

Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

6.3.1: The institution has effective welfare measures and Performance Appraisal System for teaching and non-teaching staff-

Institute has well-defined welfare policies for teaching and non-teaching staff. These can be briefly enlisted as-

No. of Beneficiaries (Teachers)

- 1. Health insurance covering all family members
- 2. Advance salary
- 3. Regular health check-ups
- 4. Research incentive schemes
- 5. Support for child education
- 6. Support for higher education
- 7. Flexible leave structure

No. of Beneficiaries (non-teaching staff)

- 1. Health insurance covering all family members
- 2. Advance salary
- 3. Regular health check-ups
- 4. Support for child education
- 5. Support for higher education







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Sample format of performance appraisal form



Jai Mahakali Shikshan Sanstha's

Agnihotri College of Pharmacy (ACP) Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra.

Calculation of 360° Feedback Score

(As per Annexure IV of Part III, Sec IV of AICTE Notification, The Gazette of India, March 01,

Name of Faculty Member: St. Pam D. Bawankar

Designation: ASSOCIATE PROFESSOF Sem/Year: Even Sum B. Pharm - III Som (2022-23)

Score Sheet

Sr.No	Particulars	Max. Marks	Marks Obtained
01	Teaching Process	25	22
02	Students Feedback	25	23
03	Departmental Activities	20	18
04	Institute Activity	10	08
05	ACR	10	08
06	Contribution to Society	10	07
	Total	100	86







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra



Jai Mahakali Shikshan Sanstha's

Agnihotri College of Pharmacy (ACP)

Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra.

Calculation of 360° Feedback Score

(As per Annexure IV of Part III, Sec IV of AICTE Notification, The Gazette of India, March 01,

Name of Faculty Member: Neha G. Shete.

Designation: ASSI. Projessor.

Sem/Year: The Sem. BPharm 202 BPhanm 2022-23.

Score Sheet

Sr.No	Particulars	Max. Marks	Marks Obtained
01	Teaching Process	25	22
02	Students Feedback	25	21
03	Departmental Activities	20	18
04	Institute Activity	10	07
05	ACR	10	67
06	Contribution to Society .	10	08
	Total	100	83









Jai Mahakali Shikshan Sanstha's

Agnihotri College of Pharmacy (ACP) Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra.

Calculation of 360° Feedback Score

(As per Annexure IV of Part III, Sec IV of AICTE Notification, The Gazette of India, March 01,

Name of Faculty Member: Prosad P. Jurnacle Designation: Associate Professor Sem/Year: VIII sen (22-23)

Sr.No	Particulars	Max. Marks	Marks Obtained
01	Teaching Process	25	22
02	Students Feedback	25	23
03	Departmental Activities	20	17
04	Institute Activity	10	08
05	ACR	10	07
06	Contribution to Society	10	07
	Total	100	84









Jai Mahakali Shikshan Sanstha's

Agnihotri College of Pharmacy (ACP) Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra.

Calculation of 360° Feedback Score

(As per Annexure IV of Part III, Sec IV of AICTE Notification, The Gazette of India, March 01, 2019)

Name of Faculty Member: Prashant 5. wake.

Designation: Associate professor.

Sem/Year: VII sem. B. pharm. 2021-23

Score Sheet

Sr.No	Particulars	Max. Marks	Marks Obtained
01	Teaching Process	25	21
02	Students Feedback	25	72_
03	Departmental Activities *	20	18
04	Institute Activity	10	07
05	ACR	10	08
06	Contribution to Society	10	08
	Total	100	84









Jai Mahakali Shikshan Sanstha's

Agnihotri College of Pharmacy (ACP) Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra.

Calculation of 360° Feedback Score

Score Sheet

(As per Annexure IV of Part III, Sec IV of AICTE Notification, The Gazette of India, March 01,

Name of Faculty Member: Ms. Klushbu Myas.

Designation: Asst. Prof.

