

Name: Mr YASH NAVRATAN TAPARIA

Address:

INDIA

FLAT NO 503 KALPATARU HEIGHTS KAMATGHAR ANJUR

PHATA OSWAL WADI BHIWANDI - 421308 MAHARASHTRA Date: 05/12/2022

Your Policy Details:

Policy Number: 6200891282 00 00

Own Damage Policy Period: From 13/12/2022 to Midnight Of

12/12/2023

Premium Paid: ₹ 16432

#### Dear Mr YASH NAVRATAN TAPARIA,

Welcome to Tata AIG General Insurance Company Limited's family & we thank you for choosing our Auto Secure - Standalone Own Damage Private Car for your vehicle insurance.

We are enclosing Policy schedule cum certificate of insurance of your vehicle. You are requested to visit our website www.tataaig.com for policy wording.

We would like to inform you that policy has been issued based on the information and declaration provided by you. No Claim Bonus (NCB) if shown on your policy schedule has been allowed as you had not reported any claim in the previous policy.

Kindly go through the enclosed information/declaration provided by you and in case your policy shows No Claim Bonus, for which you are not entitled as explained above or any other error/discrepancy then we request you to get in touch with us within 15 days of receipt of the policy for correction otherwise all particulars will be deemed to be correct.

You may reach us at our 24\*7 helpline 1800 266 7780 for providing any information or in case you desire to have a printed copy of policy wording.

We, thank you once again, for choosing Tata AIG General Insurance Company Limited for insuring your vehicle. We assure you of our best of services at all times. Happy driving!

Sincerely,

For Tata AIG General Insurance Company Limited

Authorized Signatory

# Get the Auto Restore Garage Advantage: take the Car to an ARG in case of an Accident

- Free pick-up of car!
- Direct settlement facility!
- 3/6-month warranty on parts and paint!

^ In select garages across India, Conditions apply

#### Renew your policy hassle free

**1800 266 7780** 

Renew by calling our 24X7 Toll Free No.

www.tataaig.com

# Quick steps incase of a claim

- 1
- FIRST ATTEND TO ANY INJURY
- ► RECORD THE INCIDENT
- ► KEEP REQUIRED DOCUMENTS HANDY
- 2
- CONTACT US ON OUR TOLL FREE NOS.
   FILL OUT CLAIM FORM AVAILABLE ON OUR WEBSITE
- 3
- ► INCASE OF THEFT, PROPERTY DAMAGE OR INJURY, INFORM THE POLICE





Tata AIG General Insurance Company Limited A-501, 5th Floor, Building No. 4, Infinity Park, Dindoshi, Malad (E), Mumbai, India - 400 097. Claims Registration SMS 'CLAIMS' to 5616181 or e-mail: general.claims@tataaig.com



