

**CERTIFICATE CUM POLICY SCHEDULE**

PCCV-4 (more) wheeled vehicles-capacity > 6 and 3 wheelers-carrying passengers-capacity > 17 - Zone C  
MOTOR COMMERCIAL VEHICLE (PACKAGE POLICY) -  
UIN No.IRDAN137RP0018V01200809 - SAC Code: 937134

CIN NO. U66010RJ2006PLC029979

<b>Issue Office</b>	105021-Address-2ND FLOOR, S.C.O. - 2, PUDA COMPLEX,, LADOWALI ROAD,, NEAR DENIK BHASKAR OFFICE,, JALANDHAR, PUNJAB - 144001	<b>Issue Office Phone No.</b>	7412078301 / 302
<b>Geographical Area</b>	INDIA	<b>Policy No.</b>	105021/31/23/000648
<b>Insured's Code/ Name</b>	IN-24621611 / M/S BABA ISHER SINGH NANAKSAR SEN.SEC PUBLIC SCHOOL	<b>GSTIN No. Of Insured</b>	Unregistered
<b>Insured Address</b>	B.R.S NAGAR , LUDHIANA , LUDHIANA, PUNJAB - 141001		
<b>Insured State Code</b>	3	<b>NCB Discount (%)</b>	0
<b>Executive</b>	Mr.PUNIT - NA0000006948	<b>Period of Insurance</b>	From 16:25 Hrs of 11/05/2022 To Midnight Of 10/05/2023
<b>Agent Details</b>	- - Mobile No.-N.A		
<b>PAN No.</b>	N.A		
<b>Prop No. - TR No.</b>	N.A - N.A	<b>Prop Issue Date</b>	N.A
<b>Gross Premium</b>	28592	<b>IGST</b>	0
<b>CGST</b>	2573	<b>SGST/UTGST</b>	2573
<b>Previous Insurer</b>	N.A.	<b>Total</b>	33738
<b>Previous Policy No.</b>	N.A	<b>Nominee for Owner/Driver</b>	N.A
<b>Nominee Age</b>	N.A	<b>Nominee Relationship</b>	N.A
<b>Appointee Name</b>	N.A	<b>Appointee Relationship</b>	N.A

REGISTRATION MARK & PLACE	ENGINE NO. & CHASSIS NO.	MAKE - MODEL	TYPE OF BODY / FUEL TYPE	CUBIC CAPACITY/ YEAR OF MANF.	DATE OF REGN. / DELIVERY	SEAT CAP. (INCL. DRIVER)
PB - 10 - ES - 0831 & LUDHIANA	D63003592 & 7EP013472	FORCE MOTORS - TRAVELLER T1 SCHOOL BUS 3700 WB BS 4 TD 2200 PS	BUS / DIESEL	2596 / 2014	09/07/2014	17 + 1

IDV FOR THE VEHICLE	IDV FOR TRAILER	NON ELECTRICAL ACCESSORIES	ELECTRICAL ACCESSORIES	CNG/LPG kit SI	TOTAL VALUE
484000	0	0	0	0	484000

Own Damage Policy Period				Liability Policy Period			
From Date & Time	To Date & Time	From Date & Time	To Date & Time	From Date & Time	To Date & Time	From Date & Time	To Date & Time
11/05/2022 16:25 Hrs	10/05/2023 23:59 Hrs of Midnight	10/05/2023 23:59 Hrs of Midnight	11/05/2022 16:25 Hrs	10/05/2023 23:59 Hrs of Midnight	10/05/2023 23:59 Hrs of Midnight		

A. OWN DAMAGE		B. LIABILITY	
OD TOTAL	202.00	BASIC TP COVER	28290.00
TOTAL PREMIUM	28592.00	ADD :Legal Liability Coverages For Paid Driver	50.00
ADD : SGST/UTGST 9.00%	2573.00	ADD :Legal Liability Coverages For Conductor	50.00
ADD : CGST 9.00%	2573.00	TP TOTAL	28390.00
PREMIUM AMOUNT	33738.00		

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 ).

