

Dear MR. NASEEM AHMAD ,

Greetings from Mahindra Insurance Brokers!!!

We welcome you to the Ensure by Mahindra family and thank you for choosing our Insurance Program. Ensure by Mahindra is a specially designed Insurance Program to give you a delightful ownership experience of the Mahindra vehicle by giving a smooth hassle free experience on your Vehicle Insurance. The Insurance is provided by the Insurance companies with whom MIBL is associated for selling its products.

The key benefits will be as follows:

- **Near Cashless facility**
- **Standard and faster Claim settlement**
- **Hassle -free Renewal**
- **Range of Add-on Covers**

Your satisfaction is our first priority. Please find enclosed:

- Certificate of Insurance (insurance policy)
- Policy wordings providing Terms & Conditions

All the above benefits will be available to you at Mahindra Dealer Service Centres. In the unfortunate event of damage to your Vehicle all you need to do is to get in touch with the Dealer Service Centre or the Insurance Company by dialling on the toll free number 022 6234 6234

We once again thank you for choosing Ensure by Mahindra.

Best Wishes  
Mahindra Insurance Brokers

**HDFC ERGO General Insurance Co. Ltd.****Private Car Package Policy - Bundled CUM RECEIPT UIN:IRDAN125RP0008V01201819**  
(FORM 51 OF THE CENTRAL MOTOR VEHICLE RULES, 1989)**Servicing Office of Insurer:** HDFC Ergo General Insurance company Ltd. D -1, 1 st floor M.G. Tower,RDC Rajnagar ,Ghaziabad (U.P. , GHAZIABAD , UTTAR PRADESH-201204 State Code-09**PAN:** AACT0627R **GSTIN:** 09AABCL5045N1Z6 **Toll Free:** 022 6234 6234

<b>Policy No &amp; Policy Issued On</b>	2302206205446500000 , 13 Mar 2024 12:33PM	<b>Period of Own Damage Cover</b>	13 Mar 2024 12:33PM to 12 Mar 2025 11:59PM (Midnight)
<b>Proposal No. &amp; Date</b>	P21555454, 13 Mar 2024	<b>Period of Liability Cover</b>	13 Mar 2024 12:00AM to 12 Mar 2027 11:59PM (Midnight)
<b>Insured Name</b>	MR. NASEEM AHMAD	<b>Period of CPA Cover</b>	13 Mar 2024 12:00AM to 12 Mar 2027 11:59PM (Midnight)
<b>Insured Add.</b>	161, MOHIUDDINPUR KHAND 2,MOHIDDINPUR , SAHARANPUR , UTTAR PRADESH-247001	<b>Previous Policy No</b>	NA
<b>Insured Contact No</b>	XXXXXX4430	<b>Previous Insurer</b>	NA
		<b>Nominee Name</b>	NAZMEEN BANO Age 40 Relation SPOUSE

Make	Model	Variant	Cubic Capacity/GVW/Kw	Seating capacity	
MAHINDRA & MAHINDRA	XUV300	MAHINDRA XUV300 W2 PM BS6 MT XH	1197	5	
Vehicle Type	Vehicle Sub Class	Carrier Type	Fuel Type	Engine No.	Chassis No./VIN
PRIVATE	CLOSED		PETROL	NPRZA51608	MA1NM2NP1R2A67671
Manufacturing Year	RTO	Registration No.	Registration Date	CNG/LPG Kit	Trailer Chassis No/VIN
2024	SAHARANPUR - UP11	New		0	
Vehicle IDV	Body IDV	Trailer IDV	Non-Elec. Accessories IDV	Elec. Accessories IDV	Total IDV
759050	0	0	0	0	759050

