

पॉलिसी अनुसूची/ Policy Schedule - Employees Compensation Insurance	
Policy Number: 501700412210000078	व्यवसाय स्रोत /Business Source: 501700
जारीकर्ता कार्यालय/Issuing Office कार्यालय कोड /Office Code: 501700 कार्यालय पता /Office Address: CHENNAI DIVISION VII H M Centre, 35/18, North Usman Road, T Nagar, Chennai - 600017. State Code: 33, Tamil Nadu GSTIN: 33AAACN9967E1ZA Contact Number: Mobile Number:	विक्रय चैनल वविरण/Sales Channel Code: 9000010645 नाम /Name: Mrs Bhuvana Krishnan Contact Number: 9444357819 सह दलाल कोड / Co Broker Code:
	कस्टमर केयर टॉल फ्री नंबर/Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in

ग्राहक का नाम /Customer Name: DYNAMIC TECHNICAL SERVICES	ग्राहक आईडी /Customer ID: 9701932216	पैन /PAN:
पता/ Address: S NO. 188/3 PT NO. KOLLA COLONY ROAD, MANGADU, City: CHENNAI, District: CHENNAI, State: TAMIL NADU, PIN: 600122. Cell: 9047708067	फोन /Phone:	
	ई-मेल /E-Mail: DTSERV20@GMAIL.COM	

पॉलिसी: 21/02/2023 के 20:02 से 20/08/2023 की मध्य रात्रतिक प्रभावी /Policy Effective from 20:02 hours, on 21/02/2023 to midnight of 20/08/2023			
प्रीमियम/ Premium	₹ 5,663.00	कवर नोट संख्या और तथि/ Cover Note Number and Date	लागू नहीं/NA
CGST	₹ 510.00	प्रस्ताव संख्या और तथि/ Proposal Number and Date	8800230221132199 Dt. 21/02/2023
SGST/UTGST	₹ 510.00		
IGST	₹ 0.00		
कम:जीएसटी_टीडीएस / Less:GST_TDS	₹ 0.00		
पुनर्प्राप्ति योग्य स्टाम्प ड्यूटी /Recoverable Stamp Duty	₹ 0.00	रसीद संख्या और तथि/Receipt Number and Date	501700812210007808 Dt. 21/02/2023
कुल /Total Amount	₹ 6,683.00	पछिली पॉलिसी संख्या और समाप्ती तथि/ Previous Policy Number and Expiry Date	लागू नहीं/NA
(Rupees Six Thousand Six Hundred Eighty Three Only.)			

Joint Policyholder Name: NA
Joint Policyholder Address: NA

Laws: The Policy covers Liability of the **Insured** under the following Law(s) shown as covered, subject to claim being otherwise admissible as per terms, conditions and exclusions of the Policy and subject to **Limit of Indemnity** as stipulated against each Law.

SL.No	Law	Limit of Indemnity	Coverage
1	Employee Compensation Act, 1923 and Subsequent amendments thereof prior to the date of issue of this Policy	Subject otherwise, to the terms, conditions &Exclusions of the Policy, the amount of liability incurred by the Insured.	Yes

SL.No	Industry Type	Description of Work Done by Employees	Number of Employees	Declared Wages/ Contract Value	Place of Employment	Contractors Name, Contractors Address
1	Industry Type:Electrical Engineers (not Manufacturers.) Sub Industry Type:work on other bldgs.	ENGINEERING SHOP MAINTANCE WORK	10	Declared Wages:900000 Contract Value:0	ANYWHERE IN INDIA	Contractors Name:NA Contractors Address:NA

Clauses, Endorsements and Warranties Applicable:
Average Clause

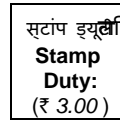
If the monthly wages are lesser than 15000/-, the "Compensation calculation will be based on the actual lesser monthly wages entered and not Rs 15000/-"

