Bajaj Allianz General Insurance Company Ltd.

Registered and Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune

Transcript of Proposal for Commercial Vehicle Package Policy

Dear ANANDI ACADEMY

We wish to inform you that the contract under policy number 'OG-21-1152-1812-00000016' has been finalized based on the information and declaration given by you, the transcript whereof is mentioned below. You are requested to reconfirm the same. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back within a period of 15 days from date of your receipt of this, failing which it will be deemed that you are satisfied with the correctness of the details mentioned below. Kindly note that as the contents and declarations contained in this transcript is the basis on which we have issued the policy to you, we advise you to please ensure that you have provided/disclosed and or not withheld any material facts/information and declarations, as Policy becomes Void ab initio if material facts are not provided/disclosed and or withheld and in such case no claim, if any, will be considered by us apart from forfeiture of the premium.

Details provided by you:

A. Proposer details

1. Proposer Name : ANANDI ACADEMY

: C/O HIMALAYAN EDUCATION AND POLLUTION RESEARCH SOCIETY, BAGESHWAR, ,, BAGESHWAR - $263642\,$ 2. Proposer Address

3. Proposer Mobile Number : 9871140074

4. Proposer Residential Number : NA

5. Proposer e-mail id : ukkailashchand@yahoo.in

6. Proposer Profession : NA

B.Vehicle Details

Registration Number	Vehicle Make	Vehicle SubType	Vehicle Model	CC/KW	Year Of Manufac- turing		Vehicle/Trail- er Chassis Number	Vehicle Engine Number
UK02PA009			S7	0	2017	30		SLT4DU22758
4	ZU	BUS (30+1)					DU0234027	9

Fuel Type	` ,	Accessor-	Non- Electrical Ac- cessories IDV (in Rs.)	Trailer Registration Number	CNG/LPG Unit (Extra fitted) IDV (in Rs.)	Total Sum Insured
DIESEL	9,30,000	0	0		0	9,30,000

C. Coverage opted

1. Period of Insurance : From 06-Mar-2021 (Hrs) To

05-Mar-2022 Midnight

2. Is your vehicle fitted with external LPG/CNG kit : No.

3. Electrical Accessories cover Opted (If Applicable)4. Non - Electrical Accessories cover Opted (If Applicable):No.

5. Is Voluntary Excess opted : No.
Amount of voluntary excess opted : Rs.NA.

6. Whether PA cover is opted for owner-driver : Yes.

7. Is any additional compulsory deductible imposed and agreed upon
Amount of additional compulsory deductible imposed
: NA.

8. Whether geographical area extension is opted : No. Details of Countries to which geographical area extension cover is given : NA.

9. Is LL to person for Paid driver/Operation/Maintenance opted : Yes.
10. Whether PA cover is opted for paid driver other than owner driver : No.

Number Of Paid Driver(s): : NA
Sum Insured Per Paid Driver: : Rs.NA.

11. Whether PA cover is opted for passengers : No.

Number Of Passengers :: NASum Insured per Passenger: Rs.NA

12. Is TPPD restricted to statutory limit of Rs.6,000?13. Pre Existing damages in the vehicle14. No.15. No.16. No.

14. Premium for Liability coverage, quoted and agreed upon is : Rs.39,414.00.

15. Premium for OD coverage, quoted and agreed upon is : Rs.182.00.

16. Do you have valid PUC certificate of the vehicle : NA
17. Do you have valid Fitness certificate of the vehicle : NA

18. Total Premium (excluding Goods and Service Tax (GST)) for Liability and OD coverages, quoted and agreed upon is :Rs.39,596.00

- 19. NCB (No Claim Bonus) claimed by you and granted by us based on your declaration of no claim during your previous policy :NA.
- 20. About the last insurance company

Previous Insurer - The New India Assurance Company LimitedPrevious Policy No -34030631190100000144 Expiry On - 05-MAY-20

21. Whether your vehicle is Hypothecated and if so the details of Pledgee whose name is registered by us: No.

Name of Pledgee: NA.

22. Add on Cover(s) opted: No.Plan name:NA

23. To support our Go Green initiative, send policy copy link on registered mobile number / email id:

Please note Cover Note No. 0/ issued to you basing on the above information.

