LIMITED TENDER-FOR PARTICIPATION TO WHOM IT IS ADDRESSED TO



THE STATE TRADING CORPORATION OF INDIA LIMITED (A Government of India Undertaking) AHMEDABAD REPRESENTATIVE OFFICE www.stclimited.co.in Flat no 702, Haridarshan Apartment, Near Parimal Underpass, Paldi, Ahmedabad -380007

REF NO. STC/AHD/INS/2/2025-26

DATE: 15.05.2025

SUB: LIMITED E- TENDER TO INVITE QUOTATIONS FROM FOUR EMPANELLED CONSULTANT OF STC FOR THE RENEWAL OF INSURANCE POLICY NO 21150211248600000015 AND 2115021124800000047 (FOR FLAT NOS 708 AND 702 AT HARIDARSHAN APPARTMENT, NEAR PARIMAL UNDER BRIDGE, PALDI AHMEDABAD

| | DATED | TIME |
|----------------|------------|----------|
| TENDER CLOSING | 19.05.2025 | 11:00 AM |
| BID OPENING | 19.05.2025 | 11.30 AM |
| | | |

STC INVITES QUOTATION FROM STC'S EMPANELLED FOUR CONSULTANT FOR ABOVE REFERRED LIMITED TENDER FOR RENEWAL OF ABOVE CITED POLICY FOR FURTHER PERIOD OF ONE YEAR AS PER DETAILS MENTIONED IN ATTACHED POLICIES.

Bids must be uploaded online using e-Procurement portal of NIC (eprocure.gov.in) in the prescribed format along with all necessary documents and information requested herein.

The bids may be uploaded online latest by 11:00 HRS(IST) on 19.05.2025 , and will be opened at 11:30 HRS (IST) on 19.05.2025

All details regarding the subject NIT are available on websites: stclimited.co.in and <u>www.eprocure.gov.in/eprocure/app</u>. Any change/modification/ corrigendum in connection with this NIT will be intimated through one or more of these websites only. Prospective bidders are therefore requested to visit above mentioned websites regularly to keep themselves updated. STC shall not be liable to send any individual information or issue a public notice.

The participating insurance Companies through the STC's Empanelled consultant should fulfil the following:

- 1. It should be registered with and licensed by IRDA.
- 2. As far as excess is concerned, it should be as per Tariff.
- 3. The insurance Company so appointed for the above tender would ensure submission of insurance certificate, bills and other related documents within 24 hours from the date and time of placement of Insurance Business.
- 4. The insurance claim, if any, would also be settled within 15 days after submission of all documents by STC to Insurance Company.

1. Instructions for filling the e-bid

- a) Bids are invited via limited e-bid process for the renewal of attached insurance policies for further period of one year.
- b) Bids have to be uploaded online only via https://eprocure.gov.in/eprocure/app (the e-procurement portal of NIC). No bids shall be accepted in hard copy or any other form.
- c) For submission of e bids, bidders are required to get themselves registered with NIC's central Public Procurement (CPP) portal (https://eprocure.gov.in/eprocure/app) using Class –III digital signature certificate. All the details mentioned during registration / enrolment process should be correct and true. Bidders have to abide by all the terms and conditions mentioned during registration process.
- d) Bidders are advised in their own interest to upload the online bids well before the bid document submission Closing date and time (as per server system clock of CPP). STC shall not be responsible for any delay or the difficulties encountered by the bidder during submission of bids at the eleventh hour on account of any technical or other issues.
- e) For any queries relating to the process of online bid submission or queries relating to Procurement Portal (https://eprocure.gov.in), the bidders may contact CPP Portal Helpdesk on Tel No's 0120-4001-002, 4001-005, 6277-787 and email ID support-eproc@nic.in.
- f) Bidders may regularly visit STC website for any information / clarification / addendum / corrigendum etc. related to this bid, processing of bids received, award of job, pre bid meet decisions etc. STC shall not be liable to send any information individually or publish a public notice for any further information regarding this bid in newspapers.
- g) Portal for Online Submission is https://eprocure.gov.in/eprocure/app
- h) STC may ask the bidders to submit any or all the documents in original or any additional information as part of their online bid anytime during the bid process.

