



POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE

UIN NUMBER - IRDAN190P0098100001

Insured's Name	:	IDEAL SMART SCHOOL MIRAJ (CBSC)		·
Insureds Details			Issuing Office Details		
Customer ID		POA8172742	Office Code		SANGLI D.O. (151000) (151000)
Address	:	MALGAON MAIN ROAD, DINDI VES, MIRAJ SANGLI ,MAHARASHTRA, 416410	Address	:	C S NO 13566, SIDDHIVINAYAK COMPLEX MIRAJ ROAD SANGLI,416416
Phone No	:	XXXXX9990	Phone No	:	02332672188 / 02332670660
E-mail/Fax	:	/	E-mail/Fax	:	nia.151000@newindia.co.in / 02332675993
PAN No	:		S.Tax Regn. No	:	AAACN4165CST178
GSTIN/UIN	:	NA / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

Policy Details						
Policy Number : 15100046230100000099 Business Source Code						
Period of Insurance		From: 20/09/2023 02:39:33 PM To: 19/09/2024 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User		: M/S. LOKMANYA MULTIPURPOSE CO- OP. SOCIETY LTD - (CA00002643)	
Date of Proposal	:	20-Sep-23	Agent/Bancassurance/S pecified Person	:		
Prev. Policy no.	:		Phone No	:	0831-2406700, / NA	
Client Type	:	Corporate	E-mail/Fax	:	geninsurance.ho@lokmanyasociety.org, ceo@lokmanyasocietv.org / /	

Premium(₹)	GST(₹)	Total(₹)	Total (₹ in words)	Receipt No. & Date
2,187	394	2,581	RUPEES TWO THOUSAND FIVE HUNDRED EIGHTY-ONE ONLY	1510008123000001394 8 - 20/09/23
Location Details	: r	MIRAJ MALGAON MAIN	ROAD, DINDI VES, MIRAJ	

: NA First Loss Percentage

Details of assets covered under the Policy

Stocks in	n Trade	
SI. No.	STOCK DETAILS	Sum Insured
1	NA	0

Goods held in Trust / Commision			
SI. No.	GOODS HELD DETAILS Sum Insured		
1	NA	0	

Furniture / Fixture / Fittings				
SI. No.	FURNITURE/FIXTURE/FITTINGS DETAILS	Sum Insured		
1	LAPTOPS,DESKTOPS,CAMERAS,CCTV SETUP,WHITE BOARD MONITORS ETC	2100000		

Office Ed	quipments	
SI. No.	OFFICE EQUIPMENT DETAILS	Sum Insured
1	NA	0

Coins / C	Currency notes	
SI. No.	COINS/CURRENCY/CURIOS DETAILS	Sum Insured
1	NA	0

Description of other item

THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



Sl. No.	OTHER ITEM DETAILS	Sum Insured
1	NA	0

Add on Covers	Sum Insured (₹)
Other Extension	NOT OPTED
Theft Extension	NOT OPTED
Terrorism	NOT OPTED

Special Conditions	:	BURGLARY (BP) CLAUSES EXCESS 10% OF CLAIM, MIN. RS.1000/-
Excess	:	1000

This Policy shall subject to BURGLARY policy clauses attached herewith.

Premium and GST Details

	Rate of Tax	Amount in INR	
Premium		₹ 2,187	,
SGST	9	197	
CGST	9	197	
IGST	0	0	

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s)

on this 20th day of September, 2023.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 20/09/2023

Duly Constituted Attorney(s)

Mudrank_____Dt.____consolidated Stamp Fees Paid by Pay Order Number_____vide receipt number______dt.____. Stamp Duty under the Policy is ₹1/-.

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.

Tax Invoice No: 15100023P0017869

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C