

Servicing Office Address

Haldwani Division,5/222, Canal Road, Tikonia, Haldwani,Distt. Nainital,(U.K.),
Pin : 263139
GSTIN No: 05AAACN9967E1Z9

**RECEIPT****Customer Details**

Name : NITYANAND BALA
Address : BAIKUNTHAPUR SHAKTIFARM HOUSE NO 6
BAIKUNTHAPUR SHAKTIFARM
Pin Code : 263151

Collection Details

Agent Code : 9000183644
Collection Number : 46180081238000002907
Collection Date : 27/07/2023
Bank Account : 9174

Received with thanks from Sri/Smt NITYANAND BALA
a sum of ₹ 708 (RUPEES SEVEN HUNDRED EIGHT ONLY) by CD
towards Individual Personal Accident Policy as per details given hereunder

Sl No.	Policy Number	TR Code	End/Ren/Dec/Clm Year	End/Ren/Dec/Clm Number	A/C Particulars	A/C Head (General Ledger)	Credit Amount ₹	Debit Amount ₹	Amount Received ₹
1	46180042238160000004	11			C.D CONTROL A/C	5076	0.00	708.00	-708.00
2	46180042238160000004	11			CASH PREMIUM A/C	5083	600.00	0.00	600.00
3	46180042238160000004	11			CGST_UK_Int_Liab	7394	54.00	0.00	54.00
4	46180042238160000004	11			SGST_UK_Int_Liab	7395	54.00	0.00	54.00
TOTAL :							708.00	708.00	0.00

Particulars : CD

- 1.Please quote collection no. and date in all correspondences
- 2.The stamp has been defaced and retained at the office against the issued policy.
- 3.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.

For National Insurance Company Ltd.,


धृतिमान बार्दहन / DHRITIMAN BARDHAN
मुख्य प्रबन्धक/Chief Manager
नेशनल इन्श्योरेंस कंपनी लि.,
National Insurance Co. Ltd.
Authorised Signatory

Issuing Office Name & Address

HALDWANI DIVISION ,5/222, CANAL ROAD, TIKONIA, HALDWANI, DISTT. NAINITAL, (U.K.), PIN : 263139
 Tel: Fax: 05946 220539, 220262
 GSTIN No: 05AAACN9967E1Z9



National Insurance Company Ltd.

Registered & Head Office: 3, MIDDLETON STREET, POST BOX NO. 9229, KOLKATA - 700 071
POLICY SCHEDULE

Policy No: **4618004223816000004** **INDIVIDUAL PERSONAL ACCIDENT POLICY** from 13:16 Hrs of 27/07/2023 to Midnight of 26/07/2024

Insured Details

Name : **NITYANAND BALA**
 Address : BAIKUNTHAPUR SHAKTIFARM HOUSE NO 6 BAIKUNTHAPUR SHAKTIFARM
 Pincode : 263151 Telephone : 7055182838 Email : we@sageassociates.in
 PAN No. : xxxxxx926R GSTIN No. : 05ACLPP5744K1Z5
 Channel : ASHISH RAWAT Mobile : 9756066300 Email : ashraw2@gmail.com
 Aadhar : PAN : xxxxxx250C Code. : 461800 / 9000183644

Member Details

Sr.	Name Relation/Dependence	D.O.B Age	Occupation Risk Group	Table 1 SI	Table 1A SI	Table 2 SI	Table 3 SI
1	NITYANAND BALA SELF / NO	02/06/1992 31	Self Employed Professionals Medium	1000000.00			

Medical Expense Taken:NO (Not Applicable for Table 1)

Premium Details

Basic Premium	Med Exp.	Family Discount	Net Premium	GST	Net Payable
600	0		600	108	708

Collection Number :46180081238000002907 dated 27/07/2023

Nominee Name : MRS POOJA BALA Relation : WIFE Age : 22 Years

WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/her hand at the office address mentioned above, this **27/07/2023**. This schedule, the attached policy, the clauses, the endorsements and policy wordings as available in the website <https://nationalinsurance.nic.co.in> shall be read together as one contract and any word or expression to which the specific meaning has been attached in any part of this policy or of the schedule shall bear the same meaning wherever it may appear. It is warranted that **IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'**.

NOTE : Warranted that in case of dishonour of the premium cheque, this document stands automatically cancelled 'AB-INITIO'.

Policy stamp to be defaced at the respective policy servicing office.



Christman Barchan
 CHRISTMAN BARCHAN
 Chief Manager
 नेशनल इन्श्योरेंस कंपनी लिमिटेड
 National Insurance Co. Ltd.
 Authorised Signatory
 For & On behalf of
National Insurance Company Limited



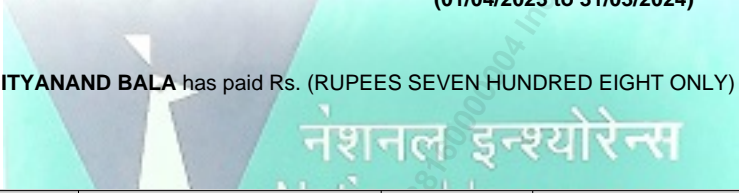
Issuing Office Name & Address

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**National Insurance Company Ltd.**

**Certificate For Premium Paid
(01/04/2023 to 31/03/2024)**

This is to certify that **NITYANAND BALA** has paid Rs. (RUPEES SEVEN HUNDRED EIGHT ONLY) towards premium vide online payment against policy detailed below:



Policy No.	Policy Type	Received On	Sum Insured (Rs.)	Health Premium (Rs.)	GST including Cess (Rs.)	Financial Year
46180042238160000004	Personal Accident	27/07/2023				2023-24

NOTE :

Receipts issued subject to realization of cheques.

This certificate is issued for the purpose of claiming deductions, rebates as per the provisions of Income Tax Act, 1961.

Payment received vide receipt no. 46180081238000002907 dated 27/07/2023

For National Insurance Company


धृतिमान बर्चन / DHRITIMAN BARCHAN
मुख्य प्रबन्धक / Chief Manager
नेशनल इन्श्योरेंस कंपनी लि.,
National Insurance Co. Ltd.

Duly Constituted Authority

Note: This certificate must be surrendered to the Insurance company for issuance of fresh certificate in case of cancellation of the policy or any alteration in the Insurance affecting the premium.