

Motor Vehicle Department

KOLHAPUR

FORM 38

[See Rule 62(1)]

CERTIFICATE OF FITNESS

(Applicable in the case of transport vehicles only)



Vehicle No: MH09CV0035(Bus) is certified as complying with the provisions of the Motor vehicles Act, 1988 and the rules made there under.

Registration No : MH09CV0035
Application No : MH230610V2452938
Inspection Fee Receipt No : MH230610C3632178
Receipt Date : 10-Jun-2023
Chassis No : MC1E4DLA9DP008886
Engine No : D37026439
Seating Capacity : 18 (Including Driver)
Type of Body : BUS
Manufacturing Year : 2013
Category of Vehicle : MPV
Inspected on : 21-Jun-2023
Printed on : 21-Jun-2023 18:03:04



Certificate will expire on : 20-Jun-2024
Next Inspection Due Date : 22-Apr-2024

Inspected by (ATUL CHANDRAKANT
NANDGAONKAR)

Signature of Inspecting Authority
KOLHAPUR
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Contract/Licence/Reference No:

Registration Number	Make / Model / Body Type / Segment	Engine Number	Chassis Number	Mfg. Year	CC/KW	Licensed Carrying Capacity Including Driver
MH09CV0035	FORCE MOTORSTRAVELLER/BUS/Closed/BUS	D37026439	MC1E4DLA9DP008886	2013	2596	18

0035

Read and understand the terms of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully, before concluding a sale.

Tata AIG General Insurance Company Limited

Registered office: Peninsula Business Park, Tower A, 5th Floor, G.K. Marg, Lower Panel, Mumbai - 400013
 Phone Number: 1800 266 7789 Fax: 0226693 8170 Email: customersupport@tataaig.com website: www.tataaig.com
 IRDA India Registration No: 108 CIN: U85110MH2000PLC128425, PAN: AABC13518Q UIN: IPDAN108RP0077V01201319

Auto Secure - Commercial Vehicle Package Policy - Passenger Carrying Vehicle



Certificate Of Insurance and Policy Schedule Form 51 of the Central Motor Vehicle Rules, 1989

Agent Name: HEARTBEAT INSURANCE BROKERS PVT LTD

Agent License Code: 529

Agent Contact No.: 7061970619

Policy Number: 6300232866 00 00	Policy Type: Auto Secure - Commercial Vehicle Package Policy - Passenger Carrying Vehicle	Commercial Class: Passenger Carrying Vehicle
Policy Code: 03/00/3183/01	Covernote No: N/A	Covernote Issuance Date: N/A
Alternate Policy No: N/A	Period of Insurance	
Name & Address of Insured		
Name: MIS ARPANA MAHESH POL Address: W/11TH JADUN TAL HATKANANGALI KOLHAPUR MAHARASHTRA, 416003, KOLHAPUR MAHARASHTRA, INDIA		(Section - I Own Damage) From 00:00 Hours on 04/02/2023 To Midnight of 03/02/2024 (Section - II Liability) From 00:00 Hours on 04/02/2023 To Midnight of 03/02/2024 (Section - III PA cover for owner driver) From 04/02/2023 To Midnight of 03/02/2024
Contact Number: 7620119505		
Customer ID:		
GSTIN:		
Place of Supply: MAHARASHTRA		
State Code: 27		
RTO LOCATION: KOLHAPUR	ZONE: C	Geographical Area: INDIA
		Hire Purchase / Hypothecation / Lease With: ICICI BANK LTD
		Contract/Loan/Reference No:

Registration Number	Make / Model / Body Type / Segment	Engine Number	Chassis Number	Mfg. Year	CC/KW	Licensed Carrying Capacity Including Driver
1H39CV0035	FORCE MOTORS/ TRAVELLER/BUS/Closed/BUS	D37026439	MC1E4DLA9DP008886	2013	2596	18

Insured Declared Value (IDV) ₹

Vehicle IDV	Body IDV	Chassis IDV	Non Electrical Accessories IDV	Electrical / Electronic Accessories	Bifuel / CNG / LPG Kit	Trailer IDV	Total IDV
522022	0	522022	0	0	0	0	522022

SCHEDULE OF PREMIUM

Section - I OWN DAMAGE (A)

Section - II LIABILITY (B)

Own Damage Premium on Vehicle and Accessories	₹ 9516.52	Third Party Premium	₹ 14857.00
Basic OD Premium		Basic TP premium	
Loadings under Own Damage Section		PA Benefits	
Adj. Cover for lamps, tyreshutes mudguards/Bonnet/Vase parts-INT 23	₹ 1442.48	1 Year(s) Compulsory PA cover for Owner Driver	₹ 375.00
Discounts under Own Damage Section		Legal Liability	
Less: No claim bonus (50%)	₹ 5529.50	Adj. Legal liability to paid driver-INT 25 Number of persons 2	₹ 100.00
TOTAL OWN DAMAGE PREMIUM (A)	₹ 5529.50	TOTAL LIABILITY PREMIUM (B)	₹ 25332.00
Section - ADD ON COVERS		NET PREMIUM (A+B+C)	₹ 2776.00
ADD. Rept of glass, plastic, fibre and Rubber (TA 06)	₹ 0	SGST @ 9%	₹ 2776.00
TOTAL ADD ON PREMIUM (C)	₹ 0	CGST @ 9%	₹ 36418
		TOTAL POLICY PREMIUM	

IIR 0000529

Registered Number.

Registration Date

Reg. Owner's Name

Son/Wife/Daughter of

Address

Address (Permanent)

Maker's Name

Class of Vehicle

Maker's Class

Wheel-base (mm)

Mon. & Year of Mfg.

Motor Vehicle is

Vehicle Description/Type of Body

Original Date of Reg.

Certificate Valid Upto

Signature or thumb impression of the

Signature of Registered Own.

Signature of Registered Authority

(P.T.O.)

Date

Signature of Registered Authority

(P.T.O.)

Date

Signature of Registered Authority

(P.T.O.)

Date

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Signature of Registered Authority

(P.T.O.)

Date

Signature of Registered Authority

(P.T.O.)

FORM 23 (See Rule 46)

CERTIFICATE OF REGISTRATION MAHARASHTRA STATE, INDIAN REG

Chassis Number

Engine Number

Unladen Weight (Kg.)

Gross Vehicle Weight (Kg.)

Colour

Fuel Used

Cubic Capacity

Horse Power (B.H.P.)

Number of Cylinders

Seating Capacity

(Including Driver)

Passenger

Person

Registered

Axle Weight

(Kg.)

Tyre

Description

Number

of Tyres

Axle

Front

Rear

Tandem

Other

Additional Trailer Particulars

Front

Rear

Tandem

Other

Type of Body

Unladen Weight (Kg.)

Unladen Weight (Kg.)

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