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|------------------------------|--|----------------------------|--|
| Policy No & Policy Issued On | 3001/MIM-19378303/00-000 , 16 Jul 2024 7:19PM | Period of Own Damage Cover | 16 Jul 2024 7:19PM to 15 Jul 2025 11:59PM (Midnight) |
| Proposal No. & Date | P23184053, 16 Jul 2024 | Period of Liability Cover | 16 Jul 2024 7:19PM to 15 Jul 2027 11:59PM (Midnight) |
| Insured Name | MR DHRUV SINGH | Period of CPA Cover | 16 Jul 2024 7:19PM to 15 Jul 2027 11:59PM (Midnight) |
| Insured Add. | S/O JITENDRA NATH SINGH , S 8/108-G DIG COLONY PRASANIPURI MAKBOOL ALAM ROAD , VARANASI , UTTAR PRADESH-221002 | Previous Policy No | NA |
| Insured Contact No | XXXXXX3939 | Previous Insurer | NA |
| | | Nominee Name | DEEPTI SINGH Age 43 Relation SISTER |

| Make | Model | Variant | | Cubic Capacity/GVW/Kw | Seating capacity |
|---------------------|-------------------|------------------|---------------------------|-----------------------|------------------------|
| MAHINDRA & MAHINDRA | SCORPIO-N | BS6 2-Z8 S D AT | | 2184 | 7 |
| Vehicle Type | Vehicle Sub Class | Carrier Type | Fuel Type | Engine No. | Chassis No/VIN |
| PRIVATE | CLOSED | | DIESEL | YGR4F70976 | MAITJ2YGTR6F58615 |
| Manufacturing Year | RTO | Registration No. | Registration Date | CNG/LPG Kit | Trailer Chassis No/VIN |
| 2024 | VARANASI - UP65 | New | | 0 | |
| Vehicle IDV | Body IDV | Trailer IDV | Non-Elec. Accessories IDV | Elec. Accessories IDV | Total IDV |
| 1823050 | 0 | 0 | 0 | 0 | 1823050 |

Schedule of Premium (Amount in Rs.)

| Own Damage Premium (A) | | Liability Premium (B) | |
|---|--------|---|---------|
| Basic Premium | | Basic Third Party Liability (including TPPD) | 24,596 |
| Vehicle | 46,319 | Third Party Liability For Bi-Fuel Kit | 0 |
| Trailer (IMT - 30) | 0 | Trailer (IMT - 30) | 0 |
| Non-Elec. Accessories | 0 | Legal liability to Driver (1) / Cleaner (0) / Helper (0) / Conductor (0) (IMT - 28) | 150 |
| Elec. Accessories (IMT-24) | 0 | PA Cover For Owner Driver (1500000) | 1,899 |
| CNG/LPG Kit (IMT - 25) | 0 | PA Cover 0 per person for Driver(0)/Cleaner(0)/Helper (0)/Conductor(0) (IMT-17) | 0 |
| Sub Total (Basic Premium) | 46,319 | PA Cover 0 Per Person for 0 Unnamed Persons(IMT-16) | 0 |
| 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 |
| | | Legal liability to Employee (0)(IMT - 29) | 0 |
| | | Net Liability Premium (B) | 26645 |
| Add On (Consumables,Engine Protect,Key Replacement,Nil Dep,RSA) | 11891 | Total Premium (A+B) | 84,855 |
| Sub Total-Addition | 58,210 | CGST(9.00%) | 7637 |
| Deductibles | | SGST(9.00%) | 7637 |
| Voluntary Deductibles (0) (IMT-22A) | 0 | Gross Premium Paid | 100,129 |
| Anti Theft Device (IMT-10) | 0 | Note: 1.Policy Issuance Is subject to realization of cheque | |
| AA Membership (IMT-8) | 0 | 2.THE STAMP DUTY OF '0.5 PAID VIDE DEFACE NO. CSD4520241 123 DATED 30/01/2024 | |
| No Claim Bonus (0%) | 0 | NOTE:THIS CHALLAN NUMBER IS NOT APPLICABLE FOR JAMMU & SRINAGAR POLICIES | |
| Sub Total (Deductibles) | 0 | 3.The policy is subject to compulsory deductible of Rs 2000 (IMT-22) | |
| Net Own Damage Premium (A) | 58,210 | 4.Geographical Area-India | |
| | | *Subject to IMT Endt. Nos. & Memorandum:28,22 | |

Hypothecation Details: Hypothecation, PUNJAB NATIONAL BANK, MAHAVIR MANDIR MARG - VARANASI

MISP Details: Name: RAJ INDIA AUTO PVT LTD Code: MIBL/M&M/AADCR4576J/000 Receipt No: 180724190316 Payment Mode: ACH Reference code: R010681RIA2

Addon Cover(s) UIN: 1)IRDANI15RP0006V01201819/A0022V01201819 , IRDANI15RP0006V01201819/A0025V01201819 , IRDANI15RP0006V01201819/A0026V01201819 , IRDANI15RP0006V01201819/A0021V01201819 , IRDANI15RP0006V01201819/A0028V01201819

Limitations as to use: The Policy covers use of the vehicle for any purpose other than: Hire or Reward, Carriage of goods (other than samples of personal luggage), Organised racing, Pace Making, Reliability trails or Speed testing, any purpose in Connection with Motor Trade

Limits of Liability: (a) Under Section II-(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-(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 you may contact us on our toll free no. 1800 2666, or visit any of our branch offices. You can also write to us at customersupport@icicilombard.com . For detailed grievance redressal mechanism please visit the "Grievance Redressal" section on our website www.icicilombard.com .

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.

Disclaimer: Please visit www.icicilombard.com for the policy wordings, for complete details on terms and conditions governing the coverage and NCB. This document is to be read with the policy wordings. The policy is valid subject to realization of cheque. We accept premium only via legally recognized modes. In case of dishonour of premium cheque, the company shall not be liable under the policy and the policy shall be void ab-initio. In case of any discrepancy with respect to the policy, please revert within 15 days from the policy start date. This policy is underwritten on the basis of the information provided by you and as detailed in the Risk Assumption Letter shared with you along with the policy. On renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change.

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 : 180724190316

UIN: IRDANI15RP0021V02202122

For & On Behalf of ICICI Lombard General Insurance Co. Ltd.