श्री विद्वल रूक्मिणी मंदिरे समिती, पंटरपूर

जिल्हा सोलापूर - ४१३ ३०४

दूरध्यनी क्र. : ०२१८६-२२४४६६/२२३५५०

भक्तनिवास क्र.: ०२१८६-२२८८८८

Website: www.vitthalrukminimandir.org, E-mail: eotemple@gmail.com

जावक क्र : आस्था/८१०



दिनांक: २४/०९/२०२५

सहअध्यक्ष

श्री. गहिनीनाथ लिलाबाई ज्ञानेश्वर महाराज (औसेकर)

सदस्य

आ.श्री. रामचंद्र धोंडाबाई शिवाजी कदम श्रीमती शकुंतला विमल विजयकुमार नडिगरे डॉ. दिनेशकुमार गिरजाबाई सदाशिव कदम श्री. भास्करगिरी सरुबाई गुरु किसनिगरी बाबा श्री. संभाजी पार्वती हिरालाल शिंदे श्री.ह.भ.प. ज्ञानेश्वर निलाबाई नामदेव देशमुख (जळगांवकर) अंड. माधवी सुमन श्रीरंग निगडे श्री.ह.भ.प. प्रकाश पार्वतीबाई रुस्तुमराव जवंजाळ श्री. भागवतभुषण अतुलशास्त्री कुमूद अशोकराव भगरे गुरुजी श्री.ह.भ.प. शिवाजीराव नलीनी सदाशिवराव मोरे

कार्यकारी अधिकारी

श्री. राजेंद्र चंद्रभागा गणपत शेळके उपजिल्हाधिकारी

व्यवस्थापक 🛝

श्री पृथ्वीराज शालन मारूती राऊत

लेखा अधिकारी

श्री. मुकेश इचरजबाई चंद्रकांत अनेचा

जाहिर दरपत्रक

विषय:- भाविकांची अपघात विमा पॉलीसी उतरविणेबाबत.

उपरोक्त विषयास अनुसरून, श्री. विष्ठल रूक्मिणीमातेच्या दर्शनासाठी आलेल्या भाविकांसाठी मंदिर समितीच्या वतीने अपघात विमा पॉलीसी उत्तरिवण्यात येत आहे. त्यासाठी शासनमान्य विमा कंपन्यांकडून विहित नमुन्यात दरपत्रके मार्गावण्यात येत आहे. त्यानुसार सदरकामी आपलेकडील दरपत्रक या कार्यालयास दि.१८/१०/२०२५ रोजी सायं.५.०० वाजेपर्यंत सिलबंद लिफाफ्यात सादर करावीत. दरपत्रके उिशरा अथवा अपूर्ण असल्यास विचारात घेतली जाणार नाहीत याची नोंद घ्यावी.

सदरबाबतची सर्व माहिती www.vitthalrukminimandir.org या संकेतस्थळावर उपलब्ध आहे.

> स्वा/-प्र. व्यवस्थापक, श्री विञ्ठल रूक्मिणी मंदिरे समिती, पंढरपुर, जि.सोलापुर.

श्री विञ्चल रूक्मिणी मंदिरे समिती, पंढरपूर. भाविकांसाठी अपघात विमा पॉलिसी

श्री.विञ्चल रूक्मिणी मातेच्या दर्शनासाठी येणा-या भाविकांसाठी मंदिरे समितीच्या वतीने अपघात विमा पॉलीसी उतरविण्यात येत आहे. त्याचा सविस्तर तपशिल खालीलप्रमाणे आहे.

