



#### CONTRACTOR'S ALL RISKS INSURANCE POLICY

अतिवादी	THE NEW INDIA AS (Government of B)	SSURAI dia Und	NCE CO. LTD. ertaking)  CONTRACTOR'S ALL RIS	SKS INSURANCE POL	.ICY	
Salu.	Insured's Name	<u>:</u>	MR. PREM KUMAR SANGHI & OTHER	RS		
ŀ	Insured's Details		Issuing Office Details			
	Customer ID		PO70970064	Office Code	:	A.S.Rao Nagar Branch (612404)
	Address	:	C/O MODI PROPERTIES PVT LTD, # 3-6-97/301, IHSAN SURABHI ARCADE, BASHEERBAGH, HYDERABAD Rangareddi ,TELANGANA, 500010	Address		304,NSIC Building, Kamalanagar, E.C.I.L. Post, Hyderabad ,500062
	Phone No		8978144447	Phone No	:	04027122383 / 04027145105
	E-mail/Fax	<del></del>	gkrao@modiproperties.com, /	E-mail/Fax	:	nia.612404@newindia.co.in /
	PAN No	<del> </del>		S.Tax Regn. No	:	AAACN4165CST178
	GSTIN/UIN	-+:	NA / NA	GSTIN	:	36AAACN4165C3ZQ
	GSTIN/OIN	- :		SAC	:	997139 (Other non-life insurance services excl RI)

- 18 W		Police	cy Details	_	
Policy Number		61240444190300000002	Busi	ne	ss Source Code
Period of Insurance	:	From:15/07/2019 03:01:47 PM To: 14/07/2025 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator	:	DIRECT BUSINESS - (1D4023702
Date of Proposal	:	15-Jul-19	Agent/Bancassurance/Sp ecified Person	:	Mr. RAMANA BABU . K. (NIAAG00050031) K.RAMANA BABU (SI00088590)
Prev. Policy no.	1:		Phone No	:	9618114464 / 04027122383, 9888448850
Client Type	:	Non-Corporate	E-mail/Fax	:	ramanababu36@gmail.com, /

Premium	GST	Total	Receipt No. & Date:
100700	18126	118826	61240481190000001881 - 15/07/19

\* Premium subject to adjustment on completion of the Project

Risk Address : 1 S.Y.NO:196, KAWKOOR, MALKAJGIRI MDL, MEDCHAL MALKAJGIRI DIST, Rangareddi, TELANGANA, INDIA, 500047 Location of Contract site

	Principal(s)/ Contractor/ sub-contractor Details				
SI. No.	Name	Address			
1	MODI PROPERTIES PVT LTD	# 3-6-97/301. IHSAN SURABHI ARCADE HYDERABAD			

SI. No.	Description of Contract Works
1	1) RESIDENTIAL APARTMENTS CONSTRUCTION FOR PROJECT PERIOD 6 YEARS AS 2 BASEMENTS, GROUND
'	FLOOR+6 UPPER FLOORS 2) NA 3) NA

SI. No.	Period of Insurance				
1	Period of Insurance From: 15/07/2019 03:01:47 PM To: 14/07/2025 11:59:59 PM plus 0 months maintenance period				

	terial Damage :	omnorany works including	all materials to be incorporated therein )	
SI. No.	1.1 ) Contract price	1 2 ) Materials or items	2) Any other works and installations	Total Project Sum Insured
1	₹8000000	₹10000000	₹2000000	₹20000000

3. Contra	ctors Plant ar	nd Machinery (Memo 4) as	per list enclo	sed				
Item No.	T .	Description of Items		Sum Insured	Risk Code	Excess due to AOG Perils	Excess due to Other than AOG	Excess for Boom Section

बीमा पोलिसी स्टैम्प के लिए एमेकित स्टैम्प शुलक भुगतान किया

Policy No.: 61240444190300000002 Document generated by 38080 at 15/07/2020 Regd. & Head Office: New India Assurance Bidg. 87 M.C. Road Fort, Mumbai - 400 001. TOX 800 209 1415.