Sem/Year:

Sem/Year: VIII sem year 2022-23 B. pleaner

Sr.No	Particulars	Max. Marks	Marks Obtained
01	Teaching Process	25	21
02	Students Feedback	25	23
03	Departmental Activities	20	18
04	Institute Activity	10	08
05	ACR	10	07
06	Contribution to Society	10	07
	Total	100	84







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Welfare measures [Teaching Staff]





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER,IIND FLOOR SHIVAJI CHOWK,MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556228

PERIOD OF INSURANCE From 22:21 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR D R MUNDHADA

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001. 442001 WARDHA MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	230902422	2P108556228	Prev. Pol. No.			
Name Of Insured/ID	MR D R MU	NDHADA /23186767459	7.7	- X3 - 3	53 36 33	
Tel.(O)	8	Fax		Tel. (R)	Mobile	8999024397
Business/Occupation	Others	02	07.	Email	gajudandade@gmail.co	om
Period of Insurance	From	22:21 Hrs of 26/11/2022	То	Midnight of 25/11/2023		

Coinsurance	UIIC 230210 : 100%

Premium	₹225.00		77
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Assignee Name	Kanchan D Mundhada	Assignee Relationship	Spouse
Previous Illness(If Any)		Remarks	
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Insured Name	D R Mundhada	DOB	01/11/1975
coverage Details:-		2000	

CB Details:-

SI. No.	sı(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total :	₹	265.00
Receipt Number :		hitrory.
Receipt Date:		,

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	99579493







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:	W	Office GST No.:	27AAACU5552C1ZJ	
SAC Code:	997133	Invoice No. & Date:	42221108556228 & 26/11/2022	
Amount Subject to Reverse	Amount Subject to Reverse Charges-NIL			

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.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at 80 WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER, IIND FLOOR SHIVAJI CHOWK, MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556249

PERIOD OF INSURANCE From 22:28 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR RAM D BAWANKAR

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001. 442001 WARDHA MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	230902422	2P108556249	Prev. Pol. No.	- 0		
Name Of Insured/ID	MR RAM D	BAWANKAR /23186768086	711	, (1)	7) 36	36
Tel.(O)	3	Fax	,	Tel. (R)	Mobil	e 8999024397
Business/Occupation	Others	in .	101	Email	gajudandade@gmail.	com
Period of Insurance	From	22:28 Hrs of 26/11/2022	То	Midnight of 25/11/2023		

Coverage Details:-		Call Cool I	
Insured Name	Ram D Bawankar	DOB	01/09/1984
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Previous Illness(If Any)		Remarks	
Assignee Name	Bhairavi R Bawankare	Assignee Relationship	Spouse
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Premium	₹225.00		No.

CB Details:-

SI. No.	sī(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total :	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ	
SAC Code:	997133	Invoice No. & Date:	42221108556249 & 26/11/2022	
Amount Subject to Reverse Charges-NIL				

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.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding ξ 1 lakh or a claim for refund of premium exceeding ξ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER, IIND FLOOR SHIVAJI CHOWK, MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556344

PERIOD OF INSURANCE From 23:07 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR AKASH KAPSE

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001.

WARDHA

MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	23090242	22P108556344	Prev. Pol. No.	- 8		
Name Of Insured/ID	MR AKASH	KAPSE /23186772354	XS	XS X	65 58	92
Tel.(0)	5	Fax	68	Tel. (R)	Mobil	e 8999024397
Business/Occupation	Others	25	250	Email	gajudandade@gmail.	com
Period of Insurance	From	23:07 Hrs of 26/11/2022	То	Midnight of 25/11/2023		

Coinsurance	UIIC 230210 : 100%
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Coverage Details:-

1000 1000 000	1111111	0.000
Akash Kapse	DOB	27/01/1989
		Others
	Remarks	
Asha S Kapse	Assignee Relationship	Mother
PADeathPTDTableII	SI	₹500,000.00
₹225.00		
	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Asha S Kapse PADeathPTDTableII	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Remarks Asha S Kapse Assignee Relationship PADeathPTDTableII SI

CB Details:-

SI. No.	sı(₹)	Percentage(%)	Amount(₹)	
1	500,000.00	0	0.00	

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total :	₹	265.00
Receipt Number :		23965000
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	42221108556344 & 26/11/2022
Amount Subject to Reverse	Charges-NIL	27	25

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.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER, IIND FLOOR SHIVAJI CHOWK, MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556685

PERIOD OF INSURANCE From 22:44 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR PRASHANT WAKE

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001. 442001 WARDHA MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO, AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	23090242	22P108556685	Prev. Pol. No.				
Name Of Insured/ID	MR PRASH	ANT WAKE /23186770043	1/2	72			
Tel.(O)		Fax		Tel.	м	lobile	8999024397
Business/Occupation	Others		et e	Email	gajudandade@gn	nail.co	m
Period of Insurance	From	22:44 Hrs of 26/11/2022	To Midnight of 25/11/2023				

