)
Insured Address	SEKSARIA BLDG 74 MARINE DRIVE MUMBAI,,, MUMBAI ,MAHARASHTRA, 400020	Contact Number	/ / XXXXXX9991
		Email	kunalvajirkar1998@gmail.c om
		GSTIN	NA

POLICY DETAILS

Period of cover	17/10/2025 03:51:34 PM to 16/10/2026 11:59:59 PM	Receipt Number	10000089251000615711 - 17/10/25
Previous Insurer	Not applicable	Previous Policy Number	.

VEHICLE DETAILS

Registration Number	MH-01-BG-0489	Chassis no./Engine Number	WDD2120486L029115/271 86030533483
Make / Model	MERCEDES B/E-CLASS	Variant:	W212 E 220 CGI
Year of manufacture	2012	Type of body / Type of Fuel	Saloon/Petrol
Colour	I grey	Cubic capacity(cc) /Wattage(kW):	1796cc
Seating capacity including Driver	5	Name of registration authority	Mumbai Central
Geographical Area / Zone	India	Name of the Financier	
Cover Note No/Cover Note Issue Date:	/	Automobile Association membership	none
FASTag ID:			

INSURED DECLARED VALUE (in Rs)

Vehicle	Trailer	Non-Elec Acc	Electrical Acc	Bi-fuel/CNG/LPG kit	Total Value
974000	0	0	0		974000

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium	5403	Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000) (+)Legal Liability Premium for Paid Driver for 1 person(IMT - 28) (+)PA premium for UnNamed/Hirer/Pillion Persons (100000 per person) for 4 person (IMT - 16)	7897 275 50 200
Calculated OD Premium	5403	Calculated TP Premium	8422
Total OD Premium	5403	Total TP Premium	8422

Policy No. : 16030231250100001668Document generated by QR_RENEWAL at 2025/10/17 15:51:46.

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

Give your valuable feedback on <https://www.newindia.co.in/portal/policyFeedbackGen>.

For redressal of 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 <https://newindia.co.in>.



Net Premium in Rs	13,825
GST in Rs	2,488
Total Payable in Rs	16,313
Total Payable in Rs(in words):	RUPEES SIXTEEN THOUSAND THREE HUNDRED THIRTEEN ONLY

GSTIN(Issuing Office)	27AAACN4165C3ZP
SAC	997134 (Motor vehicle insurance services)
Limitation as to use: The Policy covers use of the vehicle 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	
Limits of Liability: Limit of the amount the Company's Liability Under Section II 1(i) in respect of any one accident: as per the Motor Vehicles Act, 1988. Limit of the amount of the Company's Liability Under Section II 1(ii) in respect of any one claim or series of claims arising out of one event: Up to Rs. 7,50,000	
For individual covers (OD) in RS: 974000	Compulsory excess in Rs: 2000
Imposed excess in Rs: 0	Voluntary excess in Rs: 0
Persons or classes of persons 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 requirement of Rule 3 of the Central Motor Vehicles Rules, 1989.	

PA cover for Owner Driver

Name of Nominee	Age of Nominee	Relationship with the Insured	Name of the Appointee (if Nominee is a minor)	Relationship to the Nominee
NA	0	NA	none	none

PA cover for named persons

Name	CSI Opted(Rs.)	Nominee	Relationship
none	0	NA	NA

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		Rs 13,825
SGST	9	1244
CGST	9	1244
IGST	0	0

In witness where of this policy has been signed at GONDIA BRANCH on this 17-OCT-25 WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED ABINITIO This policy is subject to the Terms, conditions and exceptions applicable to Package policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 16,22,28.

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 Vehicles Act, 1988 is recoverable from the insured: see clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHTS OF RECOVERY". It is clarified that in case the declaration regarding the ncb or other previous policy details made by the insured, is found to be incorrect, all the benefits (including claim) under section-1 of this policy, will stand forfeited.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding Rs 1 lakh or a claim for refund of premium exceeding Rs 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company website.

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 XI of M.V. Act, 1988.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 17/10/2025



(Mr. ROSHAN BORKAR)
[SENIOR BRANCH MANAGE]
Duly Constituted Attorney(s)

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.

Tax Invoice No : 16030225P0003115

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C