dated 07-06-2018



4. Add on C						
	urrounding Property	Indemnity		E	cess	
SI. No.	Little Of	Hidelitates				
2.Additiona	I Custom Duty				cess	
SI.	No.Limit	of Indemnity			(CE33	
	of Dobala per occurrence					
	of Debris per occurrence	of Indemnity		Excess		
SI.	140.641114	<u> </u>				
4. Professio	onal Fees			F	xcess	
SI.	No.Limit	of indemnity				
E. Europelikie	ng Cost including Air Freight &	Express Freight				
SI.	No.Limit	of indemnity			xcess	
6. Offsite S	itorage/ Fabrication	6 to do combre	T		xcess	
SI. No.		f Indemnity				
7a On Inci	reased Replacement Value wh	ich may have to be paid or	n replacem	ent of Item 1.1		
SI. No.	Limit o	f Indemnity			xcess	
1		₹0		Polic	y Excess	
		to be sold of	n molacen	nent of Item 1.2		
	reased Replacement Value wh	of Indemnity	ii repiacen	<u> </u>	xcess	
SI. No.		₹0		Polic	y Excess	
1						
7c. On Inc	reased Replacement Value wh	ich may have to be paid o	n replacen	nent of Item 1.3		
SI. No.	Limit	of Indemnity		Excess Policy Excess		
1		₹0		Polit	Ly Excess	
	ul Dalantakanant dayan					
	tic Reinstatement clause	of Indemnity		Excess		
SI. No.	Lime				g. 1g0 1	
9. Loss mi	inimisation expenses				Excess	
SI. No.	Limit	of Indemnity			EXCESS	
	formula his decuments					
	for valuable documents	of Indemnity			Excess	
Si. No.						
11. Desig	n Defect Cover				Excess	
SI. No.	⊔mit	of Indemnity			EXCESS	
- ·· · ·	Third Dorby Lipbilliby					
	- Third Party Liability:	of any one accident or T	otal limit o	of Section II during	Any One Person	
SI. No.	Limit of indemnity in respect series of accidents arising	g out of one event	poll	icy period		
	for Section I and II :	2. For Maintenance perio	d 3. For	Major peril claims as	Terrorism Claims	
SI. No.	Construction claims	claims	per	Memo 8 of Section 1	0.5 % of Total Sum Insured	
1	the state of Claim Amount subject 5% of			of Claim Amount subject Minimum of ₹ 100000 each claim  1,00,000/- for each and every claim		
Fycosses	For Specific AddOn Covers :					
Si. No.	Descri	ption Of Cover			Excess	
3,, ,,,,,				Term	rism Premium	
1	Terrorism				17940	
	YE			nice		
Deductil Pool	bies Opted for Terrorism	: 1% of the claim amount Maximum of 10,00,000	for each a	and every claim ad blec	t to Minimum of 25,000 and	
				A 612404	J. Coas UD	

Policy No.: 61240444190300000002 Document generated by 33203 of 1502/2919, 15:20 22 Hours.

Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumber 400 0934, 151.L. ENST. No. 1 800 209 1415.

Page 2 of 4



Risk Serial No.	Earth Quake Cover YES
Risk Serial No.	STFI Cover
RISK SERIA NO.	YES

	Installment I	Details	
1 1 II 1 November	Installment Date on or before	Installment	Amount (₹)
Installment Number	Histainhein Date on or Delate	Premium	GST
	15/07/2019	82760	14896
1	15/07/2019	17940	3230

		ATTACHED TO & FORMING PART OF THE POLICY  Endorsement Title
SI. No.	Endorsement Number	Pipeline Construction
1	CAR 001	Exclusion of Loss of Stabilising Fluid
	CAR 002	Road Construction
3	CAR 003	Piling Construction
4	CAR 004	Abandonment of Shafts
5	CAR 005	
6	CAR 006	Crops, Forests, Cultivated Areas
7	CAR 007	Existing underground cables
8	CAR 008	Contract works time schedule
9	CAR 009	Temporary access Roads
10	CAR 010	Special conditions concerning the construction of Dam and Water Reservoir
11	CAR 011	Special conditions concerning safety measures with respect to Precipitation, Flood and Inundation
12	CAR 012	Breakage of glass
13	ENG 004	Escalation
	ENG 005	Air Freight
14	ENG 007	Additional Customs Duty
15	ENG 001	Coinsurance
16	ENG 011	Deletion of earthquake (Fire & Shock) Perils in EQ ZONE I & II
17	PR 001	Cross Liability
18	PR 002	Limited Maintenance Visits Cover
19	PR 008	Exclusion of transit losses
20	PR 003	Extended Maintenance Cover
21		Installment Facility
22	PR 005	Expenses related of Freight, Insurance, Customs Duty
23	PR 007	Refund for early completion
24	PR 009	Deletion of Maintenance cover
25	PR 010	Extension of policy period
26	PR 011	Change in commencement date
27	PR 012	Mid-term increase in SI
28	PR 013	Cancellation of policy
29	PR 014	Professional Fees
30	PR 015 LR 001	Cover Extra charges-OT,Night Work,Work Public Holidays,Exp Frght incl
32	LR 002	Special conditions concerning Fire Fighting Facilities
33	LR 003	72 hours Clause
	LR 004	Professional Fees Clause
34	LR 005	Clearance & Removal of Debries Clause
35	LR 005	50:50 Clause
36 37	LR 006	Cover for Increased Customs Duty

Policy No.: 61240444190300000002 Document generated by 3208 4145402019 18:48:32 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumod 4400 001, Tell FREE No. 1 800 209 1415.