Coinsurance	UIIC 230210 : 100%
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Coverage Details:-

Prashant Wake	DOB	05/04/1983
		Others
	Remarks	
Swapnuja P Wake	Assignee Relationship	Spouse
PADeathPTDTableII	SI	₹500,000.00
₹225.00	***	When it
	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Swapnuja P Wake PADeathPTDTableII	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Remarks Swapnuja P Wake PADeathPTDTableII SI

CB Details:-Percentage(%) Amount(₹) 500,000.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total:	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	42221108556685 & 26/11/2022
Amount Subject to Reverse	Charges-NIL	***************************************	

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.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER,IIND FLOOR SHIVAJI CHOWK,MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556377

PERIOD OF INSURANCE From 23:19 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR KOMAL KAKADE

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001.
442001
WARDHA
MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797
Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	2309024222P108556377		Prev. Pol. No.			
Name Of Insured/ID	MR KOMA	L KAKADE /23186773323	XV-2	X0		ο.
Tel.(O)	(0	Fax	r e	Tel. (R)	Mobile	8999024397
Business/Occupation	Others	187	89	Email	gajudandade@gmail.	com
Period of Insurance	From	23:19 Hrs of 26/11/2022	To	Midnight of 25/11/2023		

Coinsurance	UIIC 230210 : 100%
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Coverage Details:-

Insured Name	Komal Kakade	DOB	30/07/1991
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Previous Illness(If Any)		Remarks	1
Assignee Name	Hemant Kakde	Assignee Relationship	Spouse
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Premium	₹225.00		

CB Details:-

SI. No.	sı(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹ 225.00
CGST(9%):	₹ 20.00
SGST(9%):	₹ 20.00
Stamp Duty:	₹ 25.00
Total:	₹ 265.00
Receipt Number :	
Receipt Date:	

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	NO.







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	42221108556377 & 26/11/2022
Amount Subject to Reverse	Charges-NIL	117400000000000000000000000000000000000	

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.

Anti Money Laundering Clause: -In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

[Non teaching staff]





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER,IIND FLOOR SHIVAJI CHOWK,MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556395

PERIOD OF INSURANCE From 23:26 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR PRADEEP NANOTI

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001.

WARDHA

MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	23090242	22P108556395	Prev. Pol. No.			
Name Of Insured/ID	MR PRADE	EP NANOTI /23186774072	*	- XV		
Tel.(O)		Fax		Tel. (R)	Mot	ile 8999024397
Business/Occupation Others		- Xi	Email	gajudandade@gma	1.com	
Period of Insurance	From	23:26 Hrs of 26/11/2022	To	Midnight of 25/11/2023		

Coinsurance UIIC 230210 : 100%

Coverage Details:-

St 20		18
Pradeep Nanoti	DOB	27/05/1971
		Others
8	Remarks	
Suvarna Nanoti	Assignee Relationship	Spouse
PADeathPTDTableII	SI	₹500,000.00
₹225.00	1000	(4) (2) //
	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Suvarna Nanoti PADeathPTDTableII	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Remarks Suvarna Nanoti PADeathPTDTableII SI

CD Details.			
SI. No.	SI(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total:	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:	- 1	Office GST No.:	27AAACU5552C1ZJ	
SAC Code:	997133	997133 Invoice No. & Date:	42221108556395 & 26/11/2022	
Amount Subject to Reverse	Charges-NIL		,	

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.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER,IIND FLOOR SHIVAJI CHOWK,MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556410

PERIOD OF INSURANCE From 23:29 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR HEMANT MANWATKAR

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001.

442001

WARDHA

MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	230902422	2P108556410	Prev. Pol. No.				
Name Of Insured/ID	MR HEMAN	T MANWATKAR /23186774257	30-	300			
Tel.(O)		Fax		Tel. (R)	Мо	bile 89	99024397
Business/Occupation	Others	20	20	Email	gajudandade@gma	ail.com	
Period of Insurance	From	23:29 Hrs of 26/11/2022	То	Midnight of 25/11/2023			

Coinsurance	UIIC 230210 : 100%
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Coverage Details:-

Hemant Manwatkar	DOB	24/08/1978
Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.		Others
5	Remarks	
Vishaka Manvatkar	Assignee Relationship	Spouse
PADeathPTDTableII	SI	₹500,000.00
₹225.00		
	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Vishaka Manvatkar PADeathPTDTableII	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001. Remarks Vishaka Manvatkar PADeathPTDTableII SI

SI. No.	sı(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹ 225.00
CGST(9%):	₹ 20.00
SGST(9%):	₹ 20.00
Stamp Duty:	₹ 25.00
Total :	₹ 265.00
Receipt Number :	
Receipt Date:	

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	42221108556410 & 26/11/2022
Amount Subject to Reverse	Charges-NIL	8	

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.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER,IIND FLOOR SHIVAJI CHOWK,MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556435

PERIOD OF INSURANCE From 23:38 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR MILLIND PATURKAR

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001.

