



CONTRACTOR'S ALL RISKS INSURANCE POLICY

Insured's Name	: GULMOHAR RESIDENCY AND JADE ESTATES	Issuing Office Details	
Insured's Details		Office Code	: A.S.Rao Nagar Branch (612404)
Customer ID	: PO55649359	Address	: 304, NSIC Building, Kamalanagar, E.C.I.L. Post, Hyderabad, 500062
Address	: SY.NO.19, MALLAPUR VILLAGE, UPPAL MANDAL, MEDCHAL DISTRICT SECUNDERABAD, TELANGANA, 500003	Phone No	: 04027122383 / 04027145105
Phone No	: 8978144447	E-mail/Fax	: nia.612404@newindia.co.in /
E-mail/Fax	: /	S.Tax Regn. No	: AAACN4165CST178
PAN No	: ABCDE5867E	GSTIN	: 36AAACN4165C3ZQ
GSTIN/UIN	: NA / NA	SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details		Business Source Code	
Policy Number	: 61240444170300000004	Dev.Off. level/Broker/Corp. Agent	: DIRECT BUSINESS - (1D4023702)
Period of Insurance	: From:22/12/2017 11:42:56 AM To: 21/12/2023 11:59:59 PM	Agent/Bancassurance	: Mr. RAMANA BABU . K. (NIAAG00050031) K.RAMANA BABU (SI00088590)
Date of Proposal	: 22-Dec-17	Phone No	: 9618114464 / 04027122383, 9866419999
Prev. Policy no.	:	E-mail/Fax	: ramanababu36@gmail.com, / kshetras02@gmail.com, / /
Client Type	: Non-Corporate		

Premium	GST	Total	Receipt No. & Date:
248471	44724	293195	61240481180000008769 - 01/03/19

* Premium subject to adjustment on completion of the Project

Location of Contract site Risk Address : 1 SY.NO.19, MALLAPUR VILLAGE,, UPPAL MANDAL, MEDCHAL DIST, SECUNDERABAD, SECUNDERABAD, TELANGANA, INDIA, 500003

Principal(s)/ Contractor/ sub-contractor Details		
Sl. No.	Name	Address
1	GULMOHAR RESIDENCY AND JADE ESTATES	SY.NO.19, MALLAPUR VILLAGE, UPPAL MANDAL, MEDCHAL DISTRICT SECUNDERABAD

Description of Contract Works	
Sl. No.	1) CONSTRUCTION OF RESIDENTIAL COMPLEX (TWO BASEMENTS, GROUND FLOOR AND 5 FLOORS) AS PER GHMC REQUIREMENT. 2) NA 3) NA

Period of Insurance	
Sl. No.	1
Period of Insurance	From : 22/12/2017 11:42:56 AM To : 21/12/2023 11:59:59 PM plus 24 months Extended Maintenance period

Section I - Material Damage :

1. 1. Contract works (Permanent and Temporary works including all materials to be incorporated therein)

Sl. No.	1.1) Contract price	1.2) Materials or items supplied by the Principal	2) Any other works and installations not included in 1.1 and 1.2 above (e.g. camp, colony, stores etc. as per list enclosed)	Total Project Sum Insured
1	₹50000000	₹0	₹0	₹50000000

3. Contractors Plant and Machinery (Memo 4) as per list enclosed

Item No.	Quantity	Description of Items (Type, Manufacture, Capacity)	Year of Manufacture	Sum Insured (in ₹)	Risk Code	Excess due to AOG Perils	Excess due to Other than AOG Perils	Excess for Boom Section
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Validity unknown
Digitally signed by Sriniwasan
Valid from 2019.03.01 17:06:03 IST

Policy No. : 61240444170300000004 Document generated by 30312 at 01/03/2019 17:06:02 Hours.

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4. Add on Covers			
1. Owners Surrounding Property			
Sl. No.	Limit of Indemnity	Excess	
1		Policy Excess	
2. Additional Custom Duty			
Sl.	No. Limit of Indemnity	Excess	
1	₹ 0	5 % of Additional Duty	
3. Removal of Debris per occurrence			
Sl.	No. Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
4. Professional Fees			
Sl.	No. Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
5. Expediting Cost including Air Freight & Express Freight			
Sl.	No. Limit of Indemnity	Excess	
1	₹	Policy Excess	
6. Offsite Storage/ Fabrication			
Sl. No.	Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
7a. On Increased Replacement Value which may have to be paid on replacement of Item 1.1			
Sl. No.	Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
7b. On Increased Replacement Value which may have to be paid on replacement of Item 1.2			
Sl. No.	Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
7c. On Increased Replacement Value which may have to be paid on replacement of Item 1.3			
Sl. No.	Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
8. Automatic Reinstatement clause			
Sl. No.	Limit of Indemnity	Excess	
1	0	Policy Excess	
9. Loss minimisation expenses			
Sl. No.	Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
10. Cover for valuable documents			
Sl. No.	Limit of Indemnity	Excess	
1	₹ 0	Policy Excess	
11. Design Defect Cover			
Sl. No.	Limit of Indemnity	Excess	
1	₹ NA	5 times Policy Excess	
Section II - Third Party Liability :			
Sl. No.	Limit of Indemnity in respect of any one accident or series of accidents arising out of one event	Total limit of Section II during policy period	Any One Person
Excesses for Section I and II :			
Sl. No.	1. For Storage & Construction claims	2. For Maintenance period claims	3. For Major peril claims as per Memo 8 of Section I
			Terrorism Claims

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Tax Invoice No : 6124044400000004

IRDA Registration Number: 190

Policy No. : 61240444170300000004 Document generated by 30312 at 01/03/2019 17:06:02 Hours.
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COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office : A.S.Rao Nagar Branch (612404)
Address : 304, NSIC Building, Kamalanagar, E.C.I.L. Post, Hyderabad
500062
Hyderabad
Phone : 04027122383
Email : nia.612404@newindia.co.in
Fax :
Collection Number : 61240481180000008769
Collection Date : 01/03/2019
Business Source Code : 1D4023702
PAN No of Payer : ABCDE5867E

Received with thanks from GULMOHAR RESIDENCY AND JADE ESTATES.

The amount received/Adjusted is towards -			A/C Code	Sub A/C Code
Policy No.	A/C Description	Amount	9100.612404	BA00004717-611902-9100
61240444170300000004	Bank-612404	2276.00		

Total = ₹ 2276.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Cash	2276.00	N.A.	N.A.	N.A.	N.A.	61240444170300000004	N.A.

Total = ₹ 2276.00

Utilization details of the Collected Amount :

Premium		GST	Stamp Duty	Excess Amount
248471.00		44724.00	0.00	2
Sl no.	Agency Code	Agency Name		Department Code
1	NIAAG00050031	RAMANA BABU K.		44

For The New India Assurance Company Limited
Revenue Stamp

Date of Issue: 01/03/2019

Cashier's Initial

Authorized Signatory

Note -

1. Please note the Policy Number, Collection Number and date in all future correspondence.
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 : 6124044400000004

IRDA Registration Number: 190

Validity unknown
Digitally signed by Srinivasan
Valid until 2033-03-01
Date: 2019.03.01
17:08:14 IST

Document generated by 30312 at 01/03/2019 17:08:13 Hours.

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