



MOTOR POLICY

Ref. No. W84616191
Date: Dec 17, 2020

Insured Name : SACHIN MALIK
Address : 69 F NO 6 ASHARAM JEEVAN NAGAR BHAGWAN NAGAR, NEW DELHI, DELHI 110014
Telephone No : -
Mobile No : 9811044351
Email Address : SACKUMAR78@GMAIL.COM

Policy No. : 3001/111158897/05/000
Valid From : Dec 18, 2020
Valid till (midnight of) : Dec 17, 2021
Vehicle Make/ Model : HYUNDAI/ EON ERA PLUS
Vehicle Registration No. : DL2CAQ5205
Engine No. : G3HAFM388078
Chassis No : MALA251ALFM428284J
Total IDV (Rs.) : 186000

Be assured of a hassle-free claim experience with us

HOW TO CLAIM

Intimate us **FIRST** for quick claim registration and approval

1 Register your claim with us
Call 18002666

2 Use **InstaSpect** for instant vehicle inspection.

3 Your Car pick up shall be arranged through our preferred partner

4 All repairs at our partner garages with 6 months service assurance

Your vehicle is ready and repaired to use.



"CLAIM"
to 575758



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www.icicilombard.com



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Date: Dec 17, 2020
SACHIN MALIK
69 F NO 6 ASHARAM JEEVAN NAGAR BHAGWAN NAGAR
NEW DELHI
DELHI 110014
Mobile No: 9811044351

Sub: Risk Assumption Letter

Dear Sir/Madam,

Thank you for choosing ICICI Lombard General Insurance Company Limited (ICICI Lombard) as your preferred service provider.

Please find enclosed Policy No. **3001/111158897/05/000**, which has been issued based on the below mentioned details:

Insured & Vehicle Details	
Name of Insured	SACHIN MALIK
Period of Insurance	Dec 18, 2020 to Dec 17, 2021
Vehicle Make / Model	HYUNDAI / EON ERA PLUS
RTO City	DELHI-NEW DELHI
Vehicle Registration No.	DL2CAQ5205
Vehicle Registration Date	Dec 18, 2015
Engine No.	G3HAFM388078
Chassis No.	MALA251ALFM428284J
Current Year NCB(%)	50%
Previous Policy Details	
Previous Policy No.	3001/111158897/04/000
Previous Policy Period	18-12-2019 to 17-12-2020
Previous Year NCB(%)	45%
Claims Made Under Previous Policy	0
Previous Insurer Name	ICICI LOMBARD
Previous Policy Type	Comprehensive Package

The information provided above is based on the information received from you and accordingly, the policy has been processed. Coverage of risk is subject to realisation of the full premium, post which, insurance coverage under the policy would commence. In case the premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

We have issued the policy basis your confirmation that you hold a valid PUC and/or Fitness certificate, as applicable.

Government of India has mandated electronic toll payments using FASTag to reduce vehicular traffic at toll plazas. Customers are advised to comply with the direction of the government and get their FASTag from Point of Sale locations at Toll Plazas or from Issuer Agency. Please visit <http://www.fastag.org/> for details.

If you require any changes in the Certificate of Insurance cum Policy Schedule, you are requested to inform us by writing to customersupport@icicilombard.com or calling our 24 hour toll free helpline on 1800 2666. Absence of any communication within a period of 15 days of the date mentioned on this letter, would mean that the issued policy is in order and as per your proposal.

The information provided is merely illustrative and shall not be construed to be an evidence of existence of a contract of insurance. The Risk Assumption Letter is to be read in conjunction with the policy and shall be considered null and void without the same.

In case of a claim, immediately notify ICICI Lombard General Insurance Company Limited on the Toll Free Number **1800 2666** / (Chargeable) **8655 222666** or SMS "CLAIM" to **575758**
Mailing Address: ICICI Lombard General Insurance Company Limited Interface Building No. 16, 601 / 602, 6th Floor, New Link Road Malad (West), Mumbai - 400 064.
Registered Office Address: ICICI Lombard General Insurance Company Limited, ICICI Lombard House, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai - 400 025.
CIN: L67200MH2000PLC129408

**CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE****Private Car Package Policy**

Product Code: 3001 UIN: IRDAN115P0017V01200102



Insured Name : SACHIN MALIK	Policy No : 3001/111158897/05/000
Address : 69 F NO 6 ASHARAM JEEVAN NAGAR BHAGWAN NAGAR, NEW DELHI, DELHI 110014	Tenure : 1
Telephone No : - Mobile No: 9811044351	Period of Insurance : Dec 18, 2020 00:00 to Midnight of Dec 17, 2021
Email Address : SACKUMAR78@GMAIL.COM	E-Policy No : 3001/W-81651121/00/000
Nominee Name : - Named Passenger's Nominee:	Policy Issued On : Dec 17, 2020
Relationship : -	Covernote No : 111158897
Age : -	RTO Location : DELHI-NEW DELHI
GSTIN Number (Customer) :	Hypothecated To : MAGMA FINCORP LIMITED.,
Servicing Branch Name : Gurgaon	Invoice Number : 101220462663