- विमा क्षेत्र पंढरपूर नगरपालिका क्षेत्र, ६५ एकर जमीन क्षेत्र, श्री.विञ्ठल रूक्मिणी मंदिर व परिसर, दर्शनरांग, टाकळी, गोपाळपूर, भटुंबरे, शेगाव दु. व वाखरी पालखी तळ.
- विमा तपशिल -

अपघाताने मृत्यू झाल्यास.	२५भाविक×रू.२,००,०००/-	रू.५०,००,०००/-
अपघाताने दोन अवयव निकामी झाल्यास.	२५भाविक×रू.१,००,०००/-	रू.२५,००,०००/-
अपघाताने एक अवयव निकामी झाल्यास.	२५भाविक×रू.५०,०००/-	रू.१२,५०,०००/-
अपघाताचा दवाखाना खर्च	२५भाविक×रू.२५,०००/-	रू.६,२५,०००/-
	एकूण विमा रक्कम	रू.९३,७५,०००/-

विमा खर्च व त्यावर मयत भाविकांच्या वारसांना मिळालेल्या मदतीचा तपशिल —

	1					
अ.	सन	विमा प्रिमियम	विमा लाभ	मंजुर विमा	एकूण मंजुर	शेरा
क्र.		रक्कम	दिलेले एकूण	रक्कम प्रति	क्लेम रक्कम	
			भाविक	भाविक		
(१)	(5)	(3)	(8)	(५)	(ξ)	(७)
१	२०१५-२०१६	३५१०००	00	000000	000000	
२	२०१६-२०१७	३५१०००	०१	२०००००	२०००००	
3	२०१७-२०१८	३५४०००	०२	२०००००	800000	
8	२०१८-२०१९	३६५०००	०६	२०००००	१२०००००	
ч	२०१९-२०२०	900000	०३	२०००००	६०००००	
ξ	२०२०-२०२१	688000	00	000000	000000	
9	२०२१-२०२२	988000	०५	२०००००	१००००००	
۷	२०२२-२०२३	१०६२०००	०४	२०००००	٥٥٥٥٥٥	मंजुरीस्तव
						प्रलंबित.
9	२०२३-२०२४	१०६२०००	૦૫	२०००००	१००००००	मंजुरीस्तव
						प्रलंबित.
१०	२०२४-२०२५	११८००००	०४	२०००००	٥٥٥٥٥٥	मंजुरीस्तव
						प्रलंबित.
	एकूण	७३२१०००	३०	१६०००००	६००००००	

- विमा कालावधी :- एक वर्ष (दि.०६/११/२०२५ ते दि.०५/११/२०२६)
- अटी व शर्ती
 - १) नमूना दरपत्रक फॉर्म व माहिती मंदिर सिमतीच्या www.vitthalrukminimandir.org या संकेतस्थळावर उपलब्ध आहे. दरपत्रक फॉर्म स्वतंत्र लिफाप्यात सिलबंद करून दि.१८/१०/२०२५ रोजी सायं.५.०० पूर्वी सादर करणे आवश्यक आहे. लिफाप्यावर नाव, पूर्ण पत्ता, संपर्क क्रमांक आणि दरपत्रक भाविकांची अपघात विमा पॉलीसीसाठी भरलेले आहे, असा सविस्तर तपशिल नमुद करावा.
 - २) दरपत्रक समक्ष श्री.संत तुकाराम भवन येथे सादर करावेत किंवा रजिस्टर पोस्टाने पाठवावे. उशीरा आलेले दरपत्रक विचारात घेतले जाणार नाहीत.

