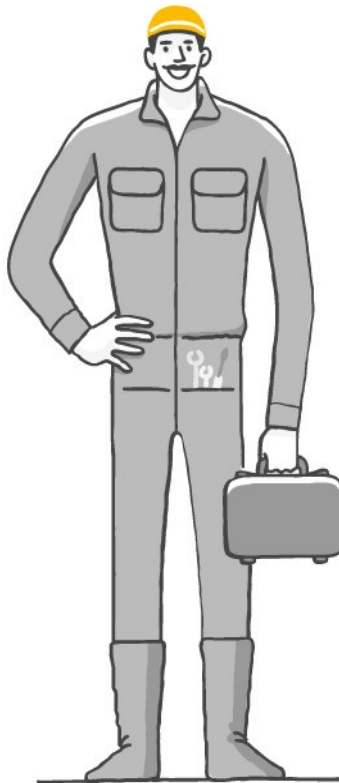




## Policy Schedule



### Digit Employees Compensation Insurance Policy

UIN: IRDAN158RP0020V01201920

Go Digit General Insurance Ltd

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## Insured & Policy Details

Insured Details		Policy Details			
Name	AMBAGINFO	Policy Number	D106710481		
Address	Shop No.26, Sumit Plaza, Market Yard., Market Yard, PUNE, Pune, Maharashtra, 41 411037	Receipt Number	RA111030504	Policy Issue Date	23-Jun-2023
GST State Code	27	Policy Period	From	23-Jun-2023	10:57:32
City / Location	Pune		To	22-Dec-2023	23:59:59
Contact No	+918668443627	Partner Code and Name	1000158 POLICYBAZAAR INSURANCE BROKERS PRIVATE LIMITED		
Email ID	contactambaginfo@gmail.com	Partner Contact and Email ID	crtmotor@policybazaar.com		
GSTIN Number	27ABDFA1935C2ZW	Address of Insured Premises / Location covered	Waluj MIDC, Aurangabad Aurangabad 431136 Chakan MIDC Pimpri Chinchwad 410501		
Policy Form	Table A				
Nature of Business / Occupation / Activity	Electric Cables, Makers and suppliers of incl. Cablelaying, installation and Erection work	Description	Skilled Workers		

## Coverage Details

Work Description	No. of Employees	Maximum Estimated Monthly wages	Classification No.	work category
Skilled Workers	3	25000.00	135	Electric Cables, Makers and suppliers of incl. Cablelaying, installation and Erection work
Total	3	25,000.00		

**Scope of Cover:**

- Coverage as per Employee's Compensation Act, 1923 and subsequent amendments thereof prior to the date of issue of this Policy
- Liability under the Fatal Accidents Act & Common Law

## Endorsement

	Opted/ Not-Opted	Limit	Aggregate Limit
Medical Expenses Cover	Not-Opted	NA	NA
Occupational Disease Cover	Not-Opted	NA	NA
Coverage for Contractors and/or SubContractors Workers/ Employees	Opted	The amount of liability incurred by the Insured as per Employee's Compensation Act, 1923 and subsequent amendments.	

## Special Terms and Conditions

- Any change in "location" or "nature of employment", if any during the policy period should be informed to the insurer mandatorily and the same shall be covered at the discretion of the Insurer. Where additional premium is required the same shall be charged.
- Occupational diseases shall only mean diseases listed in Part "C" of Schedule III to W.C. Amendment Bill 1989.
- Warranted that attendance and wage register is maintained at the place of employment by the Insured as per statutory requirements/compliance and to be submitted when required by insurer.
- Warranted that at any point in time the total No. of workers on the site Should not exceed No. of employees mentioned in the policy.
- Warranted that employees working at a height, especially exceeding 9 meters should be harnessed using adequate and well maintained fall arrest equipment with personal protective equipment, including harness, ropes, safety helmets, gloves, etc.
- Exclusion: Any work involving blasting, tunnelling, work on high tension live wires, off shore work, underground/ under water work, subaqueous work or any related services in connection therewith.

