

THE NEW INDIA ASSURANCE CO. LTD.
(Wholly owned by the Govt. of India)



दावा होने पर कृपया निम्न पते पर संपर्क
दावा हब, चौथी मंजिल, पोप्युलर ह
आश्रम रोड, अहमदाबाद-380 009.
फोन नं. 079-26553200
ई-मेल : ch21@newindia.co.in



Consolidated Stamp Duty Paid
by Ahmedabad R.O. For 2015-16

Personal Accident Insurance ()

Insured Name	AHMEDABAD DISTRICT CO-OP.BANK(PMSBY) AHMEDABAD		
Insured's Details		Issuing Office Details	
Customer ID	PO34280349	Office Code	DO - VIII, AHMEDABAD (212400)
Address	OPP.INCOME TAX OFFICE,NR.GANDHI BRIDGE,ASHRAM RD., AHMEDABAD GUJARAT, 380009	Address	104/105,DEV ARC ISCON CIRCLE,OPP.BIG BAZAR,S.G.HIGHWAY AHMEDABAD 380054
Phone No		Phone No	26922247 / 26924988
E-mail/Fax	info@adcbank.coop. /	E-mail/Fax	nia.212400@newindia.co.in / 07926922247
PAN No		S.Tax Regn. No	AAACN4165CST178

Policy Details

Policy Number	21240042150100000052	Business Source Code	
Period of Insurance	From:01/06/2015 12:00:01 AM To: 31/05/2016 11:59:59 PM	Dev.Off./Broker/Corp. Agent	DIRECT BUSINESS (1D6341443)
Date of Proposal	01-Jun-15	Agent/Bancassurance	
Prev. Policy no.		Phone No	NA / NA
Client Type	Non-Corporate	E-mail/Fax	/
Staff Discount	No	Type of Cover	24 hours Cover required

Premium:	Service Tax:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
1	0	1	10	RUPEES ONE ONLY	2124008115000000 0496 - 07/05/15

Benefits under the Policy: GROUP NAMED

Number of Persons													
Sl. No	Emp ID	Name Of Insured	Age	Cadre	Relation	Risk Group	Excess	Sum Insured	Medical Extensi on	War & Allied Cover opted	Sum Insured	Country	Type of Period
2	1	AHMEDA BAD DISTRICT CO- OP.BANK	18	SERVIC E	Self	Risk Group I	0	200000	No		0	NA	NA

Table Details:

Sl.No	Table A		Table B		Table C		Table D	
	Table A	Sum Insured	Table B	Sum Insured	Table C	Sum Insured	Table D	Sum Insured
1								
2	No	0	No	0	Yes	200000	No	0

Sl.No	Special Conditions
1	
2	AS PER PMSBY

The Policy Shall be subject to PERSONAL ACCIDENT INSURANCE () policy clauses attached herewith IN WITNESS WHEREOF the undersigned duly authorized hereto set his hand

Place:-
Date:-

For and on behalf of
The New India Assurance Company Limited

Validity unknown

Policy No. : 21240042150100000052 - Document generated by 17116 at 11/05/2015 16:30:39 Hours.
Digitally signed by Surendra K. Singh, DN: cn=Surendra K. Singh, o=New India Assurance Co. Ltd., ou=Regional Office, c=IN, email=surendra.k.singh@newindia.co.in, c=New India Assurance Co. Ltd., ou=Regional Office, c=IN, email=surendra.k.singh@newindia.co.in
For your grievance, if any you may approach any one of the following offices: 1. Policy issuing office 2. Regional Office 3. Head Office. In case you are not satisfied with our own grievance redressal mechanism, you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website http://www.newindia.co.in.

पंजीकृत एवं प्रधान कार्यालय : न्यू इंडिया इंश्योरेंस कंपनी लिमिटेड, 87 एम. जी. रोड, फोर्ट, मुंबई - 400 001.
Regd. & Head Office : New India Assuran Page No. ding, 87, M. G. Road, Fort, Mumbai - 400 001.

टोल फ्री नं./Toll Free No. : 1800-209-1415 वेबसाइट / Website : www.newindia.co.in टिसन/CIN : U99999 MH1919 GOI 000526