- i) Bidder has to satisfy STC for ensuring sufficiency of documents necessary for Tender evaluation at his cost if so desired by STC.
- j) The bid document available on e-procurement portal shall be taken as final. STC reserves its right to ask for more document as "Clarification/supporting" only for verification of the uploaded documents. Decision of STC will be final and binding in this regard.
- 2. Bidder's Responsibility:
 - Although all details presented in this bid document have been compiled with all reasonable care, it is the bidder's responsibility to ensure that the information provided is adequate and clearly understood.
 - Site visit for understanding of risk, "Applicable Special Feature Discounts". Etc. has to be done by bidder at its own risk and cost.
 - Bidder's quotation is the responsibility of the bidder and no relief or consideration can be given for errors and omissions.

<u>General</u>

YOU MAY QUOTE THE MOST COMPETITVE OFFER FROM GOVT. INSURANCE COMPANIES, THROUGH STC'S EMPANNELED CONSULTANT FOR THE RENEWAL OF INSURANCE POLICY NO 21150211248600000015 AND 21150211248000000047 (FOR FLAT NOS 708 AND 702 AT HARIDARSHAN APPARTMENT, NEAR PARIMAL UNDER BRIDGE, PALDI AHMEDABAD FOR FURTHER PERIOD OF ONE YEAR. i.e 23.05.2026 . IN ADDITION, PLEASE NOTE THAT THE SUM INSURED IS BASED ON RIV VALUE AND THE INSTATEMENT CLAUSE SHOULD INVARIABLY BE MENTIONED IN THE POLICIES. PLEASE NOTE THAT THE SUM INSURED IS PROVISIONAL AND CAN BE REVISED AT ANY POINT OF TIME.

STC reserves the right to award the policy to the lowest bidder. In case of award of work to the insurance company, they are required to issue the cover note immediately after receipt of payment of premium by cheque/ RTGS/ NEFT, and Policy wordings are required to be submitted to STC within 07 days of receipt of cheque/RTGS/ NEFT. Final policy will be issued within 15 days after receipt of comments from STC, if any.

(Abhishek Bansiwal)

Manager

ANNEXURE-I

PRICE BID

Tender Inviting Authority: THE STATE TRADING CORPORATION OF INDIA LIMITED

Name of Work:LIMITED E- TENDER TO INVITE QUOTATIONS FROM FOUR EMPANELLED CONSULTANT OF STC FOR THE RENEWAL OF INSURANCE, POLICY NO 21150211248600000015 AND 21150211248000000047 (FOR FLAT NOS 708 AND 702 AT

Contract No: STC/AHD/INS/2/2025-26 dated 15.05.2025

| • | PRICE SC mplate must not be modified/replaced by the lumns, else the bidder is liable to be rejected | bidder and the sa for this tender. B | |
|------------|---|--|---|
| | Name and V | | 1 |
| NUMBER # | TEXT # | NUMBER # | TEXT # |
| SI. No. | Item Description | PREMIUM RATE (INCLUSIVE OF ALL) In Figures To be entered by the Bidder IN INDIAN Rs. P | TOTAL AMOUNT In Words |
| 1 | 2 | 13 | 55 |
| 1 | Description | | |
| 1.01 | FOR THE RENEWAL OF INSURANCE POLICY NO 21150211248600000015 AND 21150211248000000047 (FOR FLAT NOS 708 AND 702 AT HARIDARSHAN APPARTMENT, NEAR PARIMAL UNDER BRIDGE, PALDI AHMEDABAD | | INR Zero Only Rate Entry Please enter Basic Rate in Runees for this |

Price Bid must be uploaded separately in the Price Bid section only, in BOQ Format.

The prices should be quoted strictly as per coverage, terms and conditions, excess etc. as defined in TENDR DOCUMENT. Amount in words shall prevail in case of difference of amount between figures and words.