**Schedule of Premium (Amount in Rs.)**

Own Damage Premium (A)		Liability Premium (B)	
<b>Basic Premium</b>		<b>Basic Third Party Liability (including TPPD)</b>	<b>10,640</b>
Vehicle	8,963	Third Party Liability For Bi-Fuel Kit	0
Trailer (IMT - 30)	0	Trailer (IMT - 30)	0
Non-Elec. Accessories	0	Legal liability to Driver (0) / Cleaner (0) / Helper (0) / Conductor (0) (IMT - 28)	0
Elec. Accessories (IMT-24)	0	PA Cover For Owner Driver (1500000)	900
CNG/LPG Kit (IMT - 25)	0	PA Cover (90000 per person) for Driver(1) /Cleaner(0) /Helper(0) /Conductor(0) (IMT-17)	135
<b>Sub Total (Basic Premium)</b>	<b>8,963</b>	PA Cover (90000 Per Person) for 5 Unnamed Persons (IMT-16)	675
Geographical Area Extension (IMT-1)	0	Legal liability to NFPP (0) (IMT- 37)	0
IMT - 34	0	Geographical Areas Extention (IMT - 1)	0
Lamp,Tyre Mudguards (IMT - 23)	0	IMT - 34 TP	0
		Legal liability to Employee (0)(IMT - 29)	0
		<b>Net Liability Premium (B)</b>	<b>12350</b>
Add On (Nil Depreciation)	2657	<b>Total Premium (A+B)</b>	<b>23,970</b>
<b>Sub Total-Addition</b>	<b>11,620</b>	<b>CGST(9.00%)</b>	<b>2158</b>
<b>Deductibles</b>		<b>SGST(9.00%)</b>	<b>2158</b>
Voluntary Deductibles (0) (IMT-22A)	0	<b>Gross Premium Paid</b>	<b>28,286</b>
Anti Theft Device (IMT-10)	0	<b>Note: 1.Policy issuance is subject to realization of cheque</b>	
AA Membership (IMT-8)	0	2./ WE HEREBY CERTIFY THAT THE POLICY TO WHICH THE CERTIFICATE RELATES AS WELL AS THE CERTIFICATE OF INSURANCE ARE ISSUED IN ACCORDANCE WITH THE PROVISION OF CHAPTER X, XI OF M. V. ACT 1988." THE STAMP DUTY OF RS 0.50 PAID BY THE DEMAND DRAFT, VIDE RECEIPT/ CHALLAN NO. : NO.LO/ENF-1/CSD/34/2023/ (VALIDITY PERIOD DT. 28/12/2023 TO DT. 31/12/2026 /6045 DATE 27/DEC/2023 GRN NO. MH011651000202324M DT. 30/11/2023 DEFAACEMENT NO. 0006692260202324 DT. 21/12/2023 .AS PRESCRIBED IN GOVERNMENT OF MAHARASH	
No Claim Bonus (0%)	0	3.The policy is subject to compulsory deductible of Rs.1000 (IMT-22)	
<b>Sub Total (Deductibles)</b>	<b>0</b>	4.Geographical Area-India	
<b>Net Own Damage Premium (A)</b>	<b>11,620</b>	*Subject to IMT Endt. Nos.& Memorandum:,16,17,22,7	

**Hypothecation Details: Hypothecation, STATE BANK OF INDIA, MAIN BRANCH - BARABANKI****MISP Details: Name: A AUTOMOVERS PVT LTDCCode: MIBL/M&M/AABCA7615F/000 Receipt No: 2062054465000 Payment Mode: ACH Reference code: A010541AAM1****Addon Cover(s) UIN: 1)IRDAN125RP0008V01201819/A0031V01201819****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 022 6234 6234 or may write an email at care@hdfcergo.com. In case the insured is not satisfied with the response of the office, insured may contact the Grievance Officer of the Company at care@hdfcergo.com.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.hdfcergo.com. The Policy wording is available on request at free of cost. The Same can be downloaded from our Website www.hdfcergo.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.

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 : 2062054465000****IRDAI Registration No: 146****For & On Behalf of HDFC ERGO General Insurance Co. Ltd.**



*A Sharma*

Authorized Signatory

**Broker Name & Corporate Add: Mahindra Insurance Brokers Limited** , Ground Floor, Sadhana House, Behind Mahindra Towers, 570 P.B.Marg, Worli, Mumbai-400018

**Email id:** insurance.care@mahindra.com **Toll Free No: 1800 266 2626** , Mon to Sat from 10.00 AM

**License Code No:** 261 & **Validity:** 17-05-2025 **CIN:**U65990MH1987PLC042609