Servicing Branch Address : Tower D, Twelfth Global Business Park Mehrauli Gurgaon Road Gurgaon Haryana 122002

Registration No.	Make	Model	Type of Body	CC/KW	Mfg Yr	Seating Capacity	Chassis No.	Engine No.
DL2CAQ5205	HYUNDAI	EON ERA PLUS	HATCHBACK	814	2015	5	MALA251ALFM428284J	G3HAFM388078
Vehicle IDV (₹)	Trailer (₹)	Non Electrical Accessories (₹)	Electrical / Electronic Accessories (₹)	CNG / LPG Unit (₹)			Total IDV (₹)	
186000	0	0	0	0			186000	

Premium Details

OWN DAMAGE(A)	(₹)	LIABILITY(B)	(₹)
Basic OD Premium	2443	Basic Third Party Liability	2072
Road Side Assistance (RSA-Standard)	199	Total	2072
Sub Total	2642	Add:	
Less:		Legal Liability to Paid Driver	50
Anti-theft Device Discount	61	PA Cover for Owner Driver	325
No Claim Bonus 50%	1191	Sub-Total	375
Sub-Total Deductions	1252	Total Liability Premium(B)	2447
Total Own Damage Premium(A)	1390	Total Package Premium(A+B):	3837
		IGST	% 18
			₹ 690.66
		Total Tax Payable in ₹	691
		Total Premium Payable In ₹	4528

Geographical Area: India	Applicable IMT Clauses: 7 , 10 , 22 , 28
Compulsory Deductible: ₹ 1000	Voluntary Deductible: ₹ 0

Features of Add-on Covers:

1.List of services for Road Side Assistance :Arrangement of keys,Arrangement/Supply of fuel,Arrangement of rental vehicle,Towing on breakdown/accident,Battery jump start,Message Relay,Arrangement of Accommodation,Flat Tyre support,Minor on spot Repairs,Breakdown support over phone

Premium Collection No.	1121168344	Premium Amount	₹ 4528	Receipt Date	17-12-2020
GSTIN Reg.No	06AAACI7904G1ZR	HSN/SAC code	9971 / GENERAL INSURANCE SERVICES		

Limits of Liability: (a) Under Section II-I(i) of the policy: Death of or bodily injury - Such amount as is necessary to meet the requirements of the Motor Vehicles Act 1988. (b) Under Section II-I(ii) of the policy: Damage to Third Party Property ₹ 750000/-; PA Cover for Owner-Driver under Section III: CSI ₹ 1500000/-. **Limitations as to Use:** The Policy covers use of the vehicle for any purpose other than: Hire or Reward, Carriage of goods (other than samples of personal luggage), Organised racing, Pace Making, Reliability trails or Speed testing, any purpose in Connection with Motor Trade. **Driver's Clause:** 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 Vehicles Rules, 1989. **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 hold good. **Disclaimer:** Please visit www.icicilombard.com for the policy wordings, for complete details on terms and conditions governing the coverage and NCB. This document is to be read with the policy wordings. The policy is valid subject to realization of cheque. We accept premium only via legally recognized modes. In case of dishonour of premium cheque, the company shall not be liable under the policy and the policy shall be void ab-initio. In case of any discrepancy with respect to the policy, please revert within 15 days from the policy start date. This policy is underwritten on the basis of the information provided by you and as detailed in the Risk Assumption Letter shared with you along with the policy. On renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change. **Grievance Redressal:** For resolution of any query or grievance you may contact us on our toll free no. 1800 2666, or visit any of our branch offices. You can also write to us at customersupport@icicilombard.com. For detailed grievance redressal mechanism please visit the "Grievance Redressal" section on our website www.icicilombard.com.

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 Motor Vehicle Act, 1988. In witness whereof, this Policy has been signed at Mumbai on this date of Dec 17, 2020 in lieu of Covernote no. 111158897. The stamp duty of ₹ 0.5 paid vide deface no. CSD16420202580 dated Nov 11, 2020.

Policy Issuing Office: ICICI Lombard General Insurance Company Limited, ICICI LOMBARD HOUSE, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai 400 025.

Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.

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CIN: L67200MH2000PLC129408



CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

Private Car Package Policy

Product Code: 3001 UIN: IRDAN115P0017V01200102



Agency Code : 10036701
Agency Name : AMIT KUMAR
Agent's Contact No: 9953541700
Contact Person :

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