- ३) दरपत्रकासोबत IRDAI License, Details of establishment and Experience, Pan Card, GST Certificate & Details of satisfactory performance report from their clients from Govt. / PSUs इ. कागदपत्रांच्या साक्षांकित प्रती सादर करणे आवश्यक आहे. अपूर्ण दरपत्रक स्विकारले जाणार नाही.
- ४) प्रशासकीय व अन्य कारणास्तव दरपत्रक प्रक्रिया कोणत्याही स्तरावर रद्द करण्याचा अधिकार मंदिर समितीने राखुन ठेवलेला आहे.
- ५) सदर कामासंबंधी काही वाद उद्भल्यास त्यासाठी न्यायालयीन कार्यक्षेत्र पंढरपूर हे राहील.
- भाविकांचा वयोगट :- ०५ ते ८० वर्षे.
- भाविकांची संख्या :- ०१ ते २५ भाविक.
- पॉलीसीचे स्वरूप :- आवश्यकतेनुसार तयार केलेली पॉलीसी.
- जोखीम स्वरूप :- अपघाती विमा.
- समावेश नसणारी जोखीम :-
 - आत्महत्या.
 - o जाणूनबजून केलेली दुखापत.
 - 🗅 बेकायदेशीर कृत्यामध्ये सहभागामुळे होणारी दुखापत / मृत्यू.
 - युध्द व युध्दजन्य परिस्थिती.
 - नैसर्गिक मृत्यू.
 - आजारपणामुळे मृत्यू.
- विमा संरक्षण रक्कम मागणीकामी आवश्यक कागदपत्रे.
 - o विहित नमुन्यातील अर्ज (मुळ प्रत).
 - डिस्चार्ज व्हावचर व एनईएफटी फॉर्म.
 - o कॅन्सल चेक.
 - 🔾 मुळ पंचनामा, जबाब, एफआयआर व इतर पोलीस अहवाल.
 - मुळ पोस्ट मार्टम रिपोर्ट.
 - o अंतिम लॅब रिपोर्ट (If Viscera is preserved).
 - मुळ मृत्यू दाखला.
 - मयताचे आधारकार्ड.
 - वारसाचे आधारकार्ड व पॅनकार्ड.
 - o विहित नमुन्यातील १०० रूपये स्टॅपपेपरवरील वारसाचे प्रतिज्ञापत्र (Legal Heir).
 - मंदिर सिमतीचा भाविक असल्याचा अहवाल.

प्रति,

मा. कार्यकारी अधिकारी, श्री विञ्ठल रूक्मिणी मंदिरे समिती, पंढरपूर, जि.सोलापूर.

विषय:- भाविकांची अपघात विमा पॉलीसी उतरविणेबाबत.

श्री.विञ्ठल रूक्मिणी मातेच्या दर्शनासाठी येणा-या भाविकांसाठी मंदिरे समितीच्या वतीने दि.०५/११/२०२५ ते दि.०४/११/२०२६ या कालावधीत अपघात विमा पॉलीसी उतरविण्यात येत आहे. त्यानुसार आमच्या शासन मान्य कंपनीच्या विमा हप्त्याची रक्कम सर्व करासहीत खालीलप्रमाणे सादर करीत आहे.

तर्पा	शल	विमा रक्कम रू.	विमा हप्ता रू. (अंकी व अक्षरी)
अपघाताने मृत्यू झाल्यास.	२५भाविक×रू.२,००,०००/-	रू.५०,००,०००/-	
अपघाताने दोन अवयव	२५भाविक×रू.१,००,०००/-	रू.२५,००,०००/-	
निकामी झाल्यास.			
अपघाताने एक अवयव	२५भाविक×रू.५०,०००/-	रू.१२,५०,०००/-	
निकामी झाल्यास.			
अपघाताचा दवाखाना खर्च.	२५भाविक×रू.२५,०००/-	रू.६,२५,०००/-	
	एकूण विमा रक्कम	रू.९३,७५,०००/-	

• क्षेत्र - पंढरपूर नगरपालिका क्षेत्र, ६५ एकर जमीन क्षेत्र, श्री.विट्ठल रूक्मिणी मंदिर व परिसर, दर्शनरांग, टाकळी, गोपाळपूर, भटुंबरे, शेगाव दु. व वाखरी पालखी तळ.

स्वाक्षरी :-

अधिका-याचे नाव व हृद्दा :-

कंपनीचे नाव व शिक्का :-

सोबत:-

- 1. IRDAI License.
- 2. Details of establishment and Experience.
- 3. Pan Card.
- 4. GST Certificate.
- 5. Details of satisfactory performance report from their clients from Govt. / PSUs.

