

Universal Sompo General Insurance Co. Ltd.

nbure of Allahabad Bank \* Indian Overseas Bank \* Kamataka Bank Ltd. \* Dabur Investment Corp. \* Sompo Japan Nipponkoa In

rate Office: Unit No 401. 4th Floor, Sanzam Complex, 127, Andheri Kurla Road, Andheri (East), Mumbai - 400059

## Transcript of Proposal for Private Car Package Policy

Dear KAUSHALYA SHARMA,

We wish to inform you that the contract under policy no. USGI/WEBAG/0106648/00/000 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 receipt of this transcript, falling which it will be deemed that you are satisfied with the correctness of the details mentioned below. Kindly note that the contents and declarations contained in the 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 materials facts/information and declarations, as Policy becomes Void abinitio if any 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:

				Propos	er Details				
Proposer Name	Mobile No. Email ID			Address		Period of Insurance		Total Premium	
KAUSHALYA SHARMA	9799419903	seerajneesh@	-		HAN NAGAR KHATIPURA JASTHAN-302012	FROM 00:01 AM OF 23/09/2016 TO MIDNIGHT OF 22/09/2017		6506.00	
				Vehicl	e Details				
Registration Number Chasis N		lumber	Manufacturing Year		Vehicle Make and Model	Body Type		Seating Capacity	
RJ-14-ck-6913 MA6BF48		2GAT023437	2010		CHEVROLET- BEAT 1.2 PS	Saloon		5	
Engine Number	IDV	IDV		es IDV	Non Electrical Accessories IDV	CNG/LPC	GIDV	Total IDV	
B12D1280344KC	3 234499.0	234499.00			0.00	0.00		234499.00	
Previous Insurer Name	Previous	Previous Policy No.		ICB%	Previous Claim Status	Hypothetication		Registration Date	
Royal Sundaram VPB0001		914000100	NA		NA	NA		30/09/2010	
	Nil Dep C	Nil Dep Cover Plan A 🗌		Allowance	Key Replacement 🗌	Return to Invoice		Driving Train protect	
ADD On Covers	Hydrosta	Hydrostatic Lock cover		nsumables	Secure Towing 🗌	Accidental Hospital Clause 🗌		Un named PA Cover 🗌	

In case of Disagreement or objection or any changes with respect to information and contents mentioned hereinabove, please contact our toll free number and 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:

Toll Free No. :- 1800-200-4030, 1800 22 4030 :- 91-022-27639800, 022-39133700 (Local Charges Apply) FAX No :- 1800-200-9134 Land Line No Email Address :- contactus@universalsompo.com Website :- www.universalsompo.com PPC Address :-Universal Sompo General Insurance Co. Ltd. Express IT Park, Plot No. EL - 94, T.T.C. Industrial Area, M.I.D.C., Mahape, Navi Mumbai- 400710

Note: Please include your policy number for any communication with us. The Policy and Policy certificate set out the terms of your contract with us, please read this carefully to ensure that the cover meets your needs.

Universal Sompo General Insurance Co. Ltd. shall abide by Insurance Regulatory and Development Authority (Protection of Policyholder's Interests) Regulations 2002. Under this regulation and with an objective to provide a forum to Personal Lines policy holders for resolution of claims related complaints, Insurance Ombudsman has been constituted under the aegis of Governing Body of Insurance Council. For further Information you could refer to www.irdaindia.org/ins\_ombusman.htm. IRDAI UIN NO: IRDA/USGI/2007-08/05

FOR UNIVERSAL SOMPO GENERAL INSURANCE CO. LTD.

**USGI IRDAI REGISTRATION NO: 134** 

Authorized Signatory



## Universal Sompo General Insurance Co. Ltd. A Joint verture of Allahabad Bank \* Indian Overses Bank \* Kamataka Bank Ltd. \* Dahar Insestment Carp. \* Sempo Japan Nippenkoa Insurance Iec. Regd. & Corporate Office: Unit No 401, 4th Floor, Sangam Complex, 127, Andheri Kurla Road, Andheri (East), Mumbai - 400059

## PRIVATE CAR PACKAGE POLICY POLICY CERTIFICATE CUM POLICY SCHEDULE CERTIFICATE CUM POLICY NUMBER:USGI/WEBAG/0106648/00/000