THE UNCONDITIONAL COMPLIANCE WITH THE ABOVE WOULD BE A PREREQUISITE FOR OPENING OF PRICE BID. SUBJECTIVE/PART COMPLIANCE WILL NOT BE ENTERTAINED WHICH MUST PLEASE BE ENSURED





BHARAT GRIHA RAKSHA POLICY UIN-IRDAN190RP0024V01202223

| 1. Insured's Details : | | | | | | | | |
|------------------------|---|--|---------------|-----|----------------------------|--|--|--|
| Insured Name | : | THE STATE TRADING CORPORATION OF INDIA LTD. | E-mail Id/Fax | : | saxena@stclimited.co.in, / | | | |
| Customer ID | : | PO69363892 | PAN No. | : | | | | |
| Address | : | 6TH FLOOR, H.K. HOUSE, B/H. JIVBHAI COMPLEX, ASHRAM ROAD, AHMEDABAD AHMEDABAD ,GUJARAT, 380006 | | : | 24AAACT0102F1Z8 / NA | | | |
| Phone No. | : | | | ••• | | | | |

| 2. Issuing Office Details : | | | | | | | | |
|-----------------------------|-----|--|-----------------|---|--|--|--|--|
| Office Name | : | VISANAGAR (211502) | E-mail Id/Fax | : | nia.211502@newindia.co.in / 220211 | | | |
| Office Code | ••• | 211502 | S.Tax Regn. No. | : | AAACN4165CST178 | | | |
| Address | : | SHOP NO. 13, GROUND FLOOR, KESHAV COMPLEX, OPP. SWAGAT HOTEL, MEHSANA CROSS ROAD, VISNAGAR- 384315 ,384315 GUJARAT, 384315. | | : | 24AAACN4165C2ZW | | | |
| Phone No. | : | 221936 / 220211 | SAC | : | 997137 (Other property insurance services) | | | |

| 3. Policy Details : | | | | | | |
|---|---|--|--|--|--|--|
| Policy Number | : | 21150211248600000015 | | | | |
| Period of Insurance | : | From: 24/05/2024 12:00:01 AM To: 23/05/2025 11:59:59 PM | | | | |
| Date of Proposal | : | 24-May-24 | | | | |
| Prev. Policy no. | : | 21300011238600000051 | | | | |
| Client Type | : | Corporate | | | | |
| Business Source Code | : | | | | | |
| Dev.Off level./Broker | : | Unison Insurance Broking Services Pvt. Ltd (DM2819560) 970000 Unison Insurance Mah 27aaacu2865q1zo - (DM2867693), | | | | |
| Agent/Bancassurance/SPECIFIED PERSON | : | | | | | |
| Phone No. | : | 9687639851, 7574844415 / NA | | | | |
| E-mail Id/Fax | : | placement@unisoninsurance.net, / / | | | | |

4. Collection Particulars :

| Premium | : | 4,194 | Total (₹) | : | 4,950 | | | | |
|---------|---|-------|-----------------------|---|--------------------------------|--|--|--|--|
| GST | : | 756 | Receipt No. & Date | : | 2115028124000000689 - 23/05/24 | | | | |

| 5. Policy Level Covers : | |
|--------------------------------|--|
| Description of Property | : As per Block Details |
| Location Address with Pin Code | : As per Block Details |
| Risk Description | : As per Block Details |
| Risk Code | : 1001(Dwelling: Society including Home Welfare Association/Dwellings) |
| Sum Insured | : ₹ 8,740,000 |

6. **Block Details :**



Vermed Digitally signed by DHIX Policy No. : 21150211248600000015Document generated by 40762 at 23/05/2024 14:08:59 Hours. KUMAR Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. Date: 2024.05.23 Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. Tot satisfies for your grievance, if any,you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website bttp://newindia.co.in



| Ris k SI No | Location Address with Pin Code | Carpet Area of the structure(sq m) | Rate of Cost of Construction(₹ /sq.m) | Building SI | SI of Addl. Structure | Details of Addl. Structure | F.F.F.(Home Furnishing) SI |
|----------------------|---|---|--|----------------------|-----------------------------------|-----------------------------------|----------------------------------|
| 1 | 708 HARIDARSHAN APRTS PARIMAL CROSSING ELLISBRIDGE AHMEDABAD GUJARAT , 380006 | 1,000 | 8,640 | 86,40,000 | 0 | NA | 1,00,000 |
| | | | | | | | |
| Ris k SI No | Location Address with Pin Code | Electrical/Elect ronic Sum Insured | Others General Contents Sum Insured | Total Sum Insured | Type of Construction- Walls | Type of Construction- Floor | Type of Construction- Roof |

Additional Covers: 7.