				e and Policy	Schedu	ıle Fo	orm 51 of the Centi	ral Motor Ve	hicle Rules,	1989				
Agent Name	: PIYUSH	MAL	.ANI											
Agent Licens	<b>Agent Cont</b>	act No.	: 985080	2081	(mobil	e or la	ndline)							
Policy Number: 6200891282 00 00 Certificate Number:6200891282 00 00 Policy Code:00/00/3184/00							Policy Type: Auto Secure - Standalone Own Damage Private Car							
Alternate Policy Nun														
Tatornato i onoy itan		Addre	ss of Insured						Period of	Insurance	1			
Name : Mr YASH NAVRATAN TAPARIA							(Section - I Own Damage) From 00:00 Hours on 13/12/2022							
Address: FLAT NO 503 KALPATARU HEIGHTS KAMATGHAR ANJUR PHATA OSWAL WADI BHIWANDI - 421308, MAHARASHTRA INDIA							To Midnight of 12/12/2023							
GSTIN: N/A Place of Supply: MA State Code: 27	HARASHTRA													
RTO Location: THANE			Zone : B	Geographical Area : I		Hire Purchase / Hypothecation / Lease With: BANK OF IN hdia, Hypothecation Loan Account Number: N/A					OF INDIA -			
Registration Number			3ody Type	Engine Nu	Engine Number (		hassis Number	Mfg. Year	Mfg. Year CC/KW		Frailer Registration No. / Chassis No.		Licensed carrying Capacity including driver	
MH 04 KW 5392	HYUNDAI / VENU	JE / 1.	5 CRDI SX / SUV	D4FAMM3	91388	MALF	FC81DLMM273664	2021	1493		NA		5	
***				Ins	sured De	clare	ed Value (IDV) ₹			,				
Year	IDV Of Vehic	ا ما	Non Electrical	Electrica	l / Electi	ronic	Bifuel / CNG / LP	G .	Frailer	Sic	de car	T/	otal IDV	
			Accessories		Accessories		Kit							
1	1 ₹855,000 ₹0 ₹0				₹0	₹0 ₹0 ₹855,00					855,000			
	Continu	LOWA	L DAMACE (A)		SCHEDU	JLE (	OF PREMIUM							
Own Damage Premi			N DAMAGE (A)											
Basic OD Premium	uni on veniele a /	10003	501103	₹	7 50	2 84	NET PREMIUM (/	Δ+C.)				₹	13,926.0	
Discounts under Own Damage Section				7,002.01								1253.0		
Less: No claim bonu	-		₹ 1,500.			-					1253.0			
TOTAL OWN DAMAGE PREMIUM (A)				₹	6,00	2.27	,					16432.0		
Section - I ADD ON COVERS (C)					Road Side Assistance				е			₹	136.8	
Add: Depreciation R		₹		3.50	(Inclusive of All A	pplicable Ta	xes)							
Add: Return to Invoice (TA 05)				₹	1,96	6.50								
Add: Loss of person Sum Insured: 10000		. 09)		₹	11	0.00								
Add: Emergency transport and hotel expenses (TA 10) Any One Accident : 5000 Any One Year : 10000				₹	11	0.00								
Add: Key Replacement (TA 15) Sum Insured: 25000 per occurrence limit 50% of SI				₹	26	5.00								
Add: Engine Secure	,			₹		4.00								
Add: Tyre Secure (T	,			₹		7.00								
Add: Consumable expenses (TA 18) ₹ 427.50														
Add : Repair of Glass, Rubber & Plastic Parts (TA08) ₹ 0.00 TOTAL ADD ON PREMIUM (C) ₹ 7,923.50														
TOTAL ADD ON PR	CLIVITOIVI (C)			₹			ty Policy Details							
Certificate & Policy I	No. Policy T	vne	Insurance Compa		NOT I TIP	ı Par	ty Policy Details		TP Co	ver Start [	Date IT	P Cover E	nd Data	
V9425642	Package	•	· ·		INSURA	NCF	COMPANY LIMIT	ED	13/12/2			2/12/2024	ina Date	
Drivers Clause: Pers													at the time	
of the accident and i and that such a pers	s not disqualified on satisfies the r	from h equirer	olding or obtaining ments of Rule 3 of	such a licer the Central	nse. Pro Motor V	vided ehicle	l also that the persons es Rules, 1989.	on holding a	n effective Le	earner's Lic	cense may	also drive	the vehicle	
Limitations as to Us other than samples	or personal lugga												e of goods	
<b>LIMITS OF LIABILIT</b> Number of claims co Basis of claim settle	overed under Dep													



Deductible Under Section I Compulsory Deductible : ₹ 1,000 Voluntary Deductible: 0 Imposed Excess: ₹ 0.00 Franchisee: 0.00

Engine Secure Deductible- 5% of claim amount in case of repair and 10% of claim amount in

case of replacement

UIN Numbers:

IRDAN108RP0001V01201920/A0007V01201920 (TA 08), IRDAN108RP0001V01201920/A0003V01201920 (TA 01), IRDAN108RP0001V01201920/A0005V02201920 (TA 05), IRDAN108RP0001V01201920/A0005V02201920 (TA 09), IRDAN108RP0001V01201920/A0009V01201920 (TA 10), IRDAN108RP0001V01201920/A0010V01201920 (TA 15), IRDAN108RP0001V01201920/A0012V01201920 (TA 16), IRDAN108RP0001V01201920/A0012V01201920 (TA 16), IRDAN108RP0001V01201920/A0012V01201920 (TA 16),

IRDAN108RP0001V01201920/A0013V01201920 (TA 17), IRDAN108RP0001V01201920/A0014V01201920 (TA 18), IRDAN108RP0001V01201920/A0015V01201920 (TA 19)

Subject to: A) IMT Endorsement Number: 32,22,07

B) TATA AIG Auto Secure Endorsement Number (TA): 08,01,18,05,09,10,15,16,17,19

NOMINEE DETAILS

Name of the Nominee	Relationship with Insured	Age	Name of Appointee (If nominee is minor)	Relationship with Nominee
N/A	N/A	N/A	N/A	N/A

I/We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of Chapter X and Chapter XI of M.V. Act, 1988.

In witness whereof this Policy has been signed at Mumbai on 05/12/2022

For TATA AIG General Insurance Company LTD.

Julque (MUMBA)

**Authorized Signatory** 

Consolidated Stamp Duty has been paid to the State Exchequer

GSTIN: 27AABCT3518Q1ZW - MAHARASHTRA

Service Account Code: 99713434

Policy Servicing Office: MUMBAI, 2ND FLOOR, CITI TOWER, 61, DR. S.S.RAO ROAD,, NEXT TO M.G.M HOSPITAL, PAREL(E), MUMBAI - 400012, MUMBAI 400012, Tel NO:62606600

Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC, as applicable, during the subsistence of the Policy. Further, the company reserves the right to take appropriate action in case of any discrepancy in the PUC

#### 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 Vehicles Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'.

