



POLICY SCHEDULE CUM CERTIFICATE OF INSURANCE

Private Car Liability Policy

UIN Number - IRDAN190RP0001V01200203

Policy Number :13130031230200006036

POLICY ISSUING OFFICE:
NEW INDIA CENTRE DO (131300),
10TH FLOOR, NEW INDIA CENTRE, , , ,
MAHARASHTRA , 400039.
PHONE NUMBER:02222811187 /
02222870346
FAX NUMBER:NA / NA
Email:nia.131300@newindia.co.in

BUSINESS CHANNEL/CPSC User:
NAME:
Coverfox Insurance Broking Pvt Ltd -
(BR00000166),
PHONE NUMBER:18002099970 / 18002099970 /
LAND/FAX NUMBER:/
EMAIL: / help@coverfox.com

CLAIM CONTACT:
MRO-IV CLAIM HUB (130001)
ADDRESS: New India Centre, 13th Floor, 17/A,
Cooperage Road, Mumbai 400039 , , ,
MAHARASHTRA , 400039.
PHONE NUMBER: 02222023513 /
MOBILE NUMBER:
Email: ch13@newindia.co.in

INSURED DETAILS

Insured Name	YUSRA LATAFAT	Customer ID	POA7173425 (PAN No :NA)
Insured Address	H.No-26/74, TILAK BAZAR, AGRA-282003,,, AGRA ,UTTAR PRADESH, 282003	Contact Number	/ / XXXXXX1222
		Email	raoshuaib14@gmail.com
		GSTIN	NA

CHANNEL PARTNER CONTACT DETAILS

Channel Partner Name	Email Address(s)	Contact Number(s)
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POLICY DETAILS

Period of cover	12/08/2023 12:00:01 AM to 11/08/2024 11:59:59 PM	Receipt Number	13130081230000009858 - 08/08/23
Previous Insurer	ACKO GENERAL INSURANCE LTD	Previous Policy Number	0

VEHICLE DETAILS

Registration Number	UP-80-DE-6867	Chassis no./Engine Number	CF4101719/L15Z12206416
Make / Model	HONDA/CITY	Variant:	1.5 V MT
Year of manufacture	2015	Type of body / Type of Fuel	Saloon/Petrol
Colour	As per RC Book	Cubic capacity(cc) /Wattage(kW):	1497cc
Seating capacity including Driver	5	Name of registration authority	Agra
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 kit	Total Value
0	0	N/A	N/A	N/A	0

SCHEDULE OF PREMIUM

Own Damage		Liability	
Basic OD Premium	0	Basic TP Premium (+)Compulsory PA Premium for Owner Driver(Sum Insured Rs 1500000)	3416 275
Calculated OD Premium	0	Calculated TP Premium	3691
Total OD Premium	0	Total TP Premium	3691
Net Premium in Rs			3,691
GST in Rs			664

Signature invalid

Digital
by JA
PA
DA
17:11:50 IST

Policy No. : 13130031230200006036 Document generated by BRCOVERFOX at 2023/08/08 17:11:50.
Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 200 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 <http://newindia.co.in>.



Total Payable in Rs	4,355
Total Payable in Rs(in words):	RUPEES FOUR THOUSAND THREE HUNDRED FIFTY-FIVE ONLY
GSTIN(Issuing Office)	27AAACN4165C3ZP
SAC	997134 (Motor vehicle insurance services)
Limitation as to use:The policy covers use for any purpose other than: a) Hire or reward b) Organized racing, OR c) Speed testing	
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:0	Compulsory excess in Rs:NA
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
Mohd Javed Bhatti	40	Husband	NA	NA

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 3,691
SGST	0	0
CGST	0	0
IGST	18	664

In witness where of this policy has been signed at NEW INDIA CENTRE DO on this 08/08/2023 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/Liability policy attached/available on the web site <http://newindia.co.in>; IMT Endorsement Number(s) printed herewith attached 22.

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 1lakh 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.

Date of Issue: 08/08/2023

For and on behalf of The New India Assurance Company Limited

(SANJAY GOKHALE)
[DIVISIONAL MANAGER]

Insurance Purchase Statement

Mentioned below are the transaction details for your New India Assurance policy purchased on Coverfox.com. A policy document will be issued against these details.

Personal Details

Name: **Yusra Latafat**
Mobile: +91 97****222
Email: ra****com
Address: H.No-26/74, Tilak, Bazar,, Agra-282003,
Agra, Uttar Pradesh, 282003

Policy Details

Policy No.: **13130031230200006036**
Policy Type: Third party
Policy Purchase Date: 08/08/2023
Policy Start Date: 12/08/2023
Policy End Date: **11/08/2024**
Total Premium: ₹ 4355.0
Payment Date: 08/08/2023

Vehicle Details

HONDA CITY 1.5 V MT 1497 (Petrol)	Registration No.: UP-80-DE-6867
Engine No.: L15Z12206416	Chassis No.: CF4101719
Registration Date: 13/04/2015	Financier: NA
Category: Private	

Coverage

Vehicle IDV: ₹ NA	Owner Driver Cover: ₹ 1500000
Value of CNG/LPG Kit: ₹ NA	Passenger Cover (per passenger): ₹ 0
Electrical Accessories: ₹ NA	Driver Cover: ₹ No
Non Electrical Accessories: ₹ NA	Third Party Property Damage Cover: ₹ 750000
Add-On: Personal Accident Cover	Voluntary Deductible: ₹ 0
No Claim Bonus: 0%	

Note:

Your new policy details will be updated within next 30 days on mParivahan.

This is only a transaction confirmation receipt and cannot be used for filing claims.

Have questions, suggestions or complaints? Connect with our Customer Service Unit:

Toll free no.: 022 4897 1018 (Mon to Sat, 9am-9pm) **Email:** help@coverfox.com

Coverfox Insurance Broking Pvt. Ltd. : C Wing, 6111-6118, 6th Floor, Oberoi Garden Estate, Chandivali Farm Road, Chandivali, Andheri (East), Mumbai - 400072

IRDAI Direct Broker Code: IRDA/ DB 556/ 13, Valid till: 26/12/2025

IRDA Reg No: 190

Tax Invoice No: 13130023 P0014077