7(a) Inbuilt Cover:

Cover for Loss of Rent

| Risk Serial Number | Sum Insured for No. of Months | No. of Months |
|--------------------|-------------------------------|---------------|
| 1 | 0 | 0 |

Cover for Rent for Alternative Accommodation

| Risk Serial Number | Sum Insured for No. of Months | No. of Months |
|--------------------|-------------------------------|---------------|
| 1 | 0 | 0 |

Optional Covers: i)Valuable Contents: 7(b)

| | I) Talaable contention | | | |
|----------|------------------------|-------------|--------------------------------|------------------|
| SI No | Item Name | Sum Insured | Valuation Certificate Attached | Valuation agency |
| | | | | |

| ii)PA cover | | | | |
|-----------------------|-----|-------------|--------------|--------------|
| Name of Policy Holder | Age | Sum Insured | Nominee Name | Relationship |
| NA | 0 | 0 | NA | NA |
| Name of your Spouse | Age | Sum Insured | Nominee Name | Relationship |
| NA | 0 | 0 | NA | NA |

(7c) Add-on Covers

| SI. No. | Add-on Covers | SI/Maximum limit of Indemnity | Availed/Not Availed |
|---------|---|--|---------------------|
| 1 | Removal of Debris (In Excess of 2% and maximum up to 5% of claim amount) | In Excess of 2% and Maximum up to 5% of the claim amount | Not Availed |
| 2 | Architects, Surveyors and Consulting Engineers Fees (In excess of 5% & maximum up to 10% of claim amount) | In Excess of 5% & Maximum up to 10% of the claim amount | Not Availed |
| 3 | Reimbursement of Food Expense | Maximum 3 days up to ₹15000/- | Not Availed |

| 8. Sum I | 8. Sum Insured Summary : | | | | | | |
|----------|---|----------|-----------|--|--|--|--|
| SI. No. | Asset Description Sum Insured (₹) | | | | | | |
| 1. | Home building Sum Insured | : | 8,640,000 | | | | |
| 2. | SI of additional structure | : | 0 | | | | |
| 3. | Furniture, Fixtures and Fittings(Home Furnishings)Sum Insured | 1,00,000 | | | | | |
| 4. | Electrical/Electronic Sum Insured | : | 0 | | | | |
| 5. | Other General Contents SI | : | 0 | | | | |

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For redressal of your grievance, if any,you may approach any one of the following offices-1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website



| 6. | Other pro | Other property specifically required to be covered : | | | | | | | | 0 | |
|-------------------------|-----------------------------|--|---|-----|---------|------|----|-------|--|----------|---|
| | Total Sum Insured | | | | | | | : | | 8,740,00 | 0 |
| 9. Terroi | rism/EQ/S | STFI : | | | | | | | | | |
| Terrorism Covered : Yes | | Earthquake Covered | : | Yes | STFI Co | over | ed | : Yes | | | |
| 10. Hyp | 10. Hypothecation Details : | | | | | | | | | | |
| SI.No. | Name of the Financiers | | | | | | | | | | |
| 1 | | NOT OPTED | | | | | | | | | |

| 11. Co | insurance Details : | | | | |
|--------|---------------------|---------|-------------|---------|---------------|
| SI.No. | Coinsurance Type | Company | Office Code | % Share | Premium Share |
| 1 | NOT OPTED | | | | |

12. Subjectivities :

The insurance under this policy is subject to

| Special Conditions | : | | | |
|--|----|---|--|--|
| Special Warranties | : | NA | | |
| Warr Secti Occu Warranty Title anty on panc Num Code y ber Code | | Wordings | | |
| Special Exclusion | : | NA | | |
| Clauses/ In-built Covers | •• | Terrorism Clause Architect, surveyor, consulting engineer fees: Reasonable fees up to 5% of the claim amount Removing debris from the site: Reasonable costs up to 2% of the claim amount | | |
| Risk Covered | | As per Risk covered attached | | |
| Fire Products-Exclusions | | As per Exclusions attached | | |