दि न्यू इन्डिया एश्योरन्स कंपनी लि. THE NEW INDIA ASSURANCE CO. LTD. (Government of India Undertaking)



UIN NUMBER - IRDAN190P0003201314

Insured Name	:	KARYAKARI ADHIKARI SHRI VITTH	RDAN190P0003201314 AL RUKMINI MANDIR SA	MITTP	ANDHARPUR
		ured's Details		IBBUIL	Ig Office Details
Customer ID	_	POB8050067	Office Code	Tales :	THE NEW INDIA ASSURANCE CO. LTD. (151304)
Address	1:	PANDHARPUR, DIST. SOLAPUR PANDHARPUR ,MAHARASHTRA,	Address	:	FIRST FLOOR, ARIHANT PLAZA, NEAR GANDHI TVS SHOWROOM, SARGAM CHOWK, PANDHARPUR, DIST. SOLAPUR ,413304
Phone No	+-	413304 XXXXXX6069	Phone No	:	02186299520 / 02186299521
E-mail/Fax	_	eotemple@gmail.com, /	E-mail/Fax	:	nla.151304@newindia.co.in /
PAN No	_	AAETS8937J	S.Tax Regn. No	:	AAACN4165CST178
O.A.			GSTIN	:	27AAACN4165C3ZP
GSTIN/UIN	 - -	27AAETS8937J1ZS / NA	SAC	on the second	997133 (Accident and health insurance services)

, *		Police	y Details	_				
Policy Number	Τ.	15130442240100000254	Business Source Code					
Period of Insurance	:	From:06/11/2024 04:12:16 PM To: 05/11/2025 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF/POS/Web Aggregator	: 	INDIA POST PAYMENTS BANK LIMITED - (BN00001775)			
Date of Proposal	- :	06-Nov-24	Agent/Bancassurance/Spe cified Person/CPSC User	:	347-SOLAPUR BRANCH (SI00275066)			
Prev. Policy no.	1		Phone No	<u>:</u>	NA / NA /			
Client Type	1:	Non-Corporate	E-mail/Fax	<u> :</u>	contact@ippbonline.in, / / /			
Staff Discount	-+-	No	Type of Cover	:	NA			

	Premium:		GST:		Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
;	1,000,000	₹	180,000	₹	11,80,000	₹19	RUPEES ELEVEN LAC EIGHTY THOUSAND ONLY	1513048124000000 3086 - 11/11/24

Benefits under the Policy: FLEXI GPA

			100000	enents un	aci tila i o					
			Nui	mber of Pe	rsons			(**)		
SI. No	No of Person	Cadre	Sum Insured per person	Total Sum Insured	Risk Group	Excess	Medical Extensio n	War & A	Allled Cove	r opted
					- 1 × 4			Sum Insured	Country	Type of Period
1	25	NA	375000	9375000	NA	0	Yes	0	NA	NA

Table Details: (FLEXI GPA)

SI.No	SI.No Table A		Table B		Ta	ble C	Table D		
	Table A Sum Insured		Table B	Sum Insured	Table C	Sum Insured	Table D	Sum Insured	
1	No	0	Yes	75000	Yes	100000	Yes	200000	

SI.No	Special Conditions
1	Policy is Extended to include payment of Medical Expenses due to accident for admissible PA claim upto ₹ 25.000/- or actual medical expenses incurred whichever is less.
Risk Covered :	PA Policy for Devotees of Shri Vitthal Rukmini Mandir Samiti
Special Perils :	Maximum 25 persons covered for ₹ 2,00,000/- for Death due to Accident and ₹ 1,00,000/- for Loss of two limbs and ₹ 50,000/- for loss of one limb and ₹ 25,000/- for Medical expenses due to accident to devotees.

Pollcy No.: 15130442240100000254 Document generated by 37923 at 11/11/2024 16:16:32 Hours.

Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbal - 400 001, TOLL FREE No. 1 800 209 1415.

e-type 11.11

Middle State of your grievance, if any, you may approach any one of the following offices 1. Policy is uniformly office 2. Regional office 3. Head office. In case, you are not satisfied with our own note redressal mechanism; you may also approach insurance Ombudaman. For details of orfice addresses and addresses of office of insurance Ombudaman, please visit our website http://newindla.co.in.