In case of Disagreement or objection or any changes with respect to information and contents mentioned hereinabove, please contact our toll free number & register your objections/changes/disagreement to the contents of this transcript or you may also send us email or written correspondence at the following details within a period of 15 days from date of your receipt of this transcript along with Policy:

 $I/We\ hereby\ unconditionally\ allow\ the\ Company\ to\ share\ all\ my\ /\ our\ information\ being\ collected\ in\ this\ proposal\ form\ or\ through\ telephonic\ /\ email\ /\ web-inputs\ means\ or\ other\ means,\ as\ updated\ from\ time\ to\ time\ within\ group\ entities.$

Toll free Number : 1800-22-5858,1800-102-5858,1800-209-5858

Email address : Bagichelp@bajajallianz.co.in Website : www.bajajallianz.com

Contact our policy servicing branch at: 12th floor Dr. Gopaldas Bhawan,, 28 Barakhamba Road ,, Connaught Place , New Delhi, , CENTRAL DELHI-110001 Phone No :041490500.

INSURANCE ACT, 1938 SECTION 41 - PROHIBITION OF REBATES

No person shall allow or offer to allow either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing a policy

accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. ANY PERSON IN BREACH OF COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO RUPEES TEN LAKH.Bajaj Allianz General Insurance Co Ltd



Bajaj Allianz General Insurance Company Ltd.

Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006(India)

COMMERCIAL VEHICLE PACKAGE POLICY CERTIFICATE CUM POLICY SCHEDULE UIN: IRDAN113RP0027V01200102

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc; 12th floor Dr. Gopaldas Bhawan, 28 Barakhamba Road ,, Connaught Place , New Delhi, , CENTRAL DELHI-110001 Phone No

etc; 12th :041490500

Policy Number OG-21-1152-1812-00000016 **Product** Commercial Vehicle Package Policy

Vehicle Type School Buses: Passenger Carrying-4 WH & CC>6

Period Of Insurance Policy issued on 06-Mar-2021 -From: 06-Mar-2021

> **Cover Note No** Ω / To: 05-Mar-2022 Midnight

Scrutiny No 252553134 **Application No**

Insured Name ANANDI ACADEMY C Zone C/O HIMALAYAN EDUCATION AND POLLU-Insured Address

TION RESEARCH SOCIETY, BAGESHWAR, ,, BAGESHWAR - 263642

Customer ID 210146070 **Premium Payer ID** 210146070

Transaction Id

Policy Status ISSUFD

GSTIN/UIN Place of Supply/State 05 - Uttarakhand NA

Code/Name

Invoice No. 253693823/1 **Company GST No** 07AABCB5730G1ZZ **Company PAN No** AABCB5730G

Registration No.	Make	SubType	Model	CC/KW	Mfg year	Seat Cap	Vehicle/ Trailer Chassis No	Engine Number
UK02PA0094	SML ISU- ZU	SCHOOL BUS (30+1)	S7	0	2017	30	MBUWEL4 XDU02340 27	SLT4DU227589

Fuel Type	Vehicle IDV	Elec Acc	Non Elec Acc	Trailer	Trailer Reg No	CNG/LPG Unit	Total Sum Insured
DIESEL	9,30,000	0	0			0	9,30,000

SCHEDULE OF PREMIUM							
OWN DAMAGE		LIABILITY					
Total Own Damage Premium:	182.00	Basic Third Party Liability	39,314.00				
		LL For Operation/Maintenance For 2 Person	100.00				
		Total Liability Premium:	39,414.00				
Total premium	39,596.00		•				
Special Discount	0						
Net Premium	39,596.00						
Integrated GST (18%) 7127							
Final Premium Rs.	46,723.00	***All Premium Figures are in Rupees					

Geographical Area: No Claim Bonus: 0% Voluntary Excess: Nil **Nominee Details** Name: NA Relationship: NA

Compulsory Deductible: Additional Compulsory Deductible: Rs.0

Previous Insurer - The New India Assurance Company LimitedPrevious Policy No -34030631190100000144

Expiry On - 05-MAY-20

The above Total OD Premium is inclusive of all applicable Loading/Discounts viz (Automoble Association Membership, Voluntary Excess, Anti-Theft, Handicap Person, Driver Tution, Fibre Glass, Cng/Lpg Unit, Geographical Extn, Imported Vehicle etc wherever applicable)

