



ICICI Lombard General Insurance Company Ltd.
 Chamber 1, Fourth Floor, Eldoco Corporate, Gomti Nagar, Lucknow, Uttar Pradesh
 226024 Lucknow - 226024, Uttar Pradesh (State Code-09)
 Ph: - Helpdesk No:18002666
 GSTIN:09AAACI7904G1ZL

CERTIFICATE CUM INSURANCE POLICY SCHEDULE CUM PAYMENT RECEIPT

Policy No. 3001/HA-100819045/00/000	Bundled - Private Car Policy Issued at: 17:14 Hours on 09/02/2024 [UIN : IRDAN11SRP0021V02202122] Period of Insurance: OD: 09/02/2024 (17:14 Hrs) To 08/02/2025 (Midnight) TP: 09/02/2024 (17:14 Hrs) To 08/02/2027 (Midnight)	Proposal No. & Date P28173457, 09/02/2024
Insured's Name MRS. ANJANA	Insured's Address H.NO-K.A.-248 1ST FLOOR NEAR GANGAJAL PLANT SEC-12 PRATAP VI GHAZIABAD - 201009 Uttar Pradesh (State Code-09)	GSTIN NA
Chassis No. MAKGN257JP4202355	Engine No. L15ZD2016569	Model CITY/1.5 RDE ZX MT
Geographical Area India	Date of First Sale 09/02/2024	Mfg. Year 2023
	Seating 5	Body Color Platinum White P
	Place of Registration Ghaziabad	Fuel Type Petrol
	Previous Policy No. NA	Previous Insurer NA
	Registration No. NA	

INSURED'S DECLARED VALUE (Rs.)			
Vehicle: 1426805	Electrical Accessories: 0	Non Electrical Accessories: 0	BI Fuel Kit: NA
			Total IDV: 1426805

SCHEDULE OF PREMIUM			
A. Own Damage Premium	Amount (Rs.)	B. Liability Premium	Amount (Rs.)
Basic Premium		Third Party Liability	
Vehicle	13659	Basic Third Party Liability Premium including TPPD	10640
Non Electrical Accessories	0	Sub Total (Third Party Liability)	10640
Electrical Accessories (IMT-24)	0	PA Cover	
BI Fuel kit (IMT-25)	0	Compulsory PA Cover for Owner Driver	
		Nominee: ANIL KUMAR (HUSBAND) (54Years)	1336
Basic Premium Total	13659	Optional PA cover for Paid Driver (IMT-17)	300
Add Geographical Area Ext.(IMT-1)	0	Optional PA Cover (200000 Per Person) for 5 Persons (IMT-16)	1500
Sub Total	13659	Sub Total (PA Cover)	3136
Deductibles		Legal Liability	
Voluntary Deductibles (IMT-22A)	0	Paid Driver (IMT-28)	150
Anti Theft Device (IMT-10)	0	Employees (for 0 persons) (IMT-29)	0
AA Membership (IMT-8)	0	Sub Total (Legal Liability)	150
Handicap (0%)	0	Geographical Area Ext.(TP)	0
NCB (0%)	0		
Sub Total (Deductibles)	0		
Add-Ons (Zero Depredation)	9275		
Net Own Damage Premium(A)	22934	Net Liability Premium(B)	13926
Note:-		Total Premium (A + B)	36860
1. Issue of Policy is subject to realisation of cheque if premium is paid by cheque.		SGST(9%)	3318
2. Consolidated stamp duty paid to State Exchequer.		CGST(9%)	3318
3. The Policy is subject to a compulsory deductible of Rs. 1000(IMT-22)		Gross Premium Paid	43496

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.

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.

HP/Lease/Hypothecation with:-
 Subject to I.M.T Endt. Nos. & memorandum: 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: 180224100368, Payment Receipt No: 180224100368, 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.

Imp note: Own Damage cover shall end on completion of first year of this comprehensive bundled policy. The policy will continue as a third party cover governed by standard wordings of Act only till the end of remaining period of policy. If the 'Own Damage Cover' under your policy is cancelled during the policy period, then your policy shall be governed by the standard terms and conditions of 'Act only' policy for the Third Party Cover during the remaining period of policy.

Broker Name: SMC Insurance Brokers Pvt. Ltd. Broker Code: 289 Broker Contact No.: 1800 2666 2666		For & On Behalf of ICICI Lombard General Insurance Company Ltd. Authorised Signatory MISP Code: 171000039, MISP Name: AXON AUTOTEC PVT LTD
Claim Assistance Number: 1800 2666 2666		
For Renewal Please Contact : AXON HONDA, AXON AUTOTEC PVT LTD, A 8, PLOT NO 1 & 2, SECTOR 22, MEERUT ROAD INDUSTRIAL AREA, GHAZIABAD, UP, Ph: STD-		
CPA Insurer Name: NA,	Valid From: NA,	Valid To: NA,
CPA Sum Assured: NA,		