प्रधान कार्यालय : दि न्यू इंडिया एश्योरन्स बिल्डींग, 87, महात्मा गांधी मार्ग, फोर्ट, मुंबई - 400 001.फोन : 022 - 22708100 / 22708400. CIN NO.L66000MH1919GOI000526 - GSTIN No. 27AAACN4165C3ZP - IRDA REGN.NO.190.Page 1 of 2



दि न्यू इन्डिया एश्योरन्स कंपनी लि. THE NEW INDIA ASSURANCE CO. LTD. उपक्रम" / "Government of India Undertaking"



Issuing Office

Address

ADJUSTMENT VOUCHER

: THE NEW INDIA ASSURANCE CO. LTD. (151304)

FIRST FLOOR, ARIHANT PLAZA, NEAR GANDHI TVS SHOWROOM, SARGAM CHOWK, PANDHARPUR, DIST. SOLAPUR

PANDHARPUR

Insured Pan Number

Phone

: AAETS8937J : 02186299520

Email Fax

: nia.151304@newindia.co.in

Collection Number

Collection Date

: 15130481240000003086 : 11/11/2024

Business Source Code PAN No of Payer

: BN00001775 : AAETS8937J

Received with thanks from KARYAKARI ADHIKARI SHRI VITTHAL RUKMINI MANDIR SAMITI PANDHARPUR.

The amount received/Adjusted is toward	s -		A/C Code	Sub A/C Code
Policy No.	A/C Description	Amount₹	T076 151304	CD0001999814
15130442240100000254	Cash Deposit Account-151304	1180000.00	50/6.131304	

Total = ₹ 1180000.00

Your Paym	ent/Adjustmen	t Details a	re as under -		D-wle	Drawee Branch	Reference No.	SCroll/BG/A
Mode	Amount ₹		Cheque Date		Drawee Bank		and the second	PD Balance
		No.	7 4 1 1			N.A.	1513042410009410	0.00
Advance	1180000.00	N.A.	N.A.	N.A.			\$ F. E.	
Premium Deposit		1 1						

Total = ₹ 1180000.00

NA

Date of Issue: 11/11/2024

Utilization details of the Collected Amount: Excess Amount Stamp Duty GST Premium 0 10.00 180000.00 1000000.00 Department Code Agency Name Agency Code SI no. 42 INDIA POST PAYMENTS BANK LIMITED

For The New India Assurance Company Limited





Cashier's Initial

Authorized Signatory

Note -

1.Please note the Policy Number, Collection Number and date in all future correspondence. .

2.NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

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 : 15130424P0003381

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

Signature valid

Policy No.: 15130442240100000254 Document generated by 37923 at 11/11/2024 16:16:32 Hours.

& Head Office: New India Assurance Bidg., 87 M.C. Road, Fort, Mumbal - 400 001. TOLL FREE No. 1 800 209 1415.

प्रधान कार्यालय : दि न्यू इंडिया एश्योरन्स बिर्ल्डींग, ८७, महात्मा गांधी मार्ग, फोर्ट, मुंबई - ४०० ००१.फोन : ०२२ - २२७०८१०० / २२७०८०० CIN NO.L66000MH1919GOI000526 - GSTIN No. 27AAACN4165C3ZP - IRDA REGN.NO.190 Page 1 of 2



THE NEW INDIA ASSURANCE TO (Government of India Undertaking) दि न्यू इन्डिया एश्योरन्स कंपनी लि. ा उपक्रम" / "Gove<u>rnme</u>nt of India Undertaking"

Special Exclusio	
n:	2.Suicide,Intentional Self Injury,Injury under Intoxication & Illegal act,War,Death due to Natural Reason and Illness are not covered.
Location	are not covered. 3.Age group covered from 5 to 80 years only.
Details :	Pandharpur Municipal Limits, 65 Acres Area,Temple Premises,Devotee Darshan Line,Takali,Gopalpur,Bhatumbare,Shegaon Dumale and Wakhari Palakhi Tal
Excess :	

Premlum and GST Details

	Rate of Tax	Amount In INR
Premlum		₹ 10,00,000
SGST		90000
CGST	Q see and	90000
IGST	0	0

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

Place:-Date:-

'जीआरएस् चलन जीआरएन् क्रं MH007426411202324M दिनांक 31/08/2023 अनुसार समाविष्ट स्टॅम्प फीस प्रदत्त तथा इस पॉलिसी के अंतर्गत शुल्क

For and on behalf of The New India Assurance Company Limited

Duly Constituted Attorney(s)

vide receipt

Mudrank number

Stamp Duty under the Policy is ₹

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: 15130424P0003381

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

Policy No.: 15130442240100000254 Document generated by 37923 at 11/11/2024 16:16:32 Hours.

Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbal - 400 001. TOLL FREE No. 1 800 209 1415. For redressal of 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

GPA - TAILOR MADE POLICY SCHEDULE

Policy No : 161900/48/2024/3549 Prev Policy No : 161900/48/2023/3613

Cover Note No : Cover Note Dt :

Insured Code : 73991846 Issue Office code : 161900

Insured's Name · KARYKARI ADHIKARI (GSTIN: 0) Issue Office Name: DO SHOLAPUR (GSTIN:

27AAACT0627R4ZW)

Address : SHRI VITTHAL RUKMINI MANDIR Address : 442, West Mangalwar Peth, SAMITI .

Opp. Telephone Bhavan, Solapur Ph. 0217-2326744, 2323645, 2320818

FAX 2326714 Solapur.

SHOLAPUR MAHARASHTRA 413304 MAHARASHTRA 413002

Tel /Fax /Email : / / 0 / eotemple@gmail.com Tel /Fax /Email : 0217-2323645,2326714 / 0217-2326714

/ 161900@orientalinsurance.co.in

Agent/Broker Details

Dev.Off.Code : NY0000000652

Agent/Broker : BA0000154216 YASHRAJ YASHRAJ PANDURANG KULKARNI

PANDURANG KULKARNI

A/P.& TAL.PANDHARPUR.

DIST.SOLAPUR

Address : PLOT NO.9, "GURUKRUPA " MUNICIPLE OFFICERS COLONY, RAILWAY LINES, SOLAPUR,

.. MAHARASHTRA -413001,SHOLAPUR,MAHARASHTRA,413001

Tel/Fax/Email : 7499282866//kyashraj2030@gmail.com

Period of Insurance: FROM 00:00 ON 01/11/2023 TO MIDNIGHT OF 31/10/2024

Collection No & Dt : DC_I_IND 3171007151 - 01/11/2023 GST INVOICE NO :272262757 UIN :0

Gross Premium : 9,00,000 Service Tax : 1,62,000 Stamp Duty : 200 Total : 10,62,000

Coinsurance Details: NIL

RISK DETAILS

Place:

Date: 26/10/2023





For and on behalf of The Oriental Insurance Company Limited

Authorised Signatory

All the Amount mentioned in this policy are in Indian Rupees

Page 1 of 3

Attached to and forming part of policy number 161900/48/2024/3549

Section: GPA - TAILOR MADE - UNNAMED

Number of Locations covered: 1

Total Sum Insured : 1,00,00,000
AOA Limit 93,75,000

Details of Insured Persons:

Loc ID.	Location Description	Nature of Risk	NO. OF. PERSONS	M.E %	Section	Sum Insured	Additional Covers
1	Accident to Devotees of	NormalRisk	25	25%	Table of benefits I	50,00,000	Medical Expenses
	Pandharpur in				Table of benefits II	50,00,000	Loading GPA Tailor Made -
	the area of Pandharpur Municipal limits, Wakhari, Gopalpur, Shegaon dumale, Takali, bhatumbare grampanchayat limits	of our limits, , akali, are				1,00,00,000	GPA Tallor Made - Basic

Term of Insurance: As per the Clauses written hereunder and/or attached herewith

In case of any single accident, the liability under this policy shall be restricted to the AOA Limit specified in the Schedule. In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac, the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operaing offices as well as Company's website.

Where Loading for Medical Extension cover is 25000/- PER PERSON the Policy is Extended to include payment of medical expenses due to accident upto 25000/- of the admissible PA claims amount or actual medical expenses incurred whichever is less.

Age group covered from 5 years to 80 year

Accident to devotees in the municipal limit of Pandharpur, Grampanchayat limit of wakhari, shegaon Dumale, Gopalpur,

Takal; Bhatumbare and 65 acres of developeed area for Devottees by Mandir Committe

NO LOCAL PERSONS ARE COVERED IN THE