13. Terrorism Deductibles:-

| 13. Terrorisin Dedu | | | | | | | | |
|-----------------------------|---|---------------|---------------------------------|--|--|--|--|--|
| Nature of Risk | Deductibles (as a % of claim/loss amount) | Minimum Limit | Maximum Limit | | | | | |
| Shops & Residential Risk | 1 % of claim amount | ₹ 10,000/- | ₹ 5,00,000/- (Rupees 5 Lacs) | | | | | |

14. Premium Details :

| Premium Head | | Premium Amount (₹) |
|---------------------------------------|---|--|
| Net Premium under the policy | : | 4,194 |
| GST | : | 756 |
| Total premium including GST | : | 4,950 |
| Total premium including GST(In words) | : | RUPEES FOUR THOUSAND NINE HUNDRED FIFTY ONLY |

| Premium and GST Details | | | | | |
|-------------------------|-------------|---------------|--|--|--|
| | Rate of Tax | Amount in INR | | | |
| Premium | | ₹ 4,194 | | | |
| SGST | 9 | 378 | | | |
| CGST | 9 | 378 | | | |
| IGST | 0 | 0 | | | |

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For redressal of your grievance, if any,you may approach any one of the following offices-1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website



In witness whereof the undersigned being duly authorized by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 23rd day of May,2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 23/05/2024

Duly Constituted Attorney(s)

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 : 21150224E0001210

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C





NEW INDIA BHARAT SOOKSHMA UDYAM SURAKSHA POLICY UIN-IRDAN190RP0030V01202223

1. Insured's Details :

| Insured Name | : | THE STATE TRADING CORPORATION OF INDIA LTD. | E-mail Id/Fax | : | saxena@stclimited.co.in, / |
|--------------|---|--|---------------|----|----------------------------|
| Customer ID | : | PO69363892 | PAN No. | •• | |
| Address | | 6TH FLOOR, H.K. HOUSE, B/H. JIVBHAI COMPLEX, ASHRAM ROAD, AHMEDABAD AHMEDABAD ,GUJARAT, 380006 | | •• | 24AAACT0102F1Z8 / NA |
| Phone No. | : | | | | |

Issuing Office Details : 2.

| Office Name | : | VISANAGAR (211502) |
|-----------------|---|--|
| Office Code | : | 211502 |
| Address | : | SHOP NO. 13, GROUND FLOOR, KESHAV COMPLEX, OPP. SWAGAT HOTEL, MEHSANA CROSS ROAD, VISNAGAR-384315 |
| | | ,384315 GUJARAT , 384315. |
| Phone No. | : | 221936 / 220211 |
| E-mail Id/Fax | : | nia.211502@newindia.co.in / 220211 |
| S.Tax Regn. No. | : | AAACN4165CST178 |
| GSTIN | : | 24AAACN4165C2ZW |
| SAC | : | 997137 (Other property insurance services) |

3. Policy Details :

| Policy Number | : | 21150211248000000047 |
|---|-----|--|
| Period of Insurance | ••• | From: 24/05/2024 12:00:01 AM To: 23/05/2025 11:59:59 PM |
| Date of Proposal | ••• | 24-May-24 |
| Prev. Policy no. | ••• | 21300011238000000201 |
| Client Type | ••• | Corporate |
| Business Source Code | ••• | |
| Dev.Off level./Broker | : | Unison Insurance Broking Services Pvt. Ltd (DM2819560) 970000 Unison Insurance Mah 27aaacu2865q1zo - (DM2867693), |
| Agent/Bancassurance/SPECIFIED PERSON | : | |
| Phone No. | : | 9687639851, 7574844415 / NA |
| E-mail Id/Fax | : | placement@unisoninsurance.net, / / |