SI. No.	Endorsement Number	Endorsement Title	
		Loss minimisation expenses	
38		Owners Surrounding Property	
39	LR 009	Automatic Reinstatement	
40	LR 010	Cover for Cross Llability	
41	LR 011	Waiver of Subrogation	
42	LR 012	Cover for manufacturers risk	
43	LR 013	Extended maintenance cover	
44	LR 014	Cover for 'valuable documents'	
45	LR 015		
46	LR 016	Cover for Offsite Storage	
47	LR 017	Waiver of Contribution	
48	LR 018	Continuity of cover	
46	ENG 002	Extension of terrorism damage	
	SLEC SLEC	Section Limitation and Exclusion Clause	

Premlum and GST Details	Rate of Tax Amount	
Premlum SGST	9	9063
CGST	9	9063
IGST	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 15th day of July,2019.

Date of Issue: 15/07/2019

For and on behalf of The New India Assurance Company Limited

Duly Constituted Attorney(s)

Least

Tax Invoice No: 61240419P0002764

IRDA Registration Number: 190

वावा होने पर कृपया रिपोर्ट करें :
In Case of Claim Please Report to:
वावा हव – है.श्रे.का. /CLAIMS HUB-HRO
दिव न्यू इंडिया एश्योरेन्स कंपनी लिमिटेड
The New India Assurance Co. Ltd.
6th Floor, F-Block, Surya Towers,
S.P.Road, SECUNDERABAD-500 003.
Ph: 040-27729155, Help Desk: 27819678
E-mail: ch61@newindia.co.in

दि न्यू इंडिया एश्योरेन्स कंपनी लिमिटेड The New India Assurance Co. L.t.!. ए.एस.राव नगर श्रा.का./A.S.RAO NAGAR B.O.-612-34 304, तीसरी मंजिल/3rd Floor, एन एस आई सी बिल्डिंग/NSIC Building, कमलानगर/Kamalanagar ई सी आई एल पोस्ट/ECIL P.O., हैदराबाद/HYDERABAD - 500 062. फोर्म/Phone: 040-2714 5105

Policy No. : 61240444190300000002 Document generated by 38208 at 15/07/2019 15:48:32 Hours.

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





#### COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

**Issuing Office** 

: A.S.Rao Nagar Branch (612404)

Address

: 304,NSIC Building, Kamalanagar, E.C.I.L. Post, Hyderabad

Phone

04027122383

Email

: nia.612404@newindia.co.in

**Collection Number** 

: 61240481190000001881

**Collection Date** 

: 15/07/2019

**Business Source Code** 

PAN No of Payer

: 1D4023702

Received with thanks from MEHTA AND MODI REALTY KOWKUR LLP. The amount received/Adjusted is towards -

	<del>J</del> -			
Policy No.	A/C Description	Amount₹	1/5 5-1	
61240444190300000002	Bank-612404	118826.00	A/C Code	Sub A/C Code
Totai = ₹ 118826.00		110020.00	9100.612404	BA00004717-611902-9100

Your Payment/Adjustment Details are as under

Mode		Cheque Date	Drawee Bank	Drawee Branch	Reference No.	S
Cheque Total = ₹1	844212	15-JUL-19	YES BANK	S P ROAD	6124041910006154	Scroll/BG/A PD Balance

Utilization details of the Collected Amount :

Premium	GST	
100700.00	18126.00	Stamp Duty Excess Amount
Si no. Agenc	Code	0.00
1 NIAAG	00050031 RAMANA B	Denartment Code
_	INAMANA	ABU K. 44

For The New India Assurance Company Limited

Revenue Stamp

Authorized Signatory

Note -

Date of issue: 15/07/2019

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.

Tax Invoice No: 61240419P0002764

IRDA Registration Number: 190

स्त्रस्य स्टेप्य के लिए स्वीकत स्टेस्स Consolidated Stamps Duty towa: 4s Revenue Stamps paid
Procs. No. GS05/3081/R/2016 dated 23-08-claim

Signature

Policy No.: 6124044419030000002 Document generated by 38208 at 15/07/2019 15:48:32 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

Page 1 of 1