CPA Policy number : , CPA Sum Insured: 0.00, CPA Company Name: N.A., CPA Valid From: N.A., CPA Valid To: N.A.  
Deductibles under Section-I : Compulsory Deductible Rs.500  
Subject to IMT Endorsement Printed herein/attached to : IMT-23, IMT-40, IMT-7, IMT-21.  
Hypothecation Agreement with: KOTAK MAHINDRA BANK LTD  
Hire Purchase/Lease Agreement with:

**Limit of Liability :**  
Under Section II-1(i) In respect of any one accident: as per Motor Vehicles Act, 1988.  
Under Section II-1(ii) in respect of any one claim or series of claims arising out of one event is Rs. 750000  
P.A. Cover under Section III for Owner - Driver (CSI) : Rs.0  
**Pre-Inspection Survey:** Dented Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:17 AM,Broken Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:17 AM, Scratched Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:17 AM ,Claim not payable for : WS GLASS SCAR and REAR BUMPER BROKEN **IMPOSED EXCESS DETAILS** - If claim is acceptable for then Rs. will be deducted as an imposed excess from final payable claim amount.  
Preinspection Report: Applicable

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

PLACE : JALANDHAR  
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

For NEFT/RTGS/IMPS or any other online payment kindly visit our website "www.shriramgi.com".

All the Amounts mentioned in this policy are in Indian Rupees Note :- Claim intimation after 48 hours will be considered as delayed intimation.

GSTIN No. 03AAKCS2509K1ZD



**CERTIFICATE CUM POLICY SCHEDULE**

PCCV-4 (more) wheeled vehicles-capacity > 6 and 3 wheelers-carrying passengers-capacity > 17 - Zone C  
 MOTOR COMMERCIAL VEHICLE (PACKAGE POLICY) -  
 UIN No. IRDAN137RP0018V01200809 - SAC Code: 997134

CIN NO. U66010RJ2006PLC029979

<b>Issue Office</b>	105021-Address-2ND FLOOR, S.C.O. - 2, PUDA COMPLEX,, LADOWALI ROAD,, NEAR DENIK BHASKAR OFFICE,, JALANDHAR, PUNJAB - 144001		<b>Issue Office Phone No.</b>	7412078301 / 302		
<b>Geographical Area</b>	INDIA		<b>Policy No.</b>	105021/31/23/000650		
<b>Insured's Code/ Name</b>	IN-24621882 / M/S BABA ISHAR SINGH (N) SEN SEC PUBLIC SCHOOL		<b>GSTIN No. Of Insured</b>	Unregistered		
<b>Insured Address</b>	B.R.S NAGAR, LUDHIANA, LUDHIANA, PUNJAB - 141001					
<b>Insured State Code</b>	3		<b>NCB Discount (%)</b>	0		
<b>Executive</b>	Mr.PUNIT - NA0000006948		<b>Period of Insurance</b>	From 16:35 Hrs of 11/05/2022 To Midnight Of 10/05/2023		
<b>Agent Details</b>	- - Mobile No.-N.A					
<b>PAN No.</b>	N.A					
<b>Prop No. - TR No.</b>	N.A - N.A		<b>Prop Issue Date</b>	N.A		
<b>Gross Premium</b>	33601		<b>IGST</b>	0		
<b>CGST</b>	3024		<b>SGST/UTGST</b>	3024		
<b>Previous Insurer</b>	N.A.		<b>Total</b>	39649		
<b>Previous Policy No.</b>	N.A.		<b>Nominee for Owner/Driver</b>	N.A		
<b>Nominee Age</b>	N.A		<b>Nominee Relationship</b>	N.A		
<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/ YEAR OF MANF.</b>	<b>DATE OF REGN. / DELIVERY</b>	<b>SEAT CAP. (INCL. DRIVER)</b>
PB - 10 - CH - 1443 & LUDHIANA	604639 & 804338	TATA MOTORS - LP 407 / 34 BS 4 COWL	STANDARD BUS / DIESEL	2956 / 2008	01/07/2008	23 + 1
<b>IDV FOR THE VEHICLE</b>	<b>IDV FOR TRAILER</b>	<b>NON ELECTRICAL ACCESSORIES</b>	<b>ELECTRICAL ACCESSORIES</b>	<b>CNG/LPG kit SI</b>	<b>TOTAL VALUE</b>	
282000	0	0	0	0	282000	
<b>Own Damage Policy Period</b>			<b>Liability Policy Period</b>			
<b>From Date &amp; Time</b>	<b>To Date &amp; Time</b>	<b>From Date &amp; Time</b>	<b>To Date &amp; Time</b>	<b>From Date &amp; Time</b>	<b>To Date &amp; Time</b>	<b>From Date &amp; Time</b>
11/05/2022 16:35 Hrs	10/05/2023 23:59 Hrs of Midnight	10/05/2023 23:59 Hrs of Midnight	11/05/2022 16:35 Hrs	10/05/2023 23:59 Hrs of Midnight		