4. **Collection Particulars :**

| Premium | : | 4,124 |
|--------------------|-----|--------------------------------|
| GST | ••• | 742 |
| Total (₹) | ••• | 4,866 |
| Receipt No. & Date | •• | 2115028124000000689 - 23/05/24 |

5. **Policy Level Covers :**

| Risk Serial No | | Occupancy Code | Occupancy Description |
|--------------------------------|---|----------------------|-----------------------|
| Sum Insured | : | ₹ 8,940,000 | |
| Risk Description | : | As per Block Details | |
| Location Address with Pin Code | : | As per Block Details | |
| Description of Property | : | As per Block Details | |



Policy No. : 2115021124800000047Document generated by 40762 at 23/05/2024 14:09:27 Hours.

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| 1 1007 Office premises/Meeting Rooms | | | |
|--------------------------------------|---|------|-------------------------------|
| | 1 | 1007 | Office premises/Meeting Rooms |

Block Details : 6.

Only Building & Contents selected:

| Risk Sl No. | Location Address with Pin Code | Building including plinth basement and additional Structures | Furniture, Fixture & Fittings and other equipment s | Plant & Machinery | Other Contents Details | Other Contents SI | Type of Constructio n - Walls | Type of Constructio n - Floor | Type of Constructio n - Roof |
|-------------------|---|--|--|----------------------|------------------------------|----------------------|-------------------------------------|-------------------------------------|------------------------------------|
| 1 | 702 HARIDARSHAN APRTS PARIMAL CROSS ELLSBRIDGE AHMEDABAD GUJARAT 380006 | 8640000 | 300000 | 0 | Ν | 0 | Р | Р | Ρ |

7. Additional Covers:

a) Built-in Covers:

| Cover Name Opted or Not | | or Not |
|--|--------------|-------------|
| Additions, alterations or extensions | Y | es |
| Temporary removal of stocks | Y | es |
| Cover for specific content | Y | es |
| Start-up expenses | Yes | |
| Professional fees | Yes | |
| Removal of debris | Yes | |
| Costs compelled by Municipal Regulations | Yes | |
| | | |
| Cover Name | Opted or Not | Sum Insured |
| Floater Add-on | NO | 0 |

b) Add-on Covers:

(i)

| Cover Name | Opted or Not | Sum Insured |
|--------------------|--------------|-------------|
| Declaration Add-on | NO | 0 |

(ii)

| SI. No. | Add-on Covers | SI/Maximum limit of Indemnity | Availed/Not Availed |
|---------|--|---|------------------------|
| 1 | Expenses for loss minimization / loss prevention | 5% of claim amount maximum up to ₹ 25 lakh | Not Availed |
| 2 | Hire Purchase or Lease Agreements / Properties under Consignment, Care, Custody and Control | 5% of Sum Insured maximum up to ₹ 25 lakh | Not Availed |
| 3 | Inadvertent Omission | Maximum up to 5% of Sum Insured of Building, Machinery and FFF (except stocks) | Not Availed |
| 4 | Contamination and co-mingling of stocks of oil and chemicals only | Maximum up to 5% of Sum Insured of stock | Not Availed |
| 5 | Expediting expense | Maximum up to 5% of claim amount & maximum up to 25 lakhs | Not Availed |

Policy No. : 2115021124800000047Document generated by 40762 at 23/05/2024 14:09:27 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415. For redressal of your grievance, if any,you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://newindia.co.in.



| SI. No. | Asset Description | | Sum Insured (₹) |
|---------|---|---|-----------------|
| 1. | Building including plinth, Basement and additional structures | : | 8,640,000 |
| 2. | Furniture & Fixtures, Fittings and other equipment | : | 3,00,000 |
| З. | Plant & Machinery Sum Insured | : | 0 |
| 4. | Other Contents Sum Insured | : | 0 |
| 5. | Raw Material Sum Insured | : | 0 |
| 6. | Stocks in process Sum Insured | : | 0 |
| 7. | Finished Stock Sum Insured | : | 0 |
| 8. | Stocks Held in Trust Sum Insured | : | 0 |
| | Total Sum Insured | : | 8,940,000 |

| 9. Terro | orism/EQ/STFI : | | | | | | | |
|---------------------------|-----------------------------|----------------------|------------------|------------|---------------|--|--|--|
| Terrorism | Covered : Ye | s Earthquake Covered | : Yes 51 | FI Covered | : Yes | | | |
| 10. Hy | 10. Hypothecation Details : | | | | | | | |
| SI.No. | | Name o | f the Financiers | | | | | |
| 1 | | NOT OPTED | | | | | | |
| 11. Coinsurance Details : | | | | | | | | |
| SI.No. | Coinsurance Type | Company | Office Code | % Share | Premium Share | | | |
| 1 | NOT OPTED | | | | | | | |

