



LIBERTY GENERAL INSURANCE LIMITED

PRIVATE CAR PACKAGE POLICY

CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

- IMPORTANT 1)The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque.
2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.
3) In the event of misrepresentation, fraud or non-disclosure of material facts, the company reserves the right to cancel the policy from inception.

Policy issuing office :10TH FLOOR, TOWER A, PENINSULA BUSINESS PARK, GANPATRAO KADAM MARG,LOWER PAREL, MUMBAI, MAHARASHTRA-400013 Phone:+91 22 67001300 Fax: +91 22 06700 1606			
Policy Servicing office :1st Floor, Yogi Complex, Near Indira Circle,, 150 ft Ring Road,, , Kankot, Rajkot,GUJARAT-360007 PH: +91 281 2444007 Fax:			
PolicyRef No.	201140020323701085803000	Period of Insurance	From 00:00 Hrs of 18/10/2023 To Midnight of 17/10/2024
Geographical Area	India	Policy Issued on	09/10/2023
Insured	BHAGVATI JAGRUTBHAI PAMBHAR	Covernote No	201140020323701085803000
Address	PITRU KRUPA SWATI PARK ST NO 8 A KOTHARIYA MAIN ROAD RAJKOTRAJKOT,,GUJARAT,RAJKOT,RAJK OT RACE COURSE ROAD-360001 (M) +9904087516	ECovernote Date	09/10/2023
Contact Number		RTO Location	RAJKOT
Customer GSTIN		POSP Name	
UIN CODES:	IRDAN150RP0035V01201213	Aadhar Card	
		PAN Number	
Agent Name	CLARION INSURANCE BROKING SERVICES PRIVATE LIMITED		
Agent Code	IMD1113473	Agent Contact No	8511123278

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION

Registration Mark & No.	Year of Manufacture/ Date of Registration/ Invoice Date	Engine No.	Chassis No.	Make/Model/ Type of Vehicle	Type of Body	CC/HP/GVW /KW	Licensed Carrying capacity including Driver	Trailer Registration No.	Trailer Chassis No.
GJ-03-JR-8942	2017/18-10-2017/18-10-2017	089913	536341	RENAULT/KW ID/1.0 RXT OPT	Hatch Back	999.00	5	NA	NA

IDV (INSURED'S DECLARED VALUE)

IDV Of Vehicle `	Trailers `	Non Electrical Accessories `	Electrical & Electronics Accessories `	Bi-Fuel kit(CNG/LPG) `	Total Value `
199,017.00	0	0	0	15000.00	214,017.00

Own Damage Premium on Vehicle and accessories		Section II - LIABILITY (B)	
Section I - OWN DAMAGE (A)		Third Party Premium	
Basic Cover		Basic Cover	
Basic OD	1,905.19	Basic TP	2,094.00
EXTENSIONS UNDER OWN DAMAGE SECTIONS		EXTENSIONS UNDER THIRD PARTY SECTION	
CNG Kit - OD	600.00	CNG Kit - TP	60.00
DISCOUNTS UNDER OWN DAMAGE SECTION		PA BENEFITS	
No claim bonus 50%	1252.60	Personal Accident Cover Unnamed(No. Of Persons=5, SI=100000.00)	250.00
TOTAL OWN-DAMAGE PREMIUM (A)	1,252.59	LEGAL LIABILITY	
Section I - ADD ON COVERS (C)		LLTo Paid Driver	50.00
Passenger Assist IRDAN150RP0035V01201213/A0020V01201213	250.00	TOTAL LIABILITY PREMIUM (B)	2,454.00
Consumables Cover IRDAN150RP0035V01201213/A0015V02201213	636.85	Section III - PA OWNER DRIVER (D)	
Depreciation Cover IRDAN150RP0035V01201213/A0012V01201213	2,089.68	PA to Owner Driver (D)	375.00
Roadside Assistance IRDAN150RP0035V01201213/A0021V01201213	249.00	Net Premium (A+B+C+D)Taxable Value	7,712.00
Key Loss Cover (SI 10000 -/) IRDAN150RP0035V01201213/A0010V02201314	199.00	State Cess	0.00
TOTAL ADD-ON COVER PREMIUM (C)	3,424.53	CGST(GUJARAT)(%)	694.08
		SGST(GUJARAT)(%)	694.08
		TOTAL POLICY PREMIUM	9,100.00