442001

WARDHA

MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463











INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	23090242	22P108556435	Prev. Pol. No.			
Name Of Insured/ID	MR MILLIN	ND PATURKAR /23186774847	(0)		0 0	60
Tel.(O)	h),	Fax		Tel. (R)	Mobi	le 8999024397
Business/Occupation	Others	101	302	Email	gajudandade@gmail	.com
Period of Insurance	From	23:38 Hrs of 26/11/2022	То	Midnight of 25/11/2023		

Coinsurance	UIIC 230210 : 100%
Comparance	0110 230210 1 100 /0

Coverage Details:-

coverage Details:-			
Insured Name	Millind Paturkar	DOB	06/04/1969
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Previous Illness(If Any)		Remarks	
Assignee Name	Juyili Paturkar	Assignee Relationship	Daughter
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Premium	₹225.00		

SI. No.	sı(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total :	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	4222I108556435 & 26/11/2022
Amount Subject to Reverse	Charges-NIL	1/2)%

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.

Anti Money Laundering Clause: In the event of a claim under the policy exceeding $\overline{\xi}$ 1 lakh or a claim for refund of premium exceeding $\overline{\xi}$ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.in.

Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER, IIND FLOOR SHIVAJI CHOWK, MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556446

PERIOD OF INSURANCE From 23:41 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MS CHHAYA GHUME

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001. 442001 WARDHA MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

: SATISH VINAYAKRAO RAUT Agent Name

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 230210@uiic.co.in

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Website: http://www.uilc.co.in
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INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	230902422	22P108556446	Prev. Pol. No.				
Name Of Insured/ID	MS CHHAY	A GHUME /23186775108	133	135			
Tel.(O)		Fax		Tel. (R)	м	lobile	8999024397
Business/Occupation	Others	s Email gajudandade@gmail.com		m			
Period of Insurance	From	23:41 Hrs of 26/11/2022	То	Midnig	Midnight of 25/11/2023		

|--|

Insured Name	Chhaya Ghume	DOB	01/10/1971
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Previous Illness(If Any)		Remarks	
Assignee Name	Krushna Ghume	Assignee Relationship	Daughter
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Premium	₹225.00		

CB Details:-

SI. No.	sı(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total :	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No	0.1	Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	42221108556446 & 26/11/2022
Amount Subject to Re	verse Charges-NIL		

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.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding $\overline{\xi}$ 1 lakh or a claim for refund of premium exceeding $\overline{\xi}$ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

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Date of Proposal and Declaration: 26/11/2022

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For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER, IIND FLOOR SHIVAJI CHOWK, MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556459

PERIOD OF INSURANCE From 23:48 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured MR VILAS GOLHAR

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001. 442001 WARDHA MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name Agent Code : SATISH VINAYAKRAO RAUT

: AGD0123797 Mobile/Landline Number/Email : 9890727463

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 230210@uiic.co.in

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INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	230902422	22P108556459	Prev. Pol. No.			
Name Of Insured/ID	MR VILAS	GOLHAR /23186775659	XII.	2.1		
Tel.(O)	N.	Fax		Tel. (R)	Mobile	8999024397
Business/Occupation	Others	X1	Email gajudandade@gmail.com		om	
Period of Insurance	From	23:48 Hrs of 26/11/2022	To	Midnight of 25/11/2023		

Coinsurance U11C 230210 : 100%	Coinsurance	UIIC 230210 : 100%
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Insured Name	Vilas Golhar	DOB	13/08/1966
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Previous Illness(If Any)		Remarks	
Assignee Name	Anita Golhar	Assignee Relationship	Spouse
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Premium	₹225.00	1000	

CB Details:-

SI. No.	sī(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00
72	87 M		38

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total:	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	50







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	42221108556459 & 26/11/2022
Amount Subject to Reverse	Charges-NIL		- 2

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.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

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Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER, IIND FLOOR SHIVAJI CHOWK, MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556462

PERIOD OF INSURANCE From 23:50 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MS LATA WERULKAR

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001. 442001 WARDHA MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : SATISH VINAYAKRAO RAUT

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 230210@uiic.co.in

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INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	230902422	22P108556462	Prev. Pol. No.			
Name Of Insured/ID	MS LATA W	4S LATA WERULKAR /23186775758				
Tel.(O)	2	Fax		Tel. (R)	Mobile	8999024397
Business/Occupation	Others	Att.	701	Email	gajudandade@gmail.c	om
Period of Insurance	From	23:50 Hrs of 26/11/2022	To	Midnight of 25/11/2023		con. v.