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th

September of the next financial year

LIMITS OF LIABILITY: Under Section II-1(i) of the policy -> Death of or bodily injury: Such amount as is necessary to meet there requirements of the Motor Vehicles Act, 1988. Under Section II-1(ii) of the policy -> Damage to Third Party Property: Rs.7,50,000.00/
LIMITATION AS TO USE: The Policy covers use only under a permit within the meaning of the Motor Vehicle Act, 1988 or such a carriage falling under Subsection 3 of Section 66 of the Motor Vehicle's Act 1988. The Policy does not cover use for: Organised racing, Pace Making, Reliability Trials, Speed Testing, Use whilst drawing a trailer except the towing (other than for reward) of any one disabled Mechanically propelled vehicle.

DRIVER: Any person including the insured: Provided that a person driving holds an effective driving licence at the time of the accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective Learner's licence may also drive the vehicle when not used for the transport of passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

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".

Subject To IMT Endorsement Nos: 7,28,23 & Policy wordings attached herewith

Warranted that insured named herein or owner of the vehicle insured holds a valid Pollution Under Control (PUC) and or Fitness Certificate on the date of commencement of the Policy. If the PUC and/or Fitness Certificate is not found to be valid on the date of commencement of the Policy, the Company reserves its right to consider the policy void ab ini-

Broker Code 10035203 Channel Name: ML

Broker Name: S AND R INSURANCE BROKERS PRIVATE LIMITED

Contact No: 18001035858/18001035858

Email - bagichelp@bajajallianz.co.in

Damage Details as per Annexure I

Premium Collection Details :- [Receipt No/Collection No/Amount] 1152-00016454 / 252553134 / Rs. 46,723.00 ,

^{***} If premium paid through cheque, the policy is void ab-initio in case of dishonour of cheque.



This certificate of insurance is issued in accordance with the provision of Chapter X and Chapter XI of M.V. Act, 1988.

It is hereby understood and agreed that for the purpose of application of Endorsement IMT-21 attached to and forming part of the above policy, the towing vehicle and trailer(s) while attached thereto shall be treated as a single unit.

Damage Details Annexure: - Cost of Repair / Replacement towards the damaged parts noticed during the inspection of your vehicle prior to enrolment under this policy as per Inspection report reference number 2021-06960401 duly signed by you or your representative as well as the photographs shall be excluded in the event of any future claims.

Remarks

PDA MODULE

In case of any claim, please contact our 24 Hour Call centre at 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'Bagichelp@bajajallianz.co.in'.

252553134/-/10035203/SR00043026/0

This is a one page Policy Document [without enclosing the Terms and Conditions (T&C) of the Policy] issued by the Company, pursuant to the authorization of Insured to display the T&C of the Policy on its website (www.bajajallianz.com) that enables access by the Insured. Noting contact or market flocal difficult for the Policy are available on the Company's website and can be accessed by the Insured. Noting contact or market flocal difficult for the Company's website and can be accessed by the Insured.

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.

M.

Authorized Signatory
Printed , Signed and Executed at Pune



This document is digitally signed, hence counter signature / stamp is not required



Regd Office: Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.0.5/- paid towards Insurance Stamps vide Challan No. MH010174751202021M Defaced No. 0004860541202021 dated 25-JAN-21 timing 17:39:54 of General Stamp Office, Mumbai, India.

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Bajaj Allianz General Insurance Company Ltd.

12th floor Dr. Gopaldas Bhawan, 28 Barakhamba Road , Connaught Place , New Delhi, CENTRAL DEL-HI - 110001

Contact No: Contact No: 041490500

RECEIPT

Receipt Number 1152-00016454

Receipt Date 06/03/2021

Business Channel ML

Received with thanks from ANANDI ACADEMY

(Customer ID : 210146070) a total sum of Rupees Forty Six Thousand Seven Hundred Twenty Three Only by,

Instrument Type	Instrument No.	Instrument Date	Bank Name	Branch Name	Amount
Credit Card	WAP- 14078089	06/03/2021	NA	NA	46,723

Total Amount Rs. 46,723.00

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.

Authorised Signatory

Regd.Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006

^{*} Cheque/DD/PO receipt is valid subject to realisation of the instrument.