Hire Purchase/Lease/Hypothecated with :NISSAN RENAULT FINANCIAL SERVICES INDIA PVT LTD, -							
LIMITATIONS AS TO USE -The Policy covers use of vehicle for any purpose other than: a) Hire or Reward b) Carriage of goods(other than sample of personal luggage) c) Organized racing d) Pace Making e) Speed Testing f) Reliability Trial g) Use in connection with motor trade.							
DRIVERS CLAUSE							
Persons or Classes of Person entitled to drive: Any person including the insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license.Provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.							
LIMITS OF LIABILITY							
Deductible under section - I	Compulsory Deductible: Rs 1000/- Voluntary Excess: Rs: 0/. Imposed Excess : Rs 0/.	Under Section II-I(i) of the policy(Death of or bodily injury):	Such amount necessary to meet the requirements of motor vehicle Act,1988.	Under Section II-I(ii) of the policy(Damage to third party property)	7,50,000.00	P.A. cover for owner-Driver under section-III: CSI	15,00,000.00
Subject to I.M.T Endorsement Nos. IMT 7, IMT 16, IMT 22, IMT 25, IMT 28, AD 01, AD 02, AD 04, AD 05, AD 06							
Passenger assist cover details:Hospital Cash: Rs 1500 per day for 30 days (per Pax.), Medical Expenses: Rs 10,000 (per Pax.), Ambulance Charges: Rs. 5000							

NOMINATION DETAILS			
Name of the Nominee	Relationship with Insured	Name of Appointee (if nominee is minor)	Relationship with the Nominee
JAGRUTBHAI PAMBHAR	SPOUSE	NA	NA

I/We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of chapter X and chapter XI of M.V. Act,1988. In witness whereof this Policy has been signed at Mumbai on 09/10/2023 Receipt No: CR202309105789 Invoice No: In case of claim ,Please contact us at : Toll Free No -18002665844, Email id – care@libertyinsurance.in IRDA Registration No. 150 Insurance is the subject matter of solicitation;CIN No. U66000MH2010PLC209656 Date of Issue :09/10/2023 Place: RAJKOT Stamp duty for the said policy is paid vide GRASS DEFACE no.0004656521201617, Dt. 10/02/2017 as prescribed in Government Notification Revenue & Forest Department no. Mudrank 2004/4125/CR/690/M-1, Dt 31/12/2004. LGI Branch GSTIN :24AABCL9950A1ZR SAC Code:997134 Description of Service:General Insurance Service Place of Supply : GUJARAT Tax is not payable under reverse charge by the recipient. I/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		For Liberty General Insurance Limited  	
		Authorised Signatory	
IMPORTANT NOTICE			
The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation English version will be good.			



PROPOSAL FORM PRIVATE CAR PACKAGE POLICY

Proposal for : ☐ New Vehicle ☐ Rollover ☐ Endorsement ☒ Renewal (LGI Policy No.) 201140020322701042702000

Note: 1) Please Complete the proposal form in BLOCK LETTERS and tick boxes whichever applicable
2) Attach additional sheets if space given is insufficient
3) The queries made/details stated below are the minimum requirements to be furnished by a proposer.(The Company may seek any other information a desired for underwriting purpose.)

Intermediary Details

IMD Name	CLARION INSURANCE BROKING SERVICES PRIVATE LIMITED	IMD Code:	IMD1113473
Branch Name:	RAJKOT	Branch Code:	400203
SM Name :		SM Code :	N1609116
Contact No:	8511123278		
POSP Name :		POSP Code :	
PAN Card Number :		or	Aadhar Card No.:

(Mandatory to provide PAN Card No. or Aadhar Card No. in case of POSP)

Type of Cover : ☒ Package (Comprehensive) Policy for 1 year ☐ Package (Comprehensive) Policy for 3 years ☐ Bundled Cover (1year Own Damage & 3 years Third Party)

Vehicle Details

Vehicle Make	Model	Variant	Year of Manufacture / Invoice Date	Cubic Capacity/KW	Gross Vehicle Weight (GVW) For Goods carrying Vehicle	Seating Capacity/LCC (Including Driver/Cleaner)	Body Type
RENAULT	KWID	1.0 RXT OPT	2017/18-10-2017	999.00	o	5	Hatch Back

Insured Declared Value

Year	For Vehicle Rs.	Electrical Accessories	Non Electrical Accessories	Trailer/Side Car (if any)	Value of CNG/LPG kit (if not part of standard vehicle)	Total IDV Rs.
1	199017.00	0.00	0.00	0.00	15000.00	214017.00

“Add On Covers” Selected:

☒ Depreciation Cover ☒ Consumable Cover ☒ Passenger Assist Cover ☒ Road Side Assistance Cover ☐ Engine Safe Cover
☒ Key Loss Cover ☐ GAP(Incl. Taxes & Regn. charges) ☐ GAP Value ☐ Towing Expenses Cover
☐ EMI Cover Protection ☐ Tyre Protection Cover

UIN Code of Add On covers selected :

IRDAN150RP0035V01201213/A0012V01201213,IRDAN150RP0035V01201213/A0015V02201213,IRDAN150RP0035V01201213/A0020V01201213,IRDAN150RP0035V01201213/A0021V01201213,IRDAN150RP0035V01201213/A0010V02201314

Invoice Price Value Road Tax First time Registration Charges
Whether you have opted for any Add on Coverage's last year. ☐ Yes ☒ No

If yes, please specify the Add on Coverage's

Vehicle Registration No.	GJ-03-JR-8942	Colour of Vehicle :	
Engine No.	089913	Chassis No	536341
Place of Registration	RAJKOT	Date of Registration	18/ 10/ 2017

Trailer Chassis No. (if any)	Vehicle type	☒ Indigenous ☐ Imported	Rated under:	☐ Zone A ☒ Zone B
Is the vehicle attached with any of the Fleet?	☐ Yes ☐ No	No. of vehicles attached with fleet	Cubic Capacity :	999.00
Is the vehicle made in India?	☒ Yes ☐ No			
Financier Details :	☒ Hypothecation Agreement ☐ Hire Purchase ☐ Lease Agreement		Body Type :	

Name of Financier & Address :	NISSAN RENAULT FINANCIAL SERVICES INDIA PVT LTD -
Name of Insured: (Mr/Mrs/Ms/Dr)	BHAGVATI JAGRUTBHAI PAMBHAR
e-Insurance Accout Number :	I would like to open e-Insurance account with Insurance Repository

(Mandatory to provide PAN card No.in case customer wishes to open E-Insurance Account.)

Name of Contact Person :	(For Corporate)
Communication Address :	PITRU KRUPA SWATI PARK ST NO 8 A KOTHARIYA MAIN ROAD RAJKOTRAJKOT
Area/Landmark:	State : GUJARAT City / District : RAJKOT Pin Code : 360001
Contact Details: Mobile No. :	9904087516 Residence:
Office :	Email ID: bhpipaliya@gmail.com PAN No. DFOPP5373B
Date of Birth :	16/ 08/ 1993 Business/Occupation (For Individual Customer)
Aadhar No. :	
Registration Address:	PITRU KRUPA SWATI PARK ST NO 8 A KOTHARIYA MAIN ROAD RAJKOTRAJKOT
Any other details :	

Period of Insurance for Package Policy of 1 year & 3 years :
From Time : 00:00 Date : 18/ 10/ 2023 To the Midnight of Date : 17/ 10/ 2024

Personal accident Cover for Owner Driver is compulsory in liability only Cover. Please give details of nomination:

Particulars	Name of Passenger	Name of Nominee/ Existing Nominee	Name of New Nominee (In case of change of existing Nominee)	Age	Relationship	Name of Appointee (If Nominee is a minor)	Relationship with the nominee
For PA to owner Driver	NA	JAGRUTBHAI PAMBHAR	NA	NA	Spouse	NA	
For PA to Named Passenger							
(In case of more than 1 named passengers, please provide details in the above format on a separate sheet)							

Note . Personal Accident Cover for Owner Driver is compulsory for Sum Insured of Rs 15,00,000/- for Private Car • Compulsory PA cover to Owner Driver cannot be granted where a vehicle owned by a company, a partnership firm or a similar body corporate or where the owner driver does not hold an effective driving license.
or classes of Person entitled to drive: Please refer overleaf. Any Limitations as to use of Motor vehicle: Please refer overleaf.
In the event of dishonor of Cheque(s), insurance cover provided under this document automatically stands cancelled from inception irrespective of whether a separate communication is sent or not.

Premium Payment Details ☐ Cash ☐ Cheque ☐ Demand Draft ☒ Credit Card	Insured Bank Details:
☐ NEFT/RTGS	

Premium Amount (including service tax):	9100.00	Bank Name and Branch	
Cheque / DD No:	NA	Bank A/C No.:	
Cheque / DD Date:	NA	IFSC Code	

In case the annualized premium is more than Rs. 25000/-, the proposer is requested to provide a cancelled cheque of his/her bank account if the premium is not paid from the same

Electrical Accessories:

Item Details: Make & Model: Year of Manf.: IDV

Details of Non-Electrical Accessories:

Item Details: Make & Model: Year of Manf.: 2017 IDV

