



**Universal Sampo
General Insurance Co. Ltd.**
Suraksha, Hamesha Aapke Saath

Office No 517-518, 5th Floor, Globus Megamall The Mall, Kanpur Kanpur - 208001, Uttar Pradesh
(State Code-09)
PH - Helpdesk No: 1800224030
GSTIN: U9AAACU8917F124

CERTIFICATE CUM INSURANCE POLICY SCHEDULE CUM PAYMENT RECEIPT

Proposal No. & Date
P19602517, 27/02/2022

Policy No. 2367/66154620/00/000	Issued at: 15:33 Hours on 27/02/2022 [UTR :]	Period of Insurance OP: 27/02/2022 (15:33 Hrs) To 26/02/2023 (Midnight) TP: 27/02/2022 (15:33 Hrs) To 26/02/2025 (Midnight)	GSTIN NA	Previous Policy No. NA
Insured's Name MS. HARSHITA SACHAN	Insured's Address D/O SATYA BHAN SINGH, 174/W, -2, JUHI KALA, DAMODAR NAGAR, BARRA KANPUR - 208027 Uttar Pradesh (State Code-09)		Body Color Meteoroid Gray M.	Previous Insurer NA
Chassis No. MAKD1508BN4306995	Engine No. L12847523747	Model AMAZE/1.2 VX CVT	CC 1198	Registration No. NA
Geographical Area India	Date of First Sale 27/02/2022	Mfg. Year 2022	Seating Cap. 5	Fuel Type Petrol
INSURED'S DECLARED VALUE (Rs.)		BI Fuel Kit: NA		Total IDV: 865925
Vehicle: 865925	Electrical Accessories: 0	Non Electrical Accessories: 0		

SCHEDULE OF PREMIUM		Amount (Rs.)
A. Own Damage Premium		
Basic Premium	9671	9671
Vehicle	9671	9671
Non Electrical Accessories	0	0
Electrical Accessories (IMT-24)	0	0
BI Fuel Kit (IMT-25)	0	0
Basic Premium Total	9671	9671
Add Geographical Area Ext. (IMT-1)	0	0
Sub Total	9671	9671
Deductibles		
Voluntary Deductibles (IMT-22A)	0	0
Anti Theft Device (IMT-10)	242	242
AA Membership (IMT-8)	0	0
Handicap (0%)	0	0
NCB (0%)	242	242
Sub Total (Deductibles)	242	242
Add-Ons (Daily Cash Allowance, Depreciation Waiver, Hydrostatic Lock Cover)	7351	7351
Net Own Damage Premium(A)	16790	16790
B. Liability Premium		
Third Party Liability	9534	9534
Basic Third Party Liability Premium including TPPD	9534	9534
Sub Total (Third Party Liability)	9534	9534
PA Cover	975	975
Compulsory PA Cover for Owner Driver	975	975
Nominee: MR. AYUSH SACHAN (BROTHER) (18years)	300	300
Optional PA cover for Paid Driver (IMT-17)	1500	1500
Optional PA Cover (200000 Per Person) for 5 Persons (IMT-16)	2775	2775
Sub Total (PA Cover)	975	975
Legal Liability	150	150
Paid Driver (IMT-28)	0	0
Employees (for 0 persons) (IMT-29)	150	150
Sub Total (Legal Liability)	150	150
Geographical Area Ext.(TP)	0	0
Net Liability Premium(B)	12459	12459
Total Premium (A + B)	29249	29249
SGST (9%)	2633	2633
CGST (9%)	2633	2633
Gross Premium Paid	34515	34515

- Note -
- Issue of Policy is subject to realisation of cheque if premium is paid by cheque.
 - Consolidated stamp duty paid to State Exchequer.
 - The Policy is subject to a compulsory deductible of Rs. 1000 (IMT-22)

CPA Insurer Name: NA, Valid From: NA, Valid To: NA, CPA Sum Assured: NA,
 Limitations as to use: The Policy covers use of the vehicle for any purpose other than: (1) Hire or Reward (2) Carriage of goods (other than samples or personal luggage) (3) Organised Racing (4) Pace Making (5) Speed Testing (6) Reliability Trials (7) Any purpose in connection with motor trade.
 Driver's Clause: Any person including the insured, provided that the person driving holds an effective and valid 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 & that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.
 Limits of Liability: Limit of the amount of the Company's Liability Under Section II-1 (i) in respect of any one accident, as per 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: UPTO Rs. 7,50,000.
 No Claim Bonus: The insured is entitled for a No Claim Bonus (NCB) on the own damage section of the policy, if no claim is made or pending during the Preceding year-20%, Preceding two consecutive years-25%, Preceding three consecutive years-35%, Preceding four consecutive years-45%, Preceding five consecutive years-50% of NCB on OD Premium. No Claim Bonus only be allowed provided the policy is renewed within 90 days of the expiry date of the previous policy.
 HIP/Lease/Hypothecation with: STATE BANK OF INDIA - EMERALD
 Subject to I.R.T. Endt. Nos. & memorandum: 7,10,16,17,22,28 printed herein.
 You agree to receive the policy document (without enclosing the terms & conditions of policy) from the company and you authorise the company to display Terms & Conditions of the policy on its website that enables access by you.
 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 reasons 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 hold good.
 SAC: 997134. Description of Service: Motor Vehicle Insurance Services, Place of Supply: Uttar Pradesh (State Code-09). Invoice Number: 01HA210006712, Payment Receipt No: 01HA210006712, Payment mode: Cash
 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.

Broker Name: SMC Insurance Brokers Pvt. Ltd.
 Broker Code: 289
 Broker Contact No: 1800 2666 2666



MISP Code: 171000011, MISP Name: SMART CARS LIMITED

Claim Assistance Number:
1800 2666 2666