



POLICY SCHEDULE FOR EMPLOYEES COMPENSATION INSURANCE

UIN NUMBER - IRDAN190P0077100001

Insured's Name	:	SAI SADHANA AIR CONDITION AND ELE	ECTRICALS		
		Insured's Details		lss	uing Office Details
Customer ID	:	POA6109634	Office Code	:	DO-IX (153400)
Address	:	SR NO.69, MAULI NAGAR, DIGHI PUNE PUNE ,MAHARASHTRA, 411015	Address	:	SAVARKAR UDYOG BHAVAN, SHIVAJINAGAR, PUNE,411005
Phone No	:	XXXXXX5533	Phone No	:	02025534034 / 02025534897
E-mail/Fax	:	saisadhna.ac@gmail.com, /	E-mail/Fax	:	nia.153400@newindia.co.in / 02025532600
PAN No	:		S.Tax Regn. No		AAACN4165CST178
GSTIN/UIN	:	27BFJPP0861F2ZC / NA	GSTIN	:	27AAACN4165C3ZP
	:		SAC	:	997139 (Other non-life insurance services excl RI)

		Po	licy Details		
Policy Number	:	15340036230100000079	Business Source Code		
Period of Insurance	:	From: 05/07/2023 01:24:33 PM To: 04/07/2024 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/Web Aggregator/CPSC User	:	M A BHADKAMKAR - (1D7806315)
Date of Proposal	•	05-Jul-23	Agent/Bancassurance/S pecified Person		Mr. SACHIN B DHANVE (NIAAG00033117) SACHIN DHANVE (SI00061839)
Prev. Policy no.	:		Phone No	:	9881399399 / NA
Client Type	:	Non-Corporate	E-mail/Fax	Ī:	sachinbdhanve@gmail.com, //

Premium(₹)	GST(₹)	Total (₹)	Total (₹ in words)	Receipt No. & Date
9,073	1,634	10,707	RUPEES TEN THOUSAND SEVEN HUNDRED SEVEN ONLY	1000008923070011211 0 - 05/07/23

Details of Employees with monthly wages upto ₹ 15000:

Categories	Sub Categories	No of	Cash Total
_	•	Employee	Wages

Details of Employees with monthly wages above ₹ 15000:

Categories		Sub Categories		No of Employe	e	Cash Total Wages
Electric Refrigerators and Air Conditions Assembling, Installation Maintenance an Repairs -Domestic purposes	ers nd	3 WORKER RS.15000P	М	3		540000
Trade Description		Particular of Works	Location D	etails		luded All Sub - Contractors
ELECTRICALS AND AC REPAIRS, AIR CONDITIONERS REPAIRS	Е	LECTRICALS AND AC REPAIRS,AIR CONDITIONERS REPAIRS	ALL OVE MAHARASI			

Contractor/Sub-Contractor Details:

Serial No	Name of Contractor	Description	Categorie	N	o. of Worke	ers	Amount Wages	
				Skilled	Unskilled	Others		

Extensions under the Policy Cover

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



Name of the Extension	Sub Limit of the Extension	De	ductibles of the Extension
ecial Conditions			
	NA		
pecial Exclusions	NA		
pecial Excess/Deductible	NA		
	YEES COMPENSATION INSURANCE Policy	clauses at	tached herewith.
Clauses	Descrip	tion	
remium and GST Details			
	Rate of Tax		nt in INR
Premium		₹	9,073
GGST	9	817	
CGST	9	817	
GST	0	0	
et nis (their) nand(s) on this USth d	ay of July,2023.		For and on behalf of
et his (their) hand(s) on this 05th d	ay of July,2023.	The Nev	For and on behalf of India Assurance Company Li
Date of Issue: 05/07/2023	ay of July,2023.	The Nev	
	ay of July,2023.	The Nev	
	ay of July,2023.	The Nev	
	ay of July,2023.	The Nev	
	ay of July,2023.	The Nev	
	ay of July,2023.	The Nev	v India Assurance Company Li
	ay of July,2023.	The Nev	
	ay of July,2023.		(RITA SINHA)
	ay of July,2023.		(RITA SINHA) [Divisional Manager]
	ay of July,2023.		(RITA SINHA) [Divisional Manager]
Date of Issue: 05/07/2023 Stamp Duty under the Policy is ₹	consolidated Stamp Fees Paid by Pay Orde		(RITA SINHA) [Divisional Manager] Duly Constituted Attorney(s)
Date of Issue: 05/07/2023 Stamp Duty under the Policy is ₹			(RITA SINHA) [Divisional Manager] Duly Constituted Attorney(s)

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 : 15340023P0005930

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C