The Policy is sourced and serviced by Marati Suzuki Insurance Broking Private Limited 1 Nelson Mandela Road, Vasant Kunj, New Delhi - 110070

Customer Support

not a part of the policy document, Please Detach her



SBI General Insurance Company Ltd. IRDAI Reg, No. 144. CIN - U66000MH2009PLC190546

			ORIGINAL	FOR RECIPIENT	/ DUPLICATE FOR SUPPLIER	, 14	
			TAY TAIL	OTCE/CERTIFICA	TE CUM POLICY SCHEDULE		
			(FORM 51 O	F THE CENTRAL M	OTOR VEHICLES RULES, 1989)	N0003536817 / 27-DEC-2023 18:41	
Policy Type & UIN:		Bundled Motor Policy- 3 Yr TP + 1 Yr OD(Private Vehicle & IRDAN144RP0006V02201819			Proposal No & Date	Own Damage 27-DEC-2023 19:57 to 26-DEC-2024 23:5 Tring Party 27-DEC-2023 19:57 to 26-DEC-2026 23:5	
Policy No 209175/N0003536817				Period of Insurance			
		27-DEC-2023 19:57	-2023 19:57		T CHOO OF INCOLOR	MA3RYHK1SPL327833	
		Mr. HARENDRA KUMAR	Mr. HARENDRA KUMAR OJHA		Vehicle Identification No.		
Invoice No		0000MAR209175			Geographical Area	India NA Uttar Pradesh	
Insured Address		ADD-1- SHIVPURI COLONY MADHKARPUR SIDDHARTHNAGAR UP-272207, ADD-25- 643 S/37A		GST No & State	<u> </u>		
		SANSKRIT NAGRAM SITAPUR ROAD MARKANDEY DHARM SHRLS FAIZULLA GANJI BATHA, LUCKNOW UTTAR PRADESH-226021			Accounting Code of Service	997134	
Insured State &	Uttar Pradesh-	09 Place of Supp	y Uttar Prac	desh	GSTIN of Customer	GSTUNREGISTERED	
	-1			Motor Veh	icle Details		
Make		Maruti Suzuki		Seating Capacity	SUV PEARL ARCTIC WHITE		
Model - Variant		NEW BREZZA K15C ISG 5MT VXI BS6 VZR4AVA00		Type of Body Colour			
Registration No		NEW		Fuel Type	Petrol		
Year of Manufacture 2023		2023	3		RTO Location	LUCKNOW	
Lngine Chassis No. K15CN9364421 - MA3RYHK1SPL3278			33	Zone	В		
Cubic Capacity		1462			FASTag ID		
					ared Value (₹)	it ₹ 0 Total IDV ₹ 92198	83
Vehicle ₹ 9	16275 No	n Electrical Accessories		Electrical Accesso		it ? U	
				Schedule Of Prem	nium (Amount In ₹)	Liability Section(B)	
Own Damage Section(A)					₹ 10640		
Vehicle				₹ 4386	Basic Third Party Liability Compulsory PA Cover Premium	[3 Year]	₹ 909
Non Flec Accessories			i	P.A Cover to Unnamed Passengers 5 Person of Rs200000 each (IMT-16) ₹ 1500			
	DING of value Rs			₹ 27	Legal Liability (WC) to Driver (IMT-28)	₹ 150
2. MUD FLAP of					Net Liability Premium (B)		₹ 13,199
3. NUMBER PLATE GARNISH of value Rs. 474					Total Premium (A+B)		₹ 24,417
4. DOOR VISOR of value Rs. 1796				₹ 4413	CCST @9%		₹ 2,197.5
Basic Premium					SGST @9%		₹ 2,197.5
Deductibles Anti-Theft Device (IMT-10)				₹ 110	Gross Premium Paid ₹ 28,812		₹ 28,812
Anti Their Device (1811-10) Sub - Iotal Deductibles				₹ 110	Luciani and the state of the st		
Sub - Total Deductibles Depreciation						I LID	
Reimbursement(IRDAN144RP0006V02201819/A0023V01201819)			819)	₹ 4610	Notes: - 1. Policy Issuance is subject to realisation of premium.		
			₹ 922	2. Consolidate stamp duty paid to State Exchequer 3. Policy is subject to a compulsory Deductible of Rs 1000 (IMT -22) 4. Voluntary excess Rs (0)			
Return to Invo ce(IRDAN144RP0006V02201819/A0024V01201819)			₹ 11218				
Net Own Damage Prem	nium (A)			(11216	5. Subject to Endorsemen 6. Warranted that the insu Control (PUC) Certifical	ts IMT 10,16,28, , ured named herein/owner of the vehicle holds a valid Pollt. e, as applicable, on the date of commencement of the Po d maintain a valid and effective PUC, as applicable, durin y. Further, the company reserves the right to take approp	licy and ng the
					Control (PUC) Certifical undertakes to renew ar subsistence of the Polic	e, as applicable, on the date of commencement of the Po di maintain a yalid and effective PUC, as applicable, durin y. Further, the company reserves the right to take approp screpancy in the PUC.	licy and

Relation: Wife Age: 43 Nominee Name: Mrs SHASHI KALA OJHA Financier Details Financier Branch: CIVIL LINE GONDA Financier Name: STATE BANK OF INDIA Financier Type: finance Payment Details
Bank Name: ICICI BANK LIMITED Cheque No/Transaction No: Amount: 28,812 Payment Mode: Credit Card

77049454718 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 personal luggage), c) Organized

racing, d) Pace making, e) Speed testing, f) Reliability Trials, g) Any purpose in connection with Motor Trade.

Driver: Any person including the insured, Provided that a person driving holds an effective driving license at the time of the acc m 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 sal Ruld 3 of the Central Motor Vehicles Evenicles Act, 1988, Under Section

Limits of Liability: Under Section II-1 (i) of the policy - Death of or bodily Injury - Such amount as is necessary to meet then II 1(n) of the Policy - Damage to Third Party Property - Rs.750000 - (as per IMT 20)in respect of any one claim or series of claims section III (CSI) Rs 1500000 - Deductible under section-I : Rs 1000(Compulsory Deductible Rs 1000 Imposed Deductible Rs, 0 and ig out at one event. Co n. Cover for Owner - Driver under adring the preceding year (s), as per the

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 gr papgimp tollowing: The preceding year/20%. Preceding Two consecutive years/25%, Preceding Three consecutive years/35%, Preceding Four con years/50%. No Claim Bonus will only be allowed provided the policy is renewed within 90 days of the expiry date of the previous policy. ats/45%, Preceding Five consecutive

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 INCHIO OF RECOVERY". For Legal interpretation, English version will hold good.

For information on ombudsman you may visit website: https://www.cioins.co.in/Ombudsman

1 / 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 Chap



Policy Issuing Office: Unit Nos. 414/414A and 413, 2nd floor, K&s Trident, 10 Rana Pratap Marg, Lucknow - 226001 GSTIN: 09AAMCS8857L1ZA, CIN No: U66000MH2009PLC190546. State Name: Uttar Pradesh

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