



POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE

UIN NUMBER - IRDAN190P0077100001

Insured's Name	: N K ENTERPRISES .		
Insured's Details		Issuing Office Details	
Customer ID	: PO92839439	Office Code	: AURANGABAD DO-160400 (160400)
Address	: PLOT NO 197/2 GANDHI NAGAR WALUJ MIDC AURANGABAD MS AURANGABAD AURANGABAD(MA) ,MAHARASHTRA, 431003	Address	: AJAY ENGINEERING COMPOUND, ADALAT ROAD, AURANGABAD ,431005
Phone No	: XXXXXX7581	Phone No	: 02402333572 / 02402333361
E-mail/Fax	: nkenterprises77@yahoo.com, /	E-mail/Fax	: nia.160400@newindia.co.in / 02402331226
PAN No	: HFVVPK1212P	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: 27HFVVPK1212P1ZS / NA	GSTIN	: 27AAACN4165C3ZP
		SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details			
Policy Number	: 16040036220100000089	Business Source Code	
Period of Insurance	: From: 18/08/2022 09:19:51 AM To: 17/08/2023 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/Web Aggregator/CPSC User	: DIRECT BUSINESS - (2D10753297)
Date of Proposal	: 18-Aug-22	Agent/Bancassurance/S pecified Person	: Mr. WALMIK SAHEBRAO PAWAR (NIA2D10749379) AGENT_SITE_42791 (2D10768575)
Prev. Policy no.	:	Phone No	: 02435247668, 9860382402 / NA
Client Type	: Non-Corporate	E-mail/Fax	: / /

Premium(₹)	GST(₹)	Total (₹)	Total (₹ in words)	Receipt No. & Date
10988	1978	12966	RUPEES TWELVE THOUSAND NINE HUNDRED SIXTY-SIX ONLY	16040081220000005118 - 18/08/22

Details of Employees with monthly wages upto ₹ 15000:

Categories	Sub Categories	No of Employee	Cash Total Wages
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Details of Employees with monthly wages above ₹ 15000:

Categories	Sub Categories	No of Employee	Cash Total Wages
Engineers not otherwise classified	Incl. work away from shop or yard upto 9 mtrs height	4	720000
Trade Description	Particular of Works	Location Details	Included All Sub - Contractors



FABRICATION MFG CIVIL WORK FAB MAINTAINANCE PAINTING WORKS	UPTO 9 MTRS	ENDURANCE TECHNOLOGIES LTD L- 6/3 LPDC L-6/3 K- 120 L- 20, E-71 E-92 E-93 K- 226/2 K- 226/1 K-228 MIDC WALUJ A BAD ALL M-87/1 ENDURANCE GROUP ALL MAHARASHTRA AS PER WORK ORDAR	
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Contractor/Sub-Contractor Details:

Serial No	Name of Contractor	Description	Categorie	No. of Workers			Amount Wages
				Skilled	Unskilled	Others	

Extensions under the Policy Cover

Name of the Extension	Sub Limit of the Extension	Deductibles of the Extension
Medical Extension	₹100000	NA
Special Conditions	NA	

Special Exclusions	NA
Special Excess/Deductible	NA

The Policy shall be subject to **EMPLOYEES COMPENSATION INSURANCE** Policy clauses attached herewith.

Clauses	Description
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Premium and GST Details

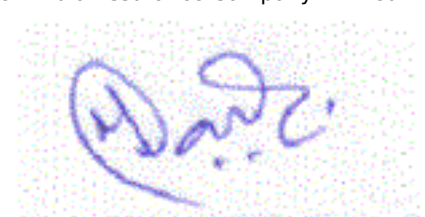
	Rate of Tax	Amount in INR
Premium		₹ 10988.00
SGST	9	989
CGST	9	989
IGST	0	0

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 18th day of August,2022.

For and on behalf of

The New India Assurance Company Limited

Date of Issue: 18/08/2022	
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(MRS. MADHURI DHONDGE)
[DIVISIONAL MANAGER]
Duly Constituted Attorney(s)

Stamp Duty under the Policy is ₹

Mudrank _____ Dt. _____ consolidated Stamp Fees Paid by Pay Order Number _____ vide receipt number _____ dt. _____.



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 : 16040022P0007311

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C