12. Subjectivities :

The insurance under this policy is subject to

| The insurance under this policy is sub | Jeee | |
|---|------|--|
| Special Conditions | : | |
| Warr Secti IIB Warranty Title anty on Occu Num Code panc ber y Code | | Wordings |
| Special Exclusion | : | NA |
| Clauses / In-built Covers | : | (1) Terrorism Clause (2) Additions, alterations, or extensions: Property that are erected, acquired, or added during the Policy Period is covered upto 15% of the Sum Insured for that item (excluding stocks) (3) Temporary removal of stocks: Loss to stock temporarily removed to other premises for fabrication, processing or finishing upto 10% of value. (4) Cover for Specific Contents: Cover for Money upto ?50,000 (Rupees Fifty Thousand) during the policy period, cover for documents such as deeds, manuscripts, business books, plans, drawings, securities etc. upto ?50,000 (Rupees Fifty Thousand) during the policy period, cover for computer programmes, information and data upto ?5 Lakh (Rupees Five Lakh) during the policy period and cover for personal effects of employees, Directors and visitors upto ?15,000 (Rupees Fifteen Thousand) per person for a maximum of 20 persons during the policy period. (5) Start-Up Expenses: Start-up cost incurred consequent upon a loss or damage due to insured events upto ? 5 Lakhs (Rupees Five Lakh). (6) rofessional fees: Reasonable fees of architects, surveyors and consulting engineers upto 5 % of the claim amount. (7) Cost for Removal of debris: Reasonable expenses for removal of debris upto 2 % of the claim amount. (8) Costs compelled by Municipal Regulations: Additional cost of reconstruction of property incurred solely for complying with municipal regulations |
| Risk Covered | : | As per Risk covered attached |
| Fire Products-Exclusions | : | As per Exclusions attached |

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| 13. A) Compulsory Deductible: ₹ 5,000/- for each claim B) Terrorism Deductibles: | | | | | | | |
|--|---|---------------|-----------------------------------|--|--|--|--|
| Nature of Risk | Deductibles (as a % of claim/loss amount) | Minimum Limit | Maximum Limit | | | | |
| hops & Residential Risks | 1 % of claim amount | ₹ 10,000/- | ₹ 5,00,000/- (Rupees 5 Lacs) | | | | |
| Non-Industrial | 1 % of claim amount | ₹ 25,000/- | ₹ 10,00,000/- (Rupees 10 Lacs) | | | | |
| Industrial | 5 % of claim amount | ₹1,00,000/- | ₹ 25,00,000/- (Rupees 25 Lacs) | | | | |

14. Premium Details :

| Premium Head | | Premium Amount (₹) |
|---------------------------------------|---|--|
| Net Premium under the policy | : | 4,124 |
| GST | : | 742 |
| Total premium including GST | : | 4,866 |
| Total premium including GST(In words) | : | RUPEES FOUR THOUSAND EIGHT HUNDRED SIXTY-SIX ONLY |

| Premium and GST Details | | | | | | |
|-------------------------|-------------|---------------|--|--|--|--|
| | Rate of Tax | Amount in INR | | | | |
| Premium | | ₹ 4,124 | | | | |
| SGST | 9 | 371 | | | | |
| CGST | 9 | 371 | | | | |
| IGST | 0 | 0 | | | | |

In witness whereof the undersigned being duly authorized by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 23rd day of May,2024.

For and on behalf of The New India Assurance Company Limited

Date of Issue: 23/05/2024

Duly Constituted Attorney(s)

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 : 21150224E0001211

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

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