पंजीकृत एवं मुख्य कार्यालय: ए-25/27, आसफ अली रोड, नई दिल्ली - 110 002 वेबसाईट http://www.orientalinsurance.org.in देखें

कृपया अपनी पत्राचार पॉलिसी जारी कर्ता कार्यालय से करें।



# THE ORIENTAL INSURANCE COMPANY LIMITED

Regd. & Head Office: A-25/27, Asaf Ali Road, New Delhi-110 002. Visit us at http://www.orientalins.unis Document is Digitally Signed Address all communication to Policy Issuing Office

OHANRAJ PRINTERS : 500 Nos x 1 pk Signer: RASHMI RAN Date: Tue, Feb 15, 20 Location: NOISA Reason: Signi for OICL

### GPA - NAMED POLICY SCHEDULE IRDA/NL-HLT/OIC/P-P/V.1/457/13-14

Policy No.

: 161200/48/2022/4418

Prev.Policy No. : 161200/48/2021/11771

Cover Note No.

Cover Note Date

Insured's Code

: 71432334

Issue Office code : 161200

Insured's Name

Address

KALPAK INSTRUMENTS AND

Issue Office Name: DO 2 PUNE (GSTIN:

CONTROLS (GSTIN: 0)

27AAACT0627R4ZW)

: S NO 25/3, HINGNE KHURD, NEAR

INSUSTRIAL ESTATE, VITTHALAWADI, PUNE 411051 Address

: GANATARA CHAMBERS

SADASHIV PETH LAXMI ROAD

Tel. /Fax /Email

PUNE MAHARASHTRA 411030

: PUNE MAHARASHTRA 411030

Tel. /Fax /Email

(020) 24451566 / /

83

161200@orientalinsurance.co.in

Agent/Broker Details

Dev.Off.Code

: NZ000000295 AGENCY MANAGER DO-2 PUNE

Agent/Broker

: BA0000014702 SHAILAJA D RAILKAR

Address

: SADGURU NIWAS HINGANE KHURD PUNE 51, PUNE, MAHARASHTRA, 411051

Tel/Fax/Email

: 9822892427//shailaja.railkar@gmail.com

Period of Insurance

: FROM 14:00 ON 15/02/2022 TO MIDNIGHT OF 14/02/2023

Collection No & Dt

· CHQ 3157006284 - 15/02/2022

GST INVOICE NO: 2720705944

UIN:0

**Gross Premium** 

: 3,162

: 570 GST

Stamp Duty

Total : 3,732

Co-insurance Details: NIL

Number of persons covered

: 6

Total Sum Insured

: 2108000

**AOA Limit** 

1340000

### **Details of Insured Persons:**

Emp No./ ID No.	Name	Age	Sex	Section/Cover	Sum Insured	Additional Covers
1, 7-	ANIL S SHENDKAR	49	M	Table of benefits III Table of benefits I Table of benefits IA Table of benefits II	4,20,000	Medical Expenses Loading NIL
2	SUDHIR G ADMANE	62	М	Table of benefits III Table of benefits I	4,20,000 3,30,000	Medical Expenses Loading NIL
	ID No.	1 ANIL S SHENDKAR	1 ANIL S SHENDKAR 49	1 ANIL S SHENDKAR 49 M	1 ANIL S SHENDKAR 49 M Table of benefits III Table of benefits I Table of benefits IA Table of benefits II  2 SUDHIR G ADMANE 62 M Table of benefits III	1 ANIL S SHENDKAR 49 M Table of benefits III 4,20,000 Table of benefits I Table of benefits II Table of benefits II  4,20,000  2 SUDHIR G ADMANE 62 M Table of benefits III 3,30,000

Place:

PUNE

Date:

15/02/2022

For and on behalf of The Oriental Insurance Company Limited

प्रमाणित किया जाता है की रु. 100000/- का This is an electronically generated document (Policy Schedule). The

Policy document duly stamped will be sent by postil

In case of any query regarding the Policy plea Free No. 1800 11 8485 and 011 33208485 345 640 77 - 2/15-41/2021 12/14/5 11/02/2021

Authorised Signatory

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

Page 1 of 4

# दि ओरिएण्टल इंश्योरेन्स कम्पनी लिमिटेड

पंजीकृत एवं मुख्य कार्यालय : ए-25/27, आसफ अली रोड, नई दिल्ली - 110 002 वेबसाईट http://www.orientalinsurance.org.in देखें

कृपया अपनी पत्राचार पॉलिसी जारी कर्ता कार्यालय से करें।

Attached to and forming part of policy number 161200/48/2022/4418



## THE ORIENTAL INSURANCE COMPANY LIMITED

Regd. & Head Office: A-25/27, Asaf Ali Road, New Delhi-110 002. Visit us at http://www.orientalins.unanceunent.is Digitally Signed