Note: You are advised to go through the policy schedule cum certificate of insurance which is issued based on information and declaration provided by you. Transcript of Information & Declaration is also provided herewith to enable you to go through the same again and if any error/ discrepancy is found in respect of vehicle details, No Claim Bonus or any other information provided by you, it should be brought to our notice within 15 days of receipt of this policy for necessary correction along with the supporting documents, otherwise it will be deemed to be correct. You may visit the company website at www.tataaig.com for detailed benefits, terms & conditions and exclusions of the policy issued and held by you. You may also reach us at our 24\*7 helpline 1800 266 7780 in case you desire to have a printed copy of policy wording. Our grievance redressal procedure and details about ombudsman are available at the company website www.tataaig.com. You may also reach us at our 24\*7 helpline 1800 266 7780 for grievance redressal procedure and details about ombudsman. Please note that any misrepresentation, nondisclosure or withholding of material facts will lead to cancellation of policy ab initio with forfeiture of premium and non consideration of claim, if any. We will specifically seek confirmation n No Claim Bonus availed by you from your previous insurer. In case we receive confirmation that you had lodged claim with them then we will intimate you to pay the No claim Bonus Amount within 20 days. In case we don't receive the No Claim Bonus recovery then it will be adjusted against claim amount payable to you if any. This Schedule, Policy terms and conditions available on the company website and Endorsements mentioned herein above shall read together and word or expression to which a specific meaning has been attached to/in any part of this Policy or of the Schedule shall bear the same meaning wherever it may appear. Any amendments/modifications/alterations made on this system generated policy document is not valid an



#### Transcript of Information/Declaration

1. Name (Registered Owner of the Motor Vehicle): Mr YASH NAVRATAN TAPARIA

2. Address for Communication: FLAT NO 503 KALPATARU HEIGHTS KAMATGHAR ANJUR PHATA

OSWAL WADI BHIWANDI - 421308

BHIWANDI MAHARASHTRA INDIA

3. Vehicle Details: HYUNDAI / VENUE / 1.5 CRDI SX / SUV

4. Fuel Type: DIESEL

5. Insured's declared value: ₹855,000

6. Previous Insurance Particulars:

Policy Number: V9425642 Date of Expiry: 12/12/2022 Type of Cover: Package

Name of the Insurer: FUTURE GENERALI INDIA INSURANCE COMPANY LIMITED

Claim in the previous policy period: N/A NCB in previous policy: 0 % NCB claimed: 20 %

7. Own Damage period of insurance desired from: 13/12/2022 to midnight of 12/12/2023

8. Liability period of insurance desired from\*: 13/12/2022 to midnight of N/A

9. Compulsory PA cover for owner driver period of insurance desired: N/A

10. Financier's Details: BANK OF INDIA

11. Extra Benefits opted

Unnamed Persons Personal Accident Cover for seating capacity, including driver CSI: 0

Wider Legal Liability to Paid Driver (As per Workmen's Compensation Act, Fatal Accident Act & Common Law): N/A

Compulsory PA Cover for Owner Driver: N/A Term: N/A

Name of the Nominee & Age: N/A & N/A Relationship: N/A

Name of Appointee (if Nominee is Minor): N/A Relationship to the Nominee: N/A

12. Restriction of Cover/Discounts/Concessions/Extended Covers

Automobile association membership opted: No

Third Party Property Damage Cover restricted to 6,000/ only: No

Is Voluntary Deductible opted: No Amount of Deductible opted: N/A

Vehicle is fitted with Anti Theft Device approved by ARAI: No

- 13. Add on covers: Repair of Glass, Rubber & Plastic Parts, Depreciation Reimbursement, Return to Invoice, Loss of personal belongings, Emergency transport and hotel expenses, Key Replacement, Engine Secure, Tyre Secure, Consumable expenses, Road Side Assistance
- 14. Declaration for No Claim Bonus: (If NCB Confirmation is not submitted but NCB claimed)

I/We declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring Policy Period (Copy of Policy enclosed). I/We further undertake that if this declaration is found incorrect all benefits under the Policy in respect of Section1 of the Policy will stand forfeited.

15. I hereby give my consent to receive one page insurance policy.

### 16. AML Guidelines:

- 1. I/we hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002.
- 2. I understand that the Company has the right to call for documents to establish sources of funds.
- 3. The insurance company has right to cancel the insurance contract in case I am/have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.



17. We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness certificate, as applicable.