



**SHRIRAM GENERAL INSURANCE COMPANY LIMITED**

E-8,EPIF,SITAPURA INDUSTRIAL AREA,JAIPUR,  
RAJASTHAN-302022  
CONTACT(TOLL FREE): 1800 – 30030000, 1800 – 1033009

**CERTIFICATE CUM POLICY SCHEDULE**

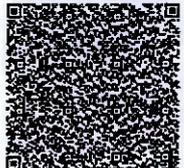
POS - PRIVATE CAR PACKAGE POLICY- Zone B  
MOTOR PRIVATE CAR (PACKAGE POLICY)-  
UIN No.IRDAN137RP0016V01200809 - SAC Code: 997134

CIN NO. U66010RJ2006PLC029979

<b>Branch Address</b>		Shriram General Insurance Co.Ltd.,29,2nd floor, Rajendra Estate, Highway Road, Mehsana. GUJARAT - 384002		<b>Branch Office Phone No.</b>		7412039285 / 7412039286	
<b>Geographical Area</b>		INDIA		<b>Policy No.</b>		213040/31/25/007476	
<b>Insured's Code/ Name</b>		IN-35520253 / M/S LESSEE RAYCHEM RPG PRIVATE LIMITED		<b>GSTIN No. Of Insured</b>		24AAACR8032L1ZC	
<b>Insured Address and Contact Details</b>		VILLAGE KANJARI NR SAFARI CROSSING, GIDC PHASE 1 HALOL, PANCHMAHALS, , GUJARAT, 389350, HALOL, PANCH MAHALS, GUJARAT - 389350 ,Mob- *****2649,Email-r*d*a*i*s*r*n*e*0*6@gmail.com					
<b>Insured Address as Per RC</b>		VILLAGE KANJARI NR SAFARI CROSSING, GIDC PHASE 1 HALOL, PANCHMAHALS, , GUJARAT, 389350, HALOL, PANCH MAHALS, GUJARAT - 389350 ,Mob- *****2649,Email-r*d*a*i*s*r*n*e*0*6@gmail.com					
<b>CKYC Details</b>		CKYC No- ,POA ID-Registration Certificate /POA ID No- *****L1ZC, POI ID- Certificate of Incorporation/ POI ID No- *****L1ZC					
<b>Insured State Code</b>		24		<b>NCB Discount (%)</b>		50	
<b>Executive</b>		RAHULKUMAR HARSHADBHAI SOLANKI - NAN000000976		<b>Period of Insurance</b>		From 00:00 Hrs of 26/10/2024 To Midnight Of 25/10/2025	
<b>Agent Details</b>		Mrs.JYOTSANA PANDEY - PS0000000470- Mobile No.-7359080762- Toll/Phone No.N.A					
<b>PAN No.</b>		APOPJ8213M					
<b>Prop No. - TR No.</b>		N.A - N.A		<b>Prop Issue Date</b>		N.A	
<b>Gross Premium</b>		12661		<b>IGST</b>		0	
<b>CGST</b>		1139		<b>SGST/UTGST</b>		1139	
<b>Previous Insurer</b>		Bajaj Allianz General Insurance Company Limited		<b>Total</b>		14939	
<b>Previous Policy No.</b>		OG-24-4352-1801-00000190		<b>Nominee for Owner/Driver</b>		Mrs	
<b>Nominee Age</b>		50		<b>Nominee Relationship</b>		OTHERS	
<b>Appointee Name</b>		N.A		<b>Appointee Relationship</b>		N.A	
<b>REGISTRATION MARK &amp; PLACE</b>	<b>ENGINE NO. &amp; CHASSIS NO.</b>	<b>MAKE - MODEL</b>	<b>TYPE OF BODY / FUEL TYPE</b>	<b>CUBIC CAPACITY / WATT/YEAR OF MANF.</b>	<b>DATE OF REGN. / DELIVERY</b>	<b>SEAT CAP. (INCL. DRIVER)</b>	
GJ - 17 - AH - 7820 & GODHRA	2KDU709748 & MBJ111V4007512592	TOYOTA - INNOVA 2.5 GX 8 STR BS-III	SUV/MUV / DIESEL	2494 / 0 / 2015	12/03/2015	7 + 1	
<b>Charger No.</b>		<b>Battery Number</b>		<b>Motor Number</b>			
<b>IDV FOR THE VEHICLE</b>	<b>IDV FOR TRAILER</b>	<b>NON ELECTRICAL ACCESSORIES</b>	<b>ELECTRICAL ACCESSORIES</b>	<b>SI FOR NAMED PERSON</b>	<b>CNG/LPG kit SI</b>	<b>TOTAL VALUE</b>	
500000	0	0	0	0	0	500000	
<b>Own Damage Policy Period</b>				<b>Liability Policy Period</b>			
From Date & Time	26/10/2024 00:00 Hrs	To Date & Time	25/10/2025 23:59 Hrs of Midnight	From Date & Time	26/10/2024 00:00 Hrs	To Date & Time	25/10/2025 23:59 Hrs of Midnight
<b>A. OWN DAMAGE</b>				<b>B. LIABILITY</b>			
<b>OD TOTAL</b>		3949.00		<b>BASIC TP COVER</b>		7897.00	
<b>TOTAL PREMIUM</b>		12661.00		<b>ADD :GR36A-PA FOR OWNER DRIVER</b>		315.00	
<b>ADD : SGST/UTGST 9.00%</b>		1139.00		<b>ADD :GR36B2-PA Cover For Passengers (Un-Named Persons) : 8 - SI PER PERSON : Rs.100000</b>		400.00	
<b>ADD : CGST 9.00%</b>		1139.00		<b>ADD :Legal Liability To Employees</b>		50.00	
<b>PREMIUM AMOUNT</b>		14939.00		<b>ADD :Legal Liability Coverages For Paid Driver</b>		50.00	
				<b>TP TOTAL</b>		8712.00	