A. OWN DAMAGE		B. LIABILITY	
<b>OD TOTAL</b>	123.00	<b>BASIC TP COVER</b>	33378.00
<b>TOTAL PREMIUM</b>	33601.00	<b>ADD : Legal Liability Coverages For Paid Driver</b>	50.00
<b>ADD : SGST/UTGST 9.00%</b>	3024.00	<b>ADD : Legal Liability Coverages For Conductor</b>	50.00
<b>ADD : CGST 9.00%</b>	3024.00	<b>TP TOTAL</b>	33478.00
<b>PREMIUM AMOUNT</b>	39649.00		

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 ).

CPA Policy number: , CPA Sum Insured: 0.00, CPA Company Name: N.A., CPA Valid From: N.A., CPA Valid To: N.A.  
 Deductibles under Section-I : Compulsory Deductible Rs.1000  
 Subject to IMT Endorsement Printed herein/attached to : IMT-23, IMT-40, IMT-21.

**Hypothecation Agreement with:**  
**Hire Purchase/Lease Agreement with:**

**Limit of Liability:**  
 Under Section II-1(i) in respect of any one accident: as per Motor Vehicles Act, 1988  
 Under Section II-1(ii) in respect of any one claim or series of claims arising out of one event is Rs. 750000  
 P.A. Cover under Section III for Owner - Driver (CSI) : Rs. 0  
**PreInspection Survey:** Dented Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:10 AM, Broken Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:10 AM, Scratched Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:10 AM, Claim not payable for : N.A. IMPOSED EXCESS DETAILS - If claim is acceptable for then Rs. will be deducted as an imposed excess from final payable claim amount.  
**Preinspection Report:** Applicable

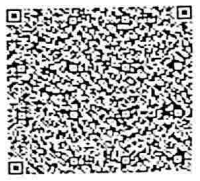
**Driver's Clause**  
 Any person including insured Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle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

PLACE : JALANDHAR

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

For NEFT/RTGS/IMPS or any other online payment kindly visit our website "www.shriramgi.com".

All the Amounts mentioned in this policy are in Indian Rupees Note :- Claim intimation after 48 hours will be considered as delayed intimation.  
 GSTIN No. 03AAKCS2509K1ZD



**CERTIFICATE CUM POLICY SCHEDULE**

PCCV-4 (more) wheeled vehicles-capacity > 6 and 3 wheelers-carrying passengers-capacity > 17 - Zone C  
 MOTOR COMMERCIAL VEHICLE (PACKAGE POLICY) -  
 UIN No.IRDAN137RP0018V01200809 - SAC Code: 997134