INTERMEDIARY NAM	E POL	CY BA	AZAAR INSU	RAN	CEV	VEB AG	GREG	ATOR	PV	T LTD		
INTERMEDIARY COD	<sup>e</sup> 2016	1670975657 РНОМ			IE NO. NA E-MAIL NA					SUB CODE NA		
BRANCH OFFICE MUMBAI CORPORATE OFFICE			ORATE OFFICE		POLICY ISSUED ON 20			20/0	20/09/2016			
INSURED NAME KAUSHALYA SHARMA					MAN	JAL COVER	NOTE NUME	BER	NA			
INSURED ADDRESS		A-29 PARIVHAN NAGAR KHATIPURA ROAD JAIPUR RAJASTHAN PIN - 302012 MOBILE NO 9799419903 EMAIL ID seerajneesh@gmail.com				REGISTRATION DATE 30/09/2010						
						RTO ZONE B						
	PIN - 3					CUSTOMER ID NA						
						NOMINEE NAME RAJNEESH					HATURVEDI	
						RELATIONSHIP WITH PROPOSER SON						
PERIOD OF INSURAI	TO MI		OF 22/09/2017		RELA	TIONSHIP	WITH PROP	USER	301	v		
PARTICULARS OF VE	EHICLE INSURE	D										
REGISTRATION	CHASSIS N	UMBER	ENGINE NUMBER	MA	KE MODEL		BODY CUB			MFG	CARRYING	
	MACDE 40004	7002427	D40D40000 t tite				SALOON	CAPACITY		YEAR	CAPACITY	
RJ-14-ck-6913	MA0BF482GA	1023437	B12D1280344KC3	CHEVR	OLET	BEAT 1.2 PS	SALUUN	1199		2010	5	
NSURED'S DECLAR	ED VALUE (Rs.	)										
FOR THE VEHICLE	FOR TRAILER	NON-ELE	EC ACCESSORIES	ELECTR	RICAL/E	LECTRONIC	CACCESSO	RIES CN	G KIT	LPG KIT	TOTAL VALUE	
234499.00	0.00		0.00			0.00		0	00.00	0.00	234499.00	
			SCHEDULE O	F PREMI	UM (AN	IOUNT IN R	s.)					
	OWN DA	MAGE (A)						IABILITY (	B)			
Basic Premium On		MIAUE (A)		858.00	Basic	Third Party			51		2237.00	
				858.00	Total	. manary	2.domy				2237.00	
Total Basic Own Damage 7858.00 Total   Detariff Discount Amount 2750.30 PA cover for Owner- Driver of						er- Driver of F						
Total OD after Disco				107.70		otal (Additio			21		100.00	
No Claim Bonus ( 3	-			788.00		iability Pre					2337.00	
Add On Covers:												
Add:												
Total Own Damage	Premium		3	320.00								
TOTAL PACKAGE PR	EMILIM (A+B)										5657.0	
NET PREMIUM											5657.0	
SERVICE TAX											792.0	
SWACHH BHARAT C											28.0	
KRISHI KALYAN CES	3										28.0	
TOTAL PREMIUM											6506.0	
COMPUL SORY DEDU	DCTIBLE			1000.00	VOLU	NTARY DED	UCTIBLES				0.0	
For No Claim Bonus (NC Claim Bonus on the Own D DRIVER (Persons or class accident and is not disquali person satisfies the require LIMITATIONS AS TO USE: racing d) Pace making e) S LIMITS OF LIABILITY: a) L III-1(ii) of the Policy-Dama Cover under Section III for	amage Section of t ses of persons er fied from holding o iments of Rule 3 of The Policy covers peed testing f) Rel Junder Section II- 10 ge to Third Party P	the policy, if ititled to dri r obtaining so f the Central use of the v iability Trials of the Polic roperty-in res	no claim is made or pendi ve): Any person including uch a license. Provided all Motor Vehicles Rules, 19 ehicle for any purpose ot g) Any purpose in connec- cy- Death or bodily injury- spect of any one claim or	ing during the the insured so that the 39. her than: a) ction with Mo such amou series of cl	he preced I. Provide person h Hire or F otor Trade nt as is n laims aris	ling year(s) as ad that a person olding an effec Reward b) Carri e. ecessary to m sing out of one	per policy cond n driving holds a tive Learner's L age of goods (o' eet the requirem event (Rs. 600)	itions. In effective I icense may a ther than san nents of the I	Driving also driv nples of Motor V	license at the ve the vehick r personal lug ehicle Act 19	e time of the e and that such a gage) c) Organised 88 b) Under Section	
WPORTANT NOTICE: The wider terms appearing in the AND RIGHT OF RECOVER SUBJECT TO INT ENDOR PREMIUM COLLECTION ID DISCLAIMER: Policy is va sindly report it to us. CLAIMS DISCLAIMER: In 1 Centre at Toll Free Number contactclaims@universalsc	insured is not index e Certificate in orde RY" SEMENT NOS. AN DETAILS : [Collecti lid subject to Realiz the unfortunate ever s on 1-800-22-4030	mnified if the er to comply D MEMORAN on No / Amo cation of Che ent of any los ) (for MTNL/E	e vehicle is used or driven with the Motor Vehicle Act IDUM PRINTED HEREIN unt / ReceiptDate] GAXG4 que. We accept premium ss or damage to the insure 3SNL users) or 1-800-200-	otherwise t t, 1988, is r / ATTACHE 1768807452 only via le ad property 4030 (other	than in ac ecoveration D HERE (6506.00) gally reco resulting users) of	cordance with le from the ins TO : 22 (20/09/2016 ognized modes into a claim or r on chargeable	this schedule. A sured. See the c except for cash h this policy, ple e numbers at +9	lause headed h. If our repre- sase intimate 11-22-2763980	sentati the mis	NCE OF ( ves request y shap IMMED),	CERTAIN TERMS you to pay in cash, ATELY to our Call	
/We hereby certify that th SERVICE TAX REGISTRA	TION NO .: AAACUS		relates as well as the cer	tificate of in	nsurance	are issued in a	ccordance with		ERSAL	SOMPO GE		
UIN No: IRDA/USGI/2007 USGI IRDAI REGIS		D: 134										
and the second												
In Witness whereof this Po POLICY ISSUING OFFICI Universal Sompo General Mumbai- 400710	E:				ial Area, I	M.I.D.C., Maha	pe, Navi	Carp	1			
Consolidated stamp duty I In case of any discrepanc Park, Plot No. EL - 94, T.T Landline Numbers:+91-22-	y, complaint or grie .C. Industrial Area,	wance, pleas M.I.D.C., M 39133700 (Le	se feel free to contact us ahape, Navi Mumbai- 400	within 15 da 710 Toll Fre	ays of re e Numbe	ceipt of the Po ers: 1-800-22-4	licy. Universal 9 030 (for MTNL/E	Office Mum Sompo Gener SNL users) (	bai. ral Insu or 1-800	0-200-4030 (a	d. Express IT ther users)	