Coinsurance	UIIC 230210 : 100%
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Coverage Details:-			
Insured Name	Lata Werulkar	DOB	31/08/1974
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Previous Illness(If Any)		Remarks	
Assignee Name	Mr Rajesh Ingale	Assignee Relationship	Spouse
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Premium	₹225.00		
	TO HEROLOGICAL		

CB Details:-

SI. No.	SI(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total :	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:		Office GST No.:	27AAACU5552C1ZJ
SAC Code:	997133	Invoice No. & Date:	42221108556462 & 26/11/2022
Amount Subject to Reverse	Charges-NIL	Musikavakanoneesvano	MONITORIO ATRICCOTA CONTROCAMENTO

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.

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

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Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra





UNITED INDIA INSURANCE COMPANY LIMITED

SUNGUL TOWER, IIND FLOOR SHIVAJI CHOWK, MAIN ROAD, WARDHA - 442001 MAHARASHTRA PHONE: (7152) 243402 FAX: EMAIL:

INDIVIDUAL PERSONAL ACCIDENT POLICY POLICY NO.:2309024222P108556469

PERIOD OF INSURANCE From 23:52 Hrs of 26/11/2022 To Midnight of 25/11/2023

Insured

MR JITENDRA CHAUDHARY

AGNIHOTRI COLLEGE CAMPUS, BAPUJI WADI, SINDHI (MEGHE), WARDHA 442001. 442001 WARDHA MAHARASHTRA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

: SATISH VINAYAKRAO RAUT Agent Name

Agent Code : AGD0123797 Mobile/Landline Number/Email : 9890727463

The genuineness of the policy can be verified through "Verify Your Policy" link at www.ulic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 230210@niic.co.in

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INDIVIDUAL PERSONAL ACCIDENT POLICY SCHEDULE

Policy No.	230902422	22P108556469	Prev. Pol. No.			
Name Of Insured/ID	MR JITEND	RA CHAUDHARY /23186775532	7 70	80		
Tel.(0)	3	Fax		Tel. (R)	Mobile	8999024397
Business/Occupation	Others	Ø-	W	Email	gajudandade@gmail.c	om
Period of Insurance	From	23:52 Hrs of 26/11/2022	To	Midnight of 25/11/2023		

|--|

Coverage Details:-

Insured Name	Jitendra Chaudhary	DOB	23/10/1980
Address	Agnihotri College Campus, Bapuji Wadi, Sindhi (Meghe), Wardha 442001.	Profession	Others
Previous Illness(If Any)		Remarks	
Assignee Name	Aaradhana Chaudhari	Assignee Relationship	Spouse
Cover Opted	PADeathPTDTableII	SI	₹500,000.00
Premium	₹225.00		200

CB Details:-

SI. No.	SI(₹)	Percentage(%)	Amount(₹)
1	500,000.00	0	0.00

Net Premium:	₹	225.00
CGST(9%):	₹	20.00
SGST(9%):	₹	20.00
Stamp Duty:	₹	25.00
Total :	₹	265.00
Receipt Number :		
Receipt Date:		

Agency/Broker Code :	AGD0123797
Dev. Officer Code :	47363
Direct Business :	







Bapujiwadi, Ramnagar, Wardha 442001, Maharashtra

Customer GST/UIN No.:	(A	Office GST No.:	27AAACU5552C1ZJ		
SAC Code:	997133	Invoice No. & Date:	42221108556469 & 26/11/2022		
Amount Subject to Reverse Charges-NIL					

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.

Anti Money Laundering Clause: -In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

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Date of Proposal and Declaration: 26/11/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO WARDHA 230210 on this 26th day of November 2022 .

For and On behalf of United India Insurance Co. Ltd.

Duly Constituted Attorney(s)

Underwritten By - SATRAU001 (DIRECT AGENT)









