



**POLICY SCHEDULE FOR PRODUCT LIABILITY INSURANCE**

**UJIN NUMBER - IRDAN190P0081V01100001**

<b>Insured's Name</b>	: GAS SAFE INDIA LTD		
<b>Insureds Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: ML3511401	<b>Office Code</b>	: THE NEW INDIA ASSURANCE CO. LTD.BR.150201 (150201)
<b>Address</b>	: PLOT NO.20,GUT NO.281/2 VILLAGE KASAR, AMBOLI,TAL.MULSHI,DIST.PUNE Dist. : PUNE, Maharashtra  PAUD ,MAHARASHTRA, 412108	<b>Address</b>	: 1171/A, REVENUE COLONY, BSNL BLDG., GROUND FLOOR NR SUB POST OFFICE, SHIVAJINAGAR, PUNE.,411005
<b>Phone No</b>	: XXXXXX6800	<b>Phone No</b>	: 02025511185 / 02025511186
<b>E-mail/Fax</b>	: milkool@hotmail.com, / 9822026800	<b>E-mail/Fax</b>	: nia.150201@newindia.co.in / 02025511187
<b>PAN No</b>	: AAFCG3130R	<b>S.Tax Regn. No</b>	: AAACN4165CST178
<b>GSTIN/UIN</b>	: 27AAF3130R1ZB / NA	<b>GSTIN</b>	: 27AAACN4165C3ZP
		<b>SAC</b>	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>			
<b>Policy Number</b>	: 15020136230800000001	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 14/08/2023 12:00:01 AM To: 13/08/2024 11:59:59 PM	<b>Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User</b>	: DIRECT BUSINESS NA NA - (1D7805918)
<b>Date of Proposal</b>	: 14-Aug-23	<b>Agent/Bancassurance/S pecified Person</b>	: Mr. UMESH BAWDEKAR (NIAAG00167778) UMESH MADHUKAR BAWDEKAR (SI00261261)
<b>Prev. Policy no.</b>	: 15020136220800000001	<b>Phone No</b>	: 9822070450 / NA
<b>Client Type</b>	: Corporate	<b>E-mail/Fax</b>	: umesh.bawdekar@icloud.com, / /

<b>Premium(₹)</b>	<b>GST(₹)</b>	<b>Total(₹)</b>	<b>Total:(₹ in words)</b>	<b>Receipt No. &amp; Date</b>
61,465	11,064	72,529	RUPEES SEVENTY-TWO THOUSAND FIVE HUNDRED TWENTY-NINE ONLY	1502018123000000205 6 - 14/08/23

**Details of risk covered under current year policy:**

								<b>Deductible s</b>	
<b>Retroactive Date</b>	<b>Jurisdiction</b>	<b>Territory</b>	<b>AOA</b>	<b>AOA:AOY</b>	<b>AOY</b>	<b>Deductible Type (Amount/Percentage/Amount &amp; Percentage)</b>	<b>India</b>	<b>Worldwide excluding USA &amp; Canada</b>	<b>Worldwide including USA &amp; Canada</b>
14/08/2003	India	India	37500000	1:4	15000000	AMT	5	0	0

**Retroactive Dates**

								<b>Deductibles</b>		
<b>Retroactive Date Details</b>	<b>Date</b>	<b>Jurisdiction</b>	<b>Territory</b>	<b>AOA</b>	<b>AOA:AOY</b>	<b>AOY</b>	<b>Deductible Type (Amount/Percentage/Amount &amp; Percentage)</b>	<b>India</b>	<b>Worldwide excluding USA &amp; Canada</b>	<b>Worldwide including USA &amp; Canada</b>
RETROACTIVE DATE 1	14/08/2003	India	India	3750000	1:4	1500000	Amount	5	0	0



RETRO-DATE IS SUBJECT TO LESSER OF LIMITS - NARROWER OF COVER.

<b>Does the policy covers exports only</b>	<b>Vendors Liability</b>	<b>Type of Vendor</b>	<b>Voluntary Excess</b>
No	NA	NA	0

<b>Product Description</b>
Gas or Oil Appliances (Domestic)-Gr5

**Extensions under the Policy**

<b>Name of the Extension</b>	<b>Sub limit of the Extension</b>	<b>Deductibles of the Extension</b>
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<b>Special Conditions</b>	Absolute Exclusion for losses directly or indirectly arising out of, contributed to by, or resulting from coronavirus (Covid-19 and/or nCov 2019) or any mutations or variations thereof.  NA
<b>Special Exclusions</b>	NA
<b>Special Excess/Deductible</b>	0

This Policy shall be subject to PRODUCT LIABILITY INSURANCE policy clauses attached herewith

<b>Clauses</b>	<b>Description</b>
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**Premium and GST Details**

	Rate of Tax	Amount in INR
<b>Premium</b>		₹ 61,465
<b>SGST</b>	9	5532
<b>CGST</b>	9	5532
<b>IGST</b>	0	0

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s)  
on this 14th day of August, 2023.

For and on behalf of  
The New India Assurance Company Limited

Duly Constituted Attorney(s)

Stamp Duty under the Policy is ₹1/-.

Mudrank \_\_\_\_\_ Dt. \_\_\_\_\_ consolidated Stamp Fees Paid by Pay Order Number \_\_\_\_\_ vide receipt number \_\_\_\_\_ dt. \_\_\_\_\_.

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Tax Invoice No : 15020123E0005049

<b>IRDA Registration Number: 190</b> <b>NIA PAN NUMBER: AAACN4165C</b>
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