



NIL ENDORSEMENT DOCUMENT

Personal Accident

Insured Name	: EU TECH SYSTEMS	Insurer Office Code	: THE NEW INDIA ASSURANCE CO. LTD.BR.150201 (150201)
Address	: KHIRA INDUSTRIAL CO OP SOCIETY UNIT NO 14 71/AB/9+10 OFF TELCO ROAD GENERAL BLOCK MIDC BHOSARI PUNE ,MAHARASHTRA, 411038	Address	: 1171/A, REVENUE COLONY, BSNL BLDG., GROUND FLOOR NR SUB POST OFFICE, SHIVAJINAGAR, PUNE.,411005
Telephone	: //	Telephone	: 02025511185 / 02025511186
Fax	:	Fax	: 02025511187
Email	: ebenrollment@firstpolicy.com	Email	: nia.150201@newindia.co.in
Insured Pan Number	: AAAFE3557C		
GSTIN	: 27AAAFE3557C1ZS	GSTIN	: 27AAACN4165C3ZP
UIN	: NA	SAC	: 997133 (Accident and health insurance services)

Endorsement attached to forming part of Policy Number	:	15020142230100000572	
Department	: Personal Accident	Cover	: Standard CoverPolicy
Period of Insurance	: From 24/01/2024 12:00:01 AM To 23/01/2025 11:59:59 PM	Endorsement No	: 15020142230182000011
		Effective Date	: 24 January 2024
Date Signed	: 15/01/2024	Sum Insured₹	: 3,000,000.00
Additional Premium ₹	: N/A	Additional S.T/GST. ₹	: N/A
Refund Premium ₹	: N/A	Refund S.T/GST ₹	: N/A
Policy Duration	:		

Number of Member Risk Added	: 0
Number of Member Risk Deleted	: 0

It is hereby understood and agreed that the endorsement on policy 15020142230100000572 will be in effect from 24 January 2024.

Reason	Notwithstanding anything herein contained to the contrary it is hereby agreed and declared that below mentioned covers are granted in the said policy since inception, 1-Accidental Death 100 % of Sum Insured 2-Permanent Total Disability 100 % of Sum Insured 3-Temporary Total Disability(weekly benefit) Per week 1% SI of SI or ₹10,000/- or actual weekly salary whichever is lower, max for 104 weeks 4-Ambulance Charges for transportation of Insured person to Hospital Yes upto ₹2,000/- 5-Children Education Welfare Fund for dependent children incase of Death of Employee OR PTD 10% Of Si Or ₹25,000/- Per Child ; Whichever Is Lower Subject To Max For 2 Children 6-Transportation Expenses in case of death 2% of Si or ₹5,000/- whichever is lower 7-Medical Extension 10% of the SI or 40% of the Admissible Claim or Actual expenses whichever is less 8-Scope of Cover 24 Hrs Worldwide 9-Terrorism Cover
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Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹0
SGST	0	0
CGST	0	0
IGST	0	0

Policy No. : 15020142230100000572 Document generated by 40587 at 15/01/2024 16:19:21 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism; you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



TOTAL PREMIUM : 0
TOTAL PREMIUM (In words) : ZERO RUPEES ONLY

IN WITNESS WHEREOF THIS POLICY has been signed at _____ this 15-Jan-24.

Place :BSNL BLDG., GROUND FLOOR,
NR SUB POST OFFICE, SHIVAJINAGAR, PUNE.,411005
Date :15-Jan-24

For and on behalf of
The New India Assurance Company Limited

Authorized Signatory

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.

Tax Invoice No :

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C