The above Total OD Premium is inclusive of all applicable Loading/Discounts viz ( Automobile Association, Voluntary Excess, Anti-Theft, Handicap Person, Driver Tuition, Fibre Glass,CNG/LPG Unit, Geographical Extn, Imported Vehicle etc. wherever applicable ). PA Owner Driver CoverPeriod:- From 00:00 Hrs of 26/10/2024 To Midnight of 25/10/2025

CPA Policy number: , CPA Sum Insured: 0.00, CPA Company Name: , CPA Valid From: N.A., CPA Valid To: N.A.  
Deductibles under Section-I : Compulsory Deductible Rs 2000  
Subject to IMT Endorsement Printed herein/attached to : IMT-15, IMT-16, IMT-22, IMT-28, IMT-29  
Hypothecation Agreement with:  
Hire Purchase/Lease Agreement with:



PLACE : MEHSANA

We will contact you through phone,e-mail, letters, registered AD, sms, etc for renewal before/after the expiry date of your policy. If you do not want us to contact you, kindly send an e-mail for the same on dnd@shriramgi.com  
Consolidated Stamp Duty paid vide order No. F7(77)Gen/2024/7574 dated 02/09/2024  
Policy Issuing office - E-8, EPIF, RIICO INDUSTRIAL AREA, SITAPURA, JAIPUR, RAJASTHAN, 302022  
For Policy Wordings, NEFT/RTGS/IMPS or any other online payment kindly visit our website "www.shriramgi.com" Validity of policy is subject to KYC verification.

Note :- Claim intimation after 48 hours will be considered as delayed intimation.

All the Amounts mentioned in this policy are in Indian Rupees  
GSTIN No. 24AAKCS2509K129

For and on behalf of  
Shriram General Insurance Co.Ltd.

*Ranjan*  
Authorized Signatory

**Government of Gujarat**  
**Certificate of Registration** (GJ) (NT)

<b>Reg. No.</b> <b>GJ17AH7820</b>	<b>Date of Reg.</b> 12/03/2015	<b>Reg. Validity</b> 11/03/2030
<b>Chassis No.</b> MBJ11JV4007512592	<b>Owner</b> Sr. No. <b>01</b>	<b>Ownership Tr. Date</b>
<b>Engine No.</b> 2KDU709748	<b>Owner Name</b> <b>LESSEE RAYCHEM RPG</b>	
<b>Vehicle Class</b> L.M.V. (CAR)	<b>Son/Daughter/Wife of</b> <b>PRIVATE LIMITED</b>	
<b>Fuel Used</b> DIESEL	<b>Address</b> VILLAGE KANJARI NR SAFARI CROSSING GIDC PHASE 1 HALOL PANCHMAHALS 389350	

(GJ) (NT) Reg. No. **GJ17AH7820**

<b>Seating Capacity</b> 7	<b>Maker's Name</b> TOYOTA KIRL. MOT. LTD	 NS 185210
<b>Wheel Base</b>	<b>Model Name</b> INNOVA 2.5L G (GX)	<b>Financer Name</b>
<b>Cubic Capacity</b> 2494	<b>Color</b> GREY	
<b>Cylinder No</b>	<b>Body Type</b> SALOON	
<b>Cylinder Validity</b>		
<b>Month &amp; Yr. of Mfg.</b> FEBRUARY 2015		

**Registration Authority**  
GODHRA

Owner's Sign \_\_\_\_\_