



POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE

UIN NUMBER - IRDAN190P0077100001

Insured's Name	: SSS CONSTRUCTION		
	Insured's Details		Issuing Office Details
Customer ID	: PO72737961	Office Code	: AURANGABAD DO-160400 (160400)
Address	: AT.DOMEGAON , PO.YESGAON TQ.GANGAPUR , DIST.AURANGABAD AURANGABAD ,MAHARASHTRA, 431001	Address	: AJAY ENGINEERING COMPOUND ADALAT ROAD, AURANGABAD .431005
Phone No	: XXXXXX4593	Phone No	: 02402333572 / 02402333361
E-mail/Fax	: kayumshaha5887@gmail.com, /	E-mail/Fax	: nia.160400@newindia.co.in / 02402331226
PAN No	:	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: NA / NA	GSTIN	: 27AAACN4165C3ZP
		SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details			
Policy Number	: 16040036220100000069 ✓	Business Source Code	
Period of Insurance	: From 27/07/2022 12:00:01 AM To 26/01/2023 11:59:59 PM ✓	Dev.Off level./Broker/Corp. Agent/Web Aggregator/CPSC User	: MR. N.K. CHAETHMAL DEV OFFICER (2D10753293)
Date of Proposal	: 27-Jul-22	Agent/Bancassurance/S pecified Person	: Mr. SUMEET LAXMIKANT JEJURKAR (NIAAG00070523) SUMEET LAXMIKANT JEJURKAR (SI00118316)
Prev. Policy no.	:	Phone No	: 7350880826 / NA
Client Type	: Non-Corporate	E-mail/Fax	: sumitjejurkar1234@gmail.com, / /

Premium(₹)	GST(₹)	Total (₹)	Total (₹ in words)	Receipt No. & Date
7204	1296	8500	RUPEES EIGHT THOUSAND FIVE HUNDRED ONLY	1604008122000000393 0 - 25/07/22

Details of Employees with monthly wages upto ₹ 15000:

Categories	Sub Categories	No of Employee	Cash Total Wages
Builders All employees engaged in shop or yard or in construction/ demolition of buildings and other civil construction like dams, bridges etc. incl. excavation	Excl. blasting and tunneling	10	480000

Details of Employees with monthly wages above ₹ 15000:

Categories	Sub Categories	No of Employee	Cash Total Wages
Trade Description	Particular of Works	Location Details	Included All Sub-Contractors
CIVIL WORK	CIVIL WORK	ENDURANCE TECH LTD WALUJ MIDC AURANGABAD	

Contractor/Sub-Contractor Details:

Serial No	Name of Contractor	Description	Categorie	No. of Workers			Amount/Wages
				Skilled	Unskilled	Other	
Signature valid							



Digitally signed by SRINIVASAN VANDERVARAN Date: 2022.07.25 12:25:25 IST

Policy No. : 16040036220100000069 Document generated by AG_0119949 at 25/07/2022 12:25:17 Hours.

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

THE NEW INDIA ASSURANCE CO. LTD.
(Government of India Undertaking)



Extensions under the Policy Cover

Name of the Extension	Sub Limit of the Extension	Deductibles of the Extension
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		₹ 7204.00
SGST	9	648
CGST	9	648
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 25th day of July, 2022.

For and on behalf of

The New India Assurance Company Limited

Date of Issue: 25/07/2022



(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. _____

Tax Invoice No : 16040022P0005620

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C





ADJUSTMENT VOUCHER

Issuing Office : AURANGABAD DO-160400 (160400)
Address : AJAY ENGINEERING COMPOUND,
ADALAT ROAD, AURANGABAD
431005
KRANTI CHOWK (AUANGABAD)
Insured Pan Number :
Phone : 02402333572
Email : nia.160400@newindia.co.in
Fax : 02402331226
Collection Number : 16040081220000003930
Collection Date : 25/07/2022
Business Source Code : 2D10753293
PAN No of Payer :

Received with thanks from SSS CONSTRUCTION

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount ₹	A/C Code	Sub A/C Code
16040036220100000069	Cash Deposit Account-160400	8500.00	5076.160400	CD0001365556

Total = ₹ 8500.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Advance Premium Deposit	8500.00	N.A.	N.A.	N.A.	N.A.	1604002210018597	52984.00

Total = ₹ 8500.00

Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
7204.00	1296.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NIAAG00070523	SUMEET LAXMIKANT JEJURKAR	36

For The New India Assurance Company Limited

Date of Issue: 25/07/2022



(MRS. MADHURI
DHONDGE)
(DIVISIONAL
MANAGER)

Cashier's Initial

Authorized Signatory

Note -

- Please note the Policy Number, Collection Number and date in all future correspondence.
- NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

Signature valid

Digitally signed
by SRINIVASAN
VADESVARAN
Date: 2022.07.25
12:25:20 IST

Policy No. : 16040036220100000069 Document generated by AG_0119949 at 25/07/2022 12:25:17 Hours.

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