पॉलिसी अनुसूची/ Policy Schedule - Employees Compensation Insurance	
Policy Number: 501700412210000078	व्यवसाय स्रोत /Business Source: 501700
जारीकर्ता कार्यालय/Issuing Office कार्यालय कोड /Office Code: 501700 कार्यालय पता /Office Address: CHENNAI DIVISION VII H M Centre, 35/18, North Usman Road, T Nagar, Chennai - 600017. State Code: 33, Tamil Nadu GSTIN: 33AAACN9967E1ZA Contact Number: Mobile Number:	विक्रय चैनल वविरण/Sales Channel Code: 9000010645 नाम /Name: Mrs Bhuvana Krishnan Contact Number: 9444357819 सह दलाल कोड / Co Broker Code:
	कस्टमर केयर टॉल फ्री नंबर/Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in

टिप्पणियां/ Remarks: LOCATION : ANYWHERE IN INDIA
PERIOD OF INSURANCE : 21/02/2023 TO 20/08/2023
UNNAMED EMPLOYEES : 10 NOS.

जसिकी गवाही में दनि/ माह /वर्ष को उपरोक्त उल्लेखित कार्यालय पते पर अधोहस्ताक्षरी को वधिवित अधिकृत कयिा जा रहा है उसके हाथ नरिधारति कएि जाएं। यह अनुसूची, संलग्न पॉलिसी, खण्ड, पृष्ठांकन और पॉलिसी शब्दों, जो कंपनी वेबसाईट <https://nationalinsurance.nic.co.in> पर उपलब्ध है, को एक अनुबंध के रुप में एक साथ पढा जाए तथा कोई भी शब्द या अभवियक्तजसिके लएि यह वशिष्टि अर्थ पॉलिसी या अनुसूची के कसिी भी हसिसे में संलग्न कयिा गया हो, एक ही अर्थ वहन करेगा चाहे जहाँ भी उल्लेखति हो। यह आश्वासन दयिा जाता है क्पिरीमयिम चेक के अस्वीकृति के मामले में, यह दस्तावेज स्वतः प्राथमकतिता नरिस्त हो जाएगी। **/IN WITNESS WHEREOF, the undersigned being duly authorized hereunto set his/ her hand at the office address mentioned above, this 21/February/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'**

इंश्योरेन्सइंडियलमिडिड



कृते नेशनल इन्श्योरेन्स कंपनी
स्टांप इयूएलमिडिड/ For and on behalf of National Insurance
Company Limited

अधिकृत हस्ताक्षरकर्ता/ Authorized
Signatory

TAX INVOICE

Invoice Serial No: 30587W2P00000078

Invoice Date: 21/02/2023

Details of Supplier:

National Insurance Company Limited.,
CHENNAI DIVISION VII H M Centre, 35/18, North Usman Road, T Nagar, Chennai - 600017
State : 33, Tamil Nadu
GSTIN No : 33AAACN9967E1ZA

Details Of Receiver : DYNAMIC TECHNICAL SERVICES

Address : S NO. 188/3 PT NO. KOLLAJ COLONY ROAD, MANGADU
City : CHENNAI,
District: CHENNAI,
State: TAMIL NADU,
PIN: 600122.

Place Of Supply State : Tamil Nadu
State Code : 33
GSTIN No : 33DQBPK9437H1ZQ

सैक कोड/ SAC Code	सेवा का विवरण/ Description of Service	कुल/Total(₹)	छूट/ Discount	टैक्स योग्य/ मूल्य/Taxable Value(₹)	सीजीएसटी की राशि/ CGST		एसजीएसटी/यूटीजीएसटी/ SGST/UTGST		आईजीएसटी/IGST		केरला बाढ़ उपकर/Kerala Flood Cess
					दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	दर/Rate	राशि/ Amount(₹)	राशि/Amount(₹)
997139	Other non- life insurance services (excluding reinsurance services)	5,663	0%	5,663	9%	510	9%	510	0%	0	0
TOTAL		5,663		5,663		510		510		0	0

कुल इनवॉयस मूल्य (अंकों में) Total Invoice Value (In figures) :
₹ 6,683

कुल इनवॉयस मूल्य (शब्दों में) Total Invoice Value (In words) : रूपए/Rupees
Six Thousand Six Hundred Eighty Three
केवल/Only.

रिवर्स चार्ज के अधीन टैक्स की राशि Amount of Tax Subject to Reverse Charge : No

E.&O.E

कृते नेशनल इन्श्योरेंस कंपनी लिमिटेड/ For
and on behalf of National Insurance Company Limited

अधिकृत हस्ताक्षरकर्ता/ Authorized Signatory