CIN NO. U66010RJ2006PLC029979

<b>Issue Office</b>	105021-Address-2ND FLOOR, S.C.O. - 2, PUDA COMPLEX,, LADOWALI ROAD,, NEAR DENIK BHASKAR OFFICE,, JALANDHAR, PUNJAB - 144001	<b>Issue Office Phone No.</b>	7412078301 / 302				
<b>Geographical Area</b>	INDIA	<b>Policy No.</b>	105021/31/23/000652				
<b>Insured's Code/ Name</b>	IN-24621611 / M/S BABA ISHER SINGH NANAKSAR SEN.SEC PUBLIC SCHOOL	<b>GSTIN No. Of Insured</b>	Unregistered				
<b>Insured Address</b>	B.R.S NAGAR, LUDHIANA, LUDHIANA, PUNJAB - 141001						
<b>Insured State Code</b>	3	<b>NCB Discount (%)</b>	0				
<b>Executive</b>	Mr.PUNIT - NA0000006948	<b>Period of Insurance</b>	From 18:02 Hrs of 11/05/2022 To Midnight Of 10/05/2023				
<b>Agent Details</b>	- - Mobile No.-N.A						
<b>PAN No.</b>	N.A						
<b>Prop No. - TR No.</b>	N.A - N.A	<b>Prop Issue Date</b>	N.A				
<b>Gross Premium</b>	25219	<b>IGST</b>	0				
<b>CGST</b>	2270	<b>SGST/UTGST</b>	2270				
<b>Previous Insurer</b>	N.A.	<b>Total</b>	29759				
<b>Previous Policy No.</b>	N.A	<b>Nominee for Owner/Driver</b>	N.A				
<b>Nominee Age</b>	N.A	<b>Nominee Relationship</b>	N.A				
<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/ YEAR OF MANF.</b>	<b>DATE OF REGN. / DELIVERY</b>	<b>SEAT CAP. (INCL. DRIVER)</b>	
PB - 10 - FV - 8698 & LUDHIANA	D69000235 & A2HP071280	FORCE MOTORS - TRAX CRUISER DELUXE	SUV/MUV / DIESEL	1947 / 2017	03/06/2017	13 + 1	
<b>IDV FOR THE VEHICLE</b>	<b>IDV FOR TRAILER</b>	<b>NON ELECTRICAL ACCESSORIES</b>	<b>ELECTRICAL ACCESSORIES</b>	<b>CNG/LPG kit SI</b>	<b>TOTAL VALUE</b>		
558000	0	0	0	0	558000		
<b>Own Damage Policy Period</b>				<b>Liability Policy Period</b>			
<b>From Date &amp; Time</b>	11/05/2022 18:02 Hrs	<b>To Date &amp; Time</b>	10/05/2023 23:59 Hrs of Midnight	<b>From Date &amp; Time</b>	11/05/2022 18:02 Hrs	<b>To Date &amp; Time</b>	10/05/2023 23:59 Hrs of Midnight

**SCHEDULE OF PREMIUM**

A. OWN DAMAGE		B. LIABILITY	
<b>OD TOTAL</b>	221.00	<b>BASIC TP COVER</b>	24898.00
<b>TOTAL PREMIUM</b>	25219.00	<b>ADD :Legal Liability Coverages For Paid Driver</b>	50.00
<b>ADD : SGST/UTGST 9.00%</b>	2270.00	<b>ADD :Legal Liability Coverages For Conductor</b>	50.00
<b>ADD : CGST 9.00%</b>	2270.00	<b>TP TOTAL</b>	24998.00
<b>PREMIUM AMOUNT</b>	29759.00		

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 ).

CPA Policy number: , CPA Sum Insured: 0.00, CPA Company Name: N.A., CPA Valid From: N.A., CPA Valid To: N.A.  
 Deductibles under Section-I : Compulsory Deductible Rs.500  
 Subject to IMT Endorsement Printed herein/attached to : IMT-23, IMT-40, IMT-21.

**Hypothecation Agreement with:**  
**Hire Purchase/Lease Agreement with:**  
**Limit of Liability:**

Under Section II-1(i) in respect of any one accident: as per Motor Vehicles Act, 1988.  
 Under Section II-1(ii) in respect of any one claim or series of claims arising out of one event is Rs. 750000  
 P.A. Cover under Section III for Owner - Driver (CS1) : Rs. 0  
**PreInspection Survey:** Dented Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:24 AM,Broken Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:24 AM, Scratched Part : AS PER THE PI PHOTOS DATED ON 11-05-2022 10:24 AM ,Claim not payable for : w/s glass broken **IMPOSED EXCESS DETAILS**-If claim is acceptable for then Rs. will be deducted as an imposed excess from final payable claim amount.  
 Preinspection Report: Applicable

**Driver's Clause**  
 Any person including insured : Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from the holding or obtaining such a license.Provided also that the person holding an effective Learner's license may also drive the vehicle when not used for the transport of passengers at the time of accident and that such a personsatisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1939.

PLACE : JALANDHAR

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 GSTIN No. 03AAKCS2509K1ZD

