



Personal Accident Insurance ((Group(Unnamed)))
UIN Number -

Insured Name	UTTARAKHAND JAL VIDHYUT NIGAM LTD		
Insured's Details		Issuing Office Details	
Customer ID	PO10747759	Office Code	DEHRADUN DO 340800 (340800)
Address	MAHARANI BAGH GMS ROAD DEHRADUN DEHRADUN, UTTARAKHAND, 248001	Address	15-A, RAJPUR ROAD, 15-A, RAJPUR ROAD, OPP. GANDHI PARK, DEHRADUN - 248 001, 263641
Phone No	9456590029	Phone No	01352657669 / 01352712501
E-mail/Fax	vicky.iotl@gmail.com, /	E-mail/Fax	nia.340800@newindia.co.in /
PAN No	AAACU6672R	S.Tax Regn. No	AAACN4165CST178
GSTIN/UIN	05AAACU6672R1ZN / NA	GSTIN	05AAACN4165C4ZU
		SAC	997139 (Other non-life insurance services excl RI)

Policy Details			
Policy Number	34080042170100000043	Business Source Code	
Period of Insurance	From:11/12/2017 03:52:39 PM To: 10/12/2018 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF/POS	DIRECT BUSINESS - (1D7842540)
Date of Proposal	11-Dec-17	Agent/Bancassurance	
Prev. Policy no.	PU0	Phone No	NA / 01352657669, 01352108164, 9412319924
Client Type	Corporate	E-mail/Fax	/ / /
Staff Discount	No	Type of Cover	NA

Premium:	GST:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
₹ 1684264	₹ 303168	₹ 1987432	₹150	RUPEES NINETEEN LAC EIGHTY-SEVEN THOUSAND FOUR HUNDRED THIRTY- TWO ONLY	3408008117000000 3116 - 11/12/17

Benefits under the Policy: GROUP UNNAMED

Number of Persons								1001-10000		
Sl. No	No of Person	Cadre	Sum Insured per person	Total Sum Insured	Risk Group	Excess	Medical Extension	War & Allied Cover opted		
								Sum Insured	Country	Type of Period
1	2210	Employee s with SI Equal to ₹ 30 lac	3000000	66300000 00	Risk Group III	10000	No	0	NA	NA

Table Details: (Group(Unnamed))

Sl.No	Table A		Table B		Table C		Table D	
	Table A	Sum Insured	Table B	Sum Insured	Table C	Sum Insured	Table D	Sum Insured
1	No	0	Yes	3000000	No	0	No	0

Sl.No	Special Conditions
1	SI is fixed @ Six times of Annual Gross Salary or ₹ 30 lac whichever is less as on December 11, 2017.

Premium and GST Details

Premium

Rate of Tax

Amount in INR

₹ 1684264.00

Validity unknown

Digitally signed
by Srinivasan
Vaideharan
Date: 2017.12.11

Policy No. : 34080042170100000043 Document generated by 36017 at 11/12/2017 16:13:57 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.

THE NEW INDIA ASSURANCE CO. LTD.
(Wholly owned by the Govt. of India)



SGST	9	151584
CGST	9	151584
IGST	0	0

The Policy Shall be subject to PERSONAL ACCIDENT INSURANCE ((Group(Unnamed))) policy clauses attached herewith IN WITNESS WHEREOF the undersigned duly authorized hereinto set his hand

Place:-

Date:-

For and on behalf of
The New India Assurance Company Limited
Duly Constituted Attorney(s)

Mudrank _____ Dt. _____ consolidated Stamp Fees Paid by Pay Order Number _____ vide receipt
number _____ dt. _____.

Stamp Duty under the Policy is ₹

Tax Invoice No : 3408004200000043

IRDA Registration Number: 190

Policy No. : 34080042170100000043 Document generated by 36017 at 11/12/2017 16:13:57 Hours.

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ADJUSTMENT VOUCHER

Issuing Office : DEHRADUN DO 340800 (340800)
Address : 15-A, RAJPUR ROAD,
15-A, RAJPUR ROAD, OPP. GANDHI PARK, DEHRADUN - 248 001.
.263641
GARUR
Phone : 01352657669
Email : nia.340800@newindia.co.in
Fax :
Collection Number : 34080081170000003116
Collection Date : 11/12/2017
Business Source Code : 1D7842540
PAN No of Payer : AAACU6672R

Received with thanks from UTTARAKHAND JAL VIDHYUT NIGAM LTD.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount ₹	A/C Code	Sub A/C Code
34080042170100000043	Cash Deposit Account-340800	1987432.00	5076.340800	CD0000723696

Total = ₹ 1987432.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Advance Premium Deposit	1987432.00	N.A.	N.A.	N.A.	N.A.	3408001710006189	0.00

Total = ₹ 1987432.00

Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
1684264.00	303168.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NA	NA	42

For The New India Assurance Company Limited



Date of Issue: 11/12/2017

Cashier's Initial

Authorized Signatory

Note -

1. Please note the Policy Number, Collection Number and date in all future correspondence. .
2. NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/ if there is insufficient premium balance.

Tax Invoice No : 3408004200000043

IRDA Registration Number: 190

Validity unknown

Digitally signed
by Srinivasan
Valid until
Date: 2017.12.11
16:13:58 IST

Policy No. : 34080042170100000043 Document generated by 36017 at 11/12/2017 16:13:57 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.