



**POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE**

<b>Insured's Name</b>	: SRI SAIBABA ENGINEERING FIRM		
<b>Insured's Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: PO09102431	<b>Office Code</b>	: DO-VII (153100)
<b>Address</b>	: FLAT NO. 11 RH138 SHAHUNAGAR CHINCHWAD PUNE MAHARASHTRA, 411019	<b>Address</b>	: 101 THE PENTAGON SHAHU COLLEGE ROAD PUNE,411009
<b>Phone No</b>	: 9890316944	<b>Phone No</b>	: 02024224823 / 02024224825
<b>E-mail/Fax</b>	: ssbef@rediffmail.com, /	<b>E-mail/Fax</b>	: nia.153100@newindia.co.in /
<b>PAN No</b>	:	<b>S.Tax Regn. No</b>	: AAACN4165CST178

<b>Policy Details</b>			
<b>Policy Number</b>	: 15310036170100000069	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 28/05/2017 12:00:01 AM To: 27/05/2018 11:59:59 PM	<b>Dev.Off level/Broker/Corp. Agent</b>	: MR.R.K.AMBEKAR - (1D7806067)
<b>Date of Proposal</b>	: 28-May-17	<b>Agent/Bancassurance</b>	: Mr. MUKUND MADHUSUDAN PHADNIS (NIA1D7800653) AGENT_SITE_300 (1D7810330)
<b>Prev. Policy no.</b>	: 15310036160100000089	<b>Phone No</b>	: 9822553082 / NA
<b>Client Type</b>	: Non-Corporate	<b>E-mail/Fax</b>	: / / 02024224820 /

<b>Premium(₹)</b>	<b>Service Tax(₹)</b>	<b>Total (₹)</b>	<b>Total (₹ in words)</b>	<b>Receipt No. &amp; Date</b>
51012	7652	58664	RUPEES FIFTY-EIGHT THOUSAND SIX HUNDRED SIXTY-FOUR ONLY	1531008117000000338 1 - 26/05/17

**Details of Employees with monthly wages upto ₹ 8000:**

Categories	Sub Categories	No of Employee	Cash Total Wages
Engineers not otherwise classified	Incl. work away from shop or yard upto 9 mtrs height	25	1950000

**Details of Employees with monthly wages above ₹ 8000:**

Categories	Sub Categories	No of Employee	Cash Total Wages
<b>Trade Description</b>	<b>Particular of Works</b>	<b>Location Details</b>	<b>Included All Sub - Contractors</b>
ERECTION COMMISSIONING RECON DITIONING OF MECHANICAL HY DRAULIC PRESS MAINTAINCE OF MACHINERY AND GENERAL FABR ICATION.	AS ABOVE	ALL OVER INDIA	

**<<HIDDEN\_START contractr\_Details>>Contractor/Sub-Contractor Details:**

Serial No	Name of Contractor	Description	Categorie	No. of Workers			Amount Wages
				Skilled	Unskilled	Others	

**<<HIDDEN\_END contractr\_Details>>Extensions under the Policy Cover**

Name of the Extension	Sub Limit of the Extension	Deductibles of the Extension
Medical Extension	₹50000	NA
<b>Special Conditions</b>	NA NA NA	

<b>Special Exclusions</b>	NA
<b>Special Excess/Deductible</b>	NA

The Policy shall be subject to EMPLOYEES COMPENSATION INSURANCE Policy clauses attached herewith.

Clauses	Description
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Signature Not  
Verified  
Digitally signed  
by Srinivasan  
Vaideswaran  
Date: 2017.05.26  
12:01:06 +IST



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 26th day of May,2017.

For and on behalf of

The New India Assurance Company Limited

Date of Issue: 26/05/2017

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. \_\_\_\_\_.

**IRDA Registration Number: 190**



## COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

**Issuing Office** : DO-VII (153100)  
**Address** : 101 THE PENTAGON  
SHAHU COLLEGE ROAD  
PUNE, 411009  
PUNE  
**Phone** : 02024224823  
**Email** : nia.153100@newindia.co.in  
**Fax** :  
**Collection Number** : 15310081170000003381  
**Collection Date** : 26/05/2017  
**Business Source Code** : 1D7806067

Received with thanks from SRI SAIBABA ENGINEERING FIRM.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount ₹	A/C Code	Sub A/C Code
15310036170100000069	Bank-153100	58664.00	9100.153100	BA00007508-153100-9100

**Total = ₹ 58664.00**

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Cheque	58664.00	514865	25-MAY-17	STATE BANK OF HYDERABAD	PUNE 44	1531001710004058	N.A.

**Total = ₹ 58664.00**

Utilization details of the Collected Amount :

Premium	Service Tax	Stamp Duty	Excess Amount
51012.00	7652.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NIA1D7800653	MUKUND PHADNIS	36

For The New India Assurance Company Limited  
Revenue Stamp



Date of Issue: 26/05/2017

Cashier's Initial

Authorized Signatory

**NIA S.T.REGN No: AAACN4165CST178.**

Note -

1. Please note the Policy Number, Collection Number and date in all future correspondence. This Receipt is subject to Realisation of Cheque..
2. NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

**IRDA Registration Number: 190**

Signature Not  
Verified  
Digitally signed  
by Srinivasan  
Vaideswaran  
Date: 2017.05.26  
12:01:07 IST

**Policy No. : 15310036170100000069 Document generated by 23787 at 26/05/2017 12:01:06 Hours.**

**Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.**