



**POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE**

**UIN NUMBER - IRDAN190P0077100001**

<b>Insured's Name</b>	: NILKAMAL LIMITED		
<b>Insured's Details</b>		<b>Issuing Office Details</b>	
<b>Customer ID</b>	: PO52052846	<b>Office Code</b>	: NEW INDIA ASSURANCE DO I (131000)
<b>Address</b>	: NILKAMAL HOUSE, 77778, RD NO 13/14, MIDC ANDHERI (EAST)  MUMBAI ,MAHARASHTRA, 400093	<b>Address</b>	: NEW INDIA CENTRE , 12TH FLR., 17-A COOPERAGE MUMBAI,400039
<b>Phone No</b>	:	<b>Phone No</b>	: 02222825241 / 02222825692
<b>E-mail/Fax</b>	: arun.shukla@nilkamal.com, /	<b>E-mail/Fax</b>	: nia.131000@newindia.co.in / 02222825474
<b>PAN No</b>	: AAACN2329N	<b>S.Tax Regn. No</b>	: AAACN4165CST178
<b>GSTIN/UIN</b>	: 27AAACN2329N2Z9 / NA	<b>GSTIN</b>	: 27AAACN4165C3ZP
		<b>SAC</b>	: 997139 (Other non-life insurance services excl RI)

<b>Policy Details</b>			
<b>Policy Number</b>	: 13100036220100000075	<b>Business Source Code</b>	
<b>Period of Insurance</b>	: From: 07/11/2022 03:32:02 PM To: 06/11/2023 11:59:59 PM	<b>Dev.Off level./Broker/Corp. Agent/Web Aggregator/CPSC User</b>	: Prudent Insurance Brokers Pvt. Ltd. - (2D10077353) Prudent_Do131000_Mh - (SI00145649),
<b>Date of Proposal</b>	: 07-Nov-22	<b>Agent/Bancassurance/S pecified Person</b>	:
<b>Prev. Policy no.</b>	:	<b>Phone No</b>	: NA / NA
<b>Client Type</b>	: Non-Corporate	<b>E-mail/Fax</b>	: navin.shanbhag@prudentbrokers.com, /

<b>Premium(₹)</b>	<b>GST(₹)</b>	<b>Total (₹)</b>	<b>Total (₹ in words)</b>	<b>Receipt No. &amp; Date</b>
90206	16238	106444	RUPEES ONE LAC SIX THOUSAND FOUR HUNDRED FORTY-FOUR ONLY	1310008122000000773 1 - 10/11/22

**Details of Employees with monthly wages upto ₹ 15000:**

Categories	Sub Categories	No of Employee	Cash Total Wages
Metal Workers	CONTRACTORS AND SUB CONTRACTORS	40	7200000

**Details of Employees with monthly wages above ₹ 15000:**

Categories	Sub Categories	No of Employee	Cash Total Wages
Metal Workers	CONTRACTORS AND SUB CONTRACTORS	10	3600000
Trade Description	Particular of Works	Location Details	Included All Sub - Contractors
	ALL OVER INDIA	ALL OVER INDIA	

**Contractor/Sub-Contractor Details:**

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

**Extensions under the Policy Cover**



<b>Name of the Extension</b>	<b>Sub Limit of the Extension</b>	<b>Deductibles of the Extension</b>
Medical Extension	₹50000	NA
<b>Special Conditions</b>	RISK LOCATION : ALL OVER INDIA	
	NA	
<b>Special Exclusions</b>	NA	
<b>Special Excess/Deductible</b>	NA	
<b>The Policy shall be subject to EMPLOYEES COMPENSATION INSURANCE Policy clauses attached herewith.</b>		
<b>Clauses</b>	<b>Description</b>	

**Premium and GST Details**

	<b>Rate of Tax</b>	<b>Amount in INR</b>
<b>Premium</b>		₹ 90206.00
<b>SGST</b>	9	8119
<b>CGST</b>	9	8119
<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 07th day of December, 2022.

For and on behalf of

The New India Assurance Company Limited

Date of Issue: 07/12/2022		
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Duly Constituted Attorney(s)

Stamp Duty under the Policy is ₹

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

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