## DIRECTORS and OFFICERS LIABILITY POLICY SCHEDULE

**Policy No** 253200/48/2022/266 **Prev Policy No** 253200/48/2021/356

Insured's Name : UTTARAKHAND JAL VIDYUT NIGAM LIMITED Issuing Office : DO DEHRADUN (GSTIN: 05AAACT0627R4Z2)

> (GSTIN: 05AAACU6672R1ZN) Address : 4-B, 1st Floor, Sachdeva Colony, : UJJWAL, MAHARNI BAGH GMS ROAD

(Opp- Nainital Bank Ltd.)

Haridwar Road, Dehradun

**DEHRADUN UTTARAKHAND 248001** 

Tel. /Fax /Email **DE35R240011**26 / / 0 / NA Tel. /Fax /Email : 0135 - 2729715, 2729721

Agent/Broker Details

Address

Dev.Off.Code

: LF0000000005 M/S MARSH INDIA INSURANCE BROKERS PRIVATE LTD Agent/Broker

: 1, INDIA BULL CENTRE TOWER-2, SENAPATI BAPAT MARG, ELPHINSTON ROAD(W), **Address** 

MUMBAI 400012, MOB NO 7045922442 ,7045922442 TEL NO 022-Tel/Fax/Email

EXCESS SHALL APPLY AS MENTIONED IN OUR

66512977,MUMBAI,MAHARASHTRA,400012

Interest: 1)5000000

DEHRADUN,

CONDITIONS

2)5000000

1)0 2)0

a) Retention:

b)

c)

Excluded Territories: United States of America &/or Canada

**Total Assets** 

Retroactive Date: 20/07/2019

Territory/Jurisdiction: / INDIA

The Insurance under this policy is extended to cover risks of:

Insuring Clause A, Insuring Clause B

The Insurance under this policy is subject to warranties & Clauses:

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac, the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operaing offices as well as Company's website.

Bank Names are as per the list attached:

None

**DEHRADUN** Place: 08/07/2021 Date:





For and on behalf of The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupees

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## : 022-66512977/7045922442//

Period of Insurance : FROM 00:00 ON 20/07/2021 TO MIDNIGHT OF 19/07/2022

Collection No & I : DC\_I\_IND 2226000988 - 08/07/2021 GST

In witness whereof the undersigned being authorised by and on behalf of the company has herein to set his hands at DO DEHRADUN (GSTIN:

05AAACT0627R4Z2) 08TH DAY OF JULY 2021

Entered By : J P S TOMAR For and on behalf of

Examined By : RAJESH ACCEL The Oriental Insurance Company Limited

Policy Printed By : 264130 IP :

Policy Printed On : 13-JUL-21 11:04:22 MAC :

**Authorised Signatory** 

Place: DEHRADUN Date: 08/07/2021





For and on behalf of The Oriental Insurance Company Limited

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**Authorised Signatory** 

INVOICE NO:052038447 UIN:0

Gross Premium : 7,953 GST : 1432 Stamp Duty : .5 Total : 9,385

Place: DEHRADUN Date: 08/07/2021





For and on behalf of The Oriental Insurance Company Limited

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In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

**Authorised Signatory**