

EMPLOYEES COMPENSATION POLICY SCHEDULE

Policy No. : 182000/48/2024/1631 **Prev. Policy No.** : 182000/48/2023/1542
Cover Note No. : - **Cover Note Date** : -
Insured's Code : 81998160 **Issue Office code** : 182000
Insured's Name : MAHACHEM SYSTEMS PRIVATE LTD & MINARVA ENTERPRISES (GSTIN: 0) **Issue Office Name** : BO OSMANPURA CIRCLE AURANGABAD (GSTIN: 27AAACT0627R4ZW)
Address : RM-306/6.MINARVA BAJAJ NAGAR MIDC WALUJ AURANGABAD AURANGABAD MAHARASHTRA 431001 **Address** : OFFICE NO. 3 & 4, 1st FLOOR, SAI SQUARE, OSMANPURA CIRCLE, AURANGABAD 431001 AURANGABAD MAHARASHTRA 431601
Tel./Fax/Email : / / 9325261252 / NA **Tel./Fax/Email** : 0240 - 2332019, 2323364 / / 182000@orientalinsurance.co.in

Agent/Broker Details

Dev.Off.Code : NA0000001159 DO-1 AURANGABAD, DIRECT
Agent/Broker : BA0000018673 ANNASAHEB BAPURAO KHUTADE
Address : 1122,SAINAGAR,N-6,CIDCO,AURANGABAD,AURANGABAD,MAHARASHTRA,431001
Tel/Fax/Email : 9890960864/9890960864//annasahebkhutade@gmail.com

Period of Insurance : FROM 00:00 ON 12/10/2023 TO MIDNIGHT OF 11/10/2024

Collection No. & Dt. : CC 8714002212 - 09/10/2023 **GST INVOICE NO** :272216530 **UIN** :0

Gross Premium : 8,775 **GST** 1580 **Stamp Duty** : 9 **Total** : 10,355

Co-insurance Details : NIL

Laws

Laws : Indemnity against legal liability under the Fatal Accidents Act,1855 and Common Law.

Risk Information

Place : AURANGABAD

Date : 09/10/2023



IRDA-REGNO-556

For and on behalf of
The Oriental Insurance Company Limited

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee

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Details of Employees with Monthly Wages Below Rs.15000/-

Sr. No.	Est. No. of Emps	Contract Emps	Occupation	Estimated totalsalary /wages/other earnings	Value of food/qtrrs/ other considerations	Estimated Total earnings	Table	Place of Employment
1	15		Caretakers Durwans, Chowkidars and Gatekeepers (except in classifications for which an all-round rate is to be applied under regulation II)	100,000		100,000	B	PLOT NO 8.GAT NO 30.BEHIND LUCIT MIDC WALUJ JOGESHWARI AURANGABAD & AURANGABAD DIST.

Contract Details

Principal Name :
Site of work : ALL OVER IN INDIA
Trade description : AERATED WATER MANUFACTURERS
Address : RM-306.MINARVA BAJAJ NAGAR MIDC WALUJ AURANGABAD
State : MAHARASHTRA
City : AURANGABAD
Pincode : 431133

The Insurance under this policy is extended to cover risks of (as per forms attached).
Liability to contractors Employees, Total Annual Wages of all Employees *120 times.

Total Premium in words : Indian Rupees Ten Thousand Three Hundred Fifty-Five Only

The Insurance under this policy is subject to Warranties & Clauses(as per forms attached).

"It is hereby agreed that this policy doesnot cover medical expenses" as required under the provision 2A of the Workmen Compensation Act, 1923(as amended) and described above.

Subject to adjustment in the terms of Condition 6.The estimated amount of wages/salaries & other earnings on which premium is based.

Subject to Endorsement 35

Not applicable

Place : AURANGABAD

Date : 09/10/2023



IRDA-REGNO-556

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Authorised Signatory

Attached to and forming part of policy number 182000/48/2024/1631

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

In witness whereof the undersigned being authorised by and on behalf of the Company has/have herein to set his/their hands at BO OSMANPURA CIRCLE AURANGABAD (GSTIN: 27AAACT0627R4ZW) on 09TH DAY OF OCTOBER 2023.

Entered By : MR RAJENDRA GAIKWAD

For and on behalf of
The Oriental Insurance Company Limited

Examined By : SUNIL BHANDARE

Policy Printed By : OICL

IP :

Authorised Signatory

Policy Printed On : 09-OCT-23 14:12:27

MAC :

Place : AURANGABAD



IRDA-REGNO-556

Date : 09/10/2023

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