Address all communication to Policy Issuing Office

DHANRAJ PRINTERS: 500 Nos x 1 pkts Signer: RASHMI RAN Date: Tue, Feb 15, 20 Location: NOISA for OICL Reason: Signir

2				Table of benefits II		
					3,30,000	
3	3	SOPAN U SATAV	55 M	Table of benefits III	4,14,000	
				Table of benefits I		Loading NIL
				Table of benefits IA		
				Table of benefits II		
				-	4,14,000	
4	4	BALKRISHNA	56 M	Table of benefits III	3,60,000	Medical Expenses
		THAKAR		Table of benefits I		Loading NIL
				Table of benefits IA		
				Table of benefits II		
					3,60,000	
5	5	PRANJAL DILIP	37 M	Table of benefits III	3,84,000	Medical Expenses
		KULKARNI		Table of benefits I		Loading NIL
				Table of benefits IA		
				Table of benefits II		
				_	3,84,000	
0	6	RUPESH MADHUKAR	22 M	Table of benefits III	2,00,000	NIL
		AGALE			2,00,000	



Place:

PUNE

Date:

15/02/2022





For and on behalf of The Oriental Insurance Company Limited

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**Authorised Signatory** 

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

Page 2 of 4

पंजीकृत एवं मुख्य कार्यालय : ए-25/27, आसफ अली रोड, नई दिल्ली - 110 002 वेबसाईट http://www.orientalinsurance.org.in देखें कृपया अपनी पत्राचार पॉलिसी जारी कर्ता कार्यालय से करें ]



# THE ORIENTAL INSURANCE COMPANY LIMITED

Regd. & Head Office: A-25/27, Asaf Ali Road, New Delhi-110 002.

Visit us at http://www.orientalins@risrDosument.is Digitally Signed

Address all communication to Policy Issuing Office

Signer: RASHMI RAMAN NINGH
Date: Tue, Fey 15, 2022/15:05:11 IST
Location: NOISA
Reason: Signing Policy for OICL

Share
%

## Attached to and forming part of policy number 161200/48/2022/4418

#### Additional Details of Insured Persons

Sr.No.	Name	Occupation	Pre-existing Disabilities	Risk Group	Assignee Name	Share %	
					\$		

Total Sum Insured in words: Indian Rupees Twenty-One Lakhs Eight Thousand Only

Total Premium in words : Indian Rupees Three Thousand Seven Hundred Thirty-Two Only

Term of Insurance: As per the Clauses written hereunder and/or attached herewith

In case of any single accident, the liability under this policy shall be restricted to the AOA Limit specified in the Schedule.

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of promises exceeding Rs.

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac,the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operaing offices as well as Company's website.

Excess: NIL

The insurance under this policy is subject to conditions, clauses, warranties, endorsements as per forms attached.

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 DO 2 PUNE (GSTIN: 27AAACT0627R4ZW) on 15TH DAY OF FEBRUARY 2022

Entered By

R.S.SAWANT

Examined By

NEYYHAA KULKARNI

Policy Printed By: 703095

Policy Printed On: 15-FEB-22 15:03:36

For and on behalf of The Oriental Insurance Company Limited

IP .

MAC

Authorised Signatory

Place:

PUNE

Date :

15/02/2022





For and on behalf of The Oriental Insurance Company Limited

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Authorised Signatory

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

Page 3 of 4

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Signer: RASHMI RAM Date: Tue, Feb 15, 20 Location: NOISA Reason: Signing Polis for OICL

### Attached to and forming part of policy number 161200/48/2022/4418

#### Relationship

1	ANIL S SHENDKAR	SERVICE	NIL		NORMAL RISK	MRS SHAKUNTALA SHENDKAR	100	Spouse	
2	SUDHIR G ADMANE	SERVICE	NIL		NORMAL RISK	MRS ANURADHA ADMANE	100	Spouse	
3	SOPAN U SATAV	SERVICE	NIL		NORMAL RISK	MRS ASHA SATAV	100	Spouse	
4	BALKRISHNA THAKAR	SERVICE	NIL		NORMAL RISK	MRS SHUBHANGI THAKAR	100	Spouse	
5	PRANJAL DILIP KULKARNI	SERVICE	NIL		NORMAL RISK	MRS. MADHURI P KULKARNI	100	Spouse	
6	RUPESH MADHUKAR AGALE	SERVICE	MIL		NORMAL RISK				
						T.			
				A STATE OF THE STA	ERUITA -				



Place: PUNE

Date:

15/02/2022



For and on behalf of The Oriental Insurance Company Limited

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