



POLICY SCHEDULE FOR RAASTA AAPATTI KAVACH POLICY (Group (Unnamed))

UIN NUMBER - IRDA/NL-HLT-NIA/P-H/V.1/355/13-14

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| Insured Name | : PRAVARA RURAL EDUCATION SOCIETY | | |
| Insured's Details | | Issuing Office Details | |
| Customer ID | : PO31667390 | Office Code | : RAHURI BRANCH 151804 (151804) |
| Address | : A/P PRAVARANAGAR(LONI) TAL - RAHATA DIST - AHMEDNAGAR LONI B K ,MAHARASHTRA, 413736 | Address | : SITAPLAZA COMPLEX, NAGAR MANMAD ROAD RAHURI,413705 |
| Phone No | : | Phone No | : 02426233069 / 02426233070 |
| E-mail/Fax | : / | E-mail/Fax | : nia.151804@newindia.co.in / 02426233070 |
| PAN No | : AAATP2302E | S.Tax Regn. No | : AAACN4165CST178 |
| GSTIN/UIN | : NA / NA | GSTIN | : 27AAACN4165C3ZP |
| | | SAC | : 997139 (Other non-life insurance services excl RI) |

Policy Details

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| Policy Number | : 15180448226800000269 | Business Source Code | |
| Period of Insurance | : From:09/03/2023 12:00:01 AM To: 08/03/2024 11:59:59 PM | Dev.Off level./Broker/Corp. Agent/CPSC User | : M/S. PRAVARA INSTITUTE OF RESEARCH & EDUCATION, - (2D11723547) |
| Date of Proposal | : 09-Mar-23 | Agent/Bancassurance | : |
| Prev. Policy no. | : 15180448216800000544 | Phone No | : NA / NA |
| Client Type | : Non-Corporate | E-mail/Fax | : pirens@pravara.ren.nic.in, / / |

| | | | | | |
|-----------------|-------------|------------------|-------------------|---|-------------------------------------|
| Premium: | GST: | Total (₹) | Stamp Duty | Rupees (in words) | Receipt No. & Date: |
| ₹ 299,574 | ₹ 53,922 | ₹ 3,53,496 | ₹1 | RUPEES THREE LAC FIFTY-THREE THOUSAND FOUR HUNDRED NINETY- SIX ONLY | 1518048122000000 7363 - 17/03/23 |

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| Special Conditions | Limit of Hospitalisation expenses shown above is the combined limit for all the hospitalisation extensions put together. |
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Benefits under the Policy: GROUP UNNAMED

| Sl No. | No. of persons | Group Name | Sum Insured | | | Special Conditions(if any) | |
|--------|----------------|---------------------------------|-------------------|--------------------------|----------------------|----------------------------|--|
| | | | Personal Accident | Hospitalization expenses | | | |
| | | | | Road Accident | Employment extension | Any other accident | |
| 1 | 2266 | PRAVARA RURAL EDUCATION SOCIETY | 100000 | 100000 | NA | NA | HOSPITALIZATION IS REQUIRED FOR MIN 24 HOURS.DRIVING LICENSE IS COMPULSORY IN CASE OF ROAD ACCIDENT INVOLVING MOTOR VEHICLE.POLICE PAPER IS COMPULSORY IN CASE OF ROAD ACCIDENT CLAIM. |

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| Special Conditions | Limit of Hospitalisation expenses shown above is the combined limit for all the hospitalisation extensions put together. |
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The Policy Shall be subject to RAASTA AAPATTI KAVACH POLICY (Group (Unnamed)) policy clauses attached herewith

Premium and GST Details

| | Rate of Tax | Amount in INR |
|----------------|--------------------|----------------------|
| Premium | | ₹299574 |
| SGST | 9 | 26961 |
| CGST | 9 | 26961 |
| IGST | 0 | 0 |

IN WITNESS WHEREOF the undersigned duly authorized hereinto set his hand

Place:-
Date:-

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 03/05/2023

Duly Constituted Attorney(s)

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C