7. Exclusion: Workers predominantly engaged in wrecking or demolition and/or Standalone demolition only Projects and/or collection or removal of scrap metal and any related activities including Loading and unloading. However, demolition in conjunction with re-construction/construction/alteration will be covered.
8. Exclusion: Workers involved in maintenance of towers, steeples, bridges, Dams, chimney shafts and excavation > 3mts unless specifically agreed and mentioned on this schedule.
9. Exclusion: Any interest and/or penalty imposed on the insured on account of his /their failures to comply with the requirements laid down under the Employee's Compensation ACT, 1923.

11. Work Description-

12. **"Work Description warranty:**

- Nature of work in which employees are involved during policy period shall be clearly mentioned on work description.
- Nature of work shall have correlation with work description for which policy has been issued and rates shall be charged in accordance with the same.
- Work description shall not fall under any of the policy exclusions mentioned on policy schedule as well as wording. Notwithstanding any provision to the contrary within this insurance, the above-mentioned Work description (if any) will be read together with the terms & conditions of this policy and in no instance shall supersede the policy provisions and exclusions stated, unless specifically agreed and endorsed on the policy by the underwriter.
- "Work Description" field is meant to describe the nature of work that the covered employees are involved in. Any other information mentioned here will be null and void."

13. Endorsement No 177 :- The within policy does not indemnify the Insured in respect of any death due solely and directly to working in or being released from compressed air or disablement of any kind arising from caisson disease otherwise called compressed air sickness.

## Premium and Payment Details

Total Net Premium	1333.80	
CGST rate and amount		0.00
SGST/UTGST rate and Amount		
IGST rate and Amount	18%	240.08
Final Premium	1573.88	

## Endorsement Details

Invoice Number	Invoice Date	Net Premium	Igst	Cgst	Sgst	Utgst	Cess	Gross Premium
IA099545233	2023-06-23	1333.80	240.08	0.00	0.00	0.00	0.00	1573.88

### Important Notice

1. **\*Cheque dishonor / Non-receipt of payment:** If premium paid through Cheque, the policy is void ab-initio in case of dishonor of Cheque or non-receipt of payment.
2. This policy is subject to the standard policy wordings, warranties, exclusions and conditions as per Digit Employees compensation insurance Policy Wordings
3. The Coverage has been provided basis information provided by you/proposer to us and the policy is not valid, if any of the information provided is incorrect.
4. The Policy Wording attached herewith includes all the Standard Coverage offered by Go Digit General Insurance Ltd. to its Customers. For any clarification please call our Call Center Number [1800 258 5956](tel:18002585956).

For & On Behalf of Go Digit General Insurance



Praveen Bhat  
Senior Vice President - Customer Experience  
Authorized Signatory  
praveen.bhat@godigit.com  
DDMMYYY  
Printed, Signed, and Executed at Bengaluru  
Hey, our document is now digitally signed.  
Click [here](#) to view the certificate

Consolidated Stamp Duty has been paid as per Letter of Authorization No.67-B/04/2017-18  
Date: 30th May 2017 issued by Department of Stamps and Registration , Bengaluru- 560009 - KARNATAKA.

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Wish to go through your detailed policy, [click here](#).

In case of any claim, please contact 24-Hour Call Centre at [1800 103 4448](tel:18001034448) or email us at [hello@godigit.com](mailto:hello@godigit.com)

Go Digit General Insurance Ltd. Address: Atlantis, 95, 4th B Cross Road, Koramangala Industrial Layout, 5 Block, Bengaluru, Karnataka 560095, IRDAI Reg No. 158 CIN U66010PN2016PLC167410, GST Reg. No: 29AACCO4128Q1ZW, GSTIN Address: Go Digit General Insurance Ltd, Bengaluru Online Website Business, Atlantis 95 4th B Cross Road Koramangala Industrial Layout 5th Block, Bengaluru, Karnataka, PIN-560095. Website: [www.godigit.com](http://www.godigit.com)