

**SBI General Insurance Co. Ltd.****Bundled - Private Car Policy CUM RECEIPT UIN:IRDANI44RP0006V02201819****(FORM 51 OF THE CENTRAL MOTOR VEHICLE RULES, 1989)****Servicing Office of Insurer: 2nd Floor, Shop No 7,8 & 9,, Kaveri Centre Block No. 57 Sanjay Palace,, AGRA , UTTAR PRADESH,, AGRA , UTTAR PRADESH-282001 State Code-09****PAN: AAMCS8857L****GSTIN: 09AAMCS8857LIZA Toll Free: 1800 22 1111**

Policy No & Policy Issued On	MIB/1163079, 10 Dec 2023 1:28PM	Period of Own Damage Cover	10 Dec 2023 1:28PM to 09 Dec 2024 11:59PM (Midnight)
Proposal No. & Date	P19717531, 10 Dec 2023	Period of Liability Cover	10 Dec 2023 12:00AM to 09 Dec 2026 11:59PM (Midnight)
Insured Name	MR. DHIRENDRA KUMAR	Period of CPA Cover	10 Dec 2023 12:00AM to 09 Dec 2026 11:59PM (Midnight)
Insured Add.	S/O- VENKESHWER NARAIN SINGH R/O- 2/146 K VISHESH KHAND GOMTI NAGAR , LUCKNOW , UTTAR PRADESH-226010	Previous Policy No	NA
Insured Contact No	XXXXXX2013	Previous Insurer	NA
		Nominee Name	PUJA SINGH Age 41 Relation SPOUSE

Make	Model	Variant		Cubic Capacity/GVW/Kw	Seating capacity
MAHINDRA & MAHINDRA	XUV700	XUV700 AX5 DSL MT 7 SEATER BLK		2184	7
Vehicle Type	Vehicle Sub Class	Carrier Type	Fuel Type	Engine No.	Chassis No./VIN
PRIVATE	CLOSE		DIESEL	ZSP4L36715	MAINE2ZSAP6L17730
Manufacturing Year	RTO	Registration No.	Registration Date	CNG/LPG Kit	Trailer Chassis No/VIN
2023	LUCKNOW - UP32	New		0	
Vehicle IDV	Body IDV	Trailer IDV	Non-Elec. Accessories IDV	Elec. Accessories IDV	Total IDV
1833220	0	0	0	0	1833220

Own Damage Premium (A)		Schedule of Premium (Amount in Rs.)	
Basic Premium		Liability Premium (B)	
Vehicle	25,127	Basic Third Party Liability (including TPPD)	24,596
Trailer (IMT - 30)	0	Third Party Liability For Bi-Fuel Kit	0
Non-Elec. Accessories	0	Trailer (IMT 30)	0
Elec. Accessories (IMT-24)	0	Legal liability to Driver (1) / Cleaner (0) / Helper (0) / Conductor (0) (IMT - 28)	150
CNG/LPG Kit (IMT - 25)	0	PA Cover For Owner Driver (1500000)	909
		PA Cover (200000 per person) for Driver(0) /Cleaner(0) /Helper(0) /Conductor(0) (IMT-17)	0
<b>Sub Total (Basic Premium)</b>	<b>25,127</b>	PA Cover (200000 Per Person) for 7 Unnamed Persons (IMT-16)	2100
Geographical Area Extension (IMT-1)	0	Legal liability to NFPP (0) (IMT - 37)	0
IMT - 34	0	Geographical Areas Extension (IMT - 1)	0
Lamp, Tyre Mudguards (IMT - 23)	0	IMT - 34 TP	0
		<b>Net Liability Premium (B)</b>	<b>27755</b>
Add On (Cover for Consumables, Cover for Key Replacements, Depreciation Reimbursement, Engine Guard, Return to Invoice, Roadside Assistance)	15925	<b>Total Premium (A+B)</b>	<b>68,807</b>
<b>Sub Total-Addition</b>	<b>41,052</b>	CGST(9.00%)	6193
<b>Deductibles</b>		SGST(9.00%)	6193
Voluntary Deductibles (0) (IMT-22A)	0	<b>Gross Premium Paid</b>	<b>81,193</b>
Anti Theft Device (IMT-10)	0	Note: 1. Policy issuance is subject to realization of cheque	
AA Membership (IMT-8)	0	2. Consolidated stamp duty paid to state exchequer	
No Claim Bonus (0%)	0	3. The policy is subject to compulsory deductible of Rs.2000 (IMT-22)	
<b>Sub Total (Deductibles)</b>	<b>0</b>	4. Geographical Area-India	
<b>Net Own Damage Premium (A)</b>	<b>41,052</b>	*Subject to IMT Endt. Nos. & Memorandum: 16.22.28,7	

**Hypothecation Details: Hypothecation, STATE BANK OF INDIA, - LUCKNOW****MISP Details: Name: DEEP AUTOMOBILES Code: MIBL/M&M/AACFD3833G/000 Receipt No: 0000001163079 Payment Mode: ACH Reference code: D010091DEA1****Addon Cover(s) UIN: 1) , , , ,****Limitations 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:** (a) Under Section II-I(i) of the policy: Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988. (b) Under Section II-I(ii) of the policy: Damage to Third Party Property: 750000/-; PA Cover for Owner-Driver under Section III: CSI: 1500000/-.**Driver's Clause:** Any person including the insured: Provided that the person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such 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 Vehicle Rules, 1989.**Grievance Clause:** For resolution of any query or grievance, Insured may contact the respective branch office of the company or may call at 1800 22 1111 or may write an email at customer.care@sbgeneral.in. In case the insured is not satisfied with the response of the office, insured may contact the Grievance Officer of the Company at care@sbgeneral.in. In the event of unsatisfactory response from the Grievance Office, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDAI website: www.irdai.gov.in, or on the website of General Insurance Council: www.gicouncil.in or on the company website www.sbgeneral.in. The Policy wording is available on request at free of cost. The Same can be downloaded from our Website www.sbgeneral.in.**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 hold good.

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 Motor Vehicle Act, 1988

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.

**HSN : 997134 Description of Service: Motor vehicle Insurance Place of Supply : UTTAR PRADESH(State Code : 09) Invoice Number : 0000001163079****UIN: IRDANI44RP0006V02201819****For & On Behalf of SBI General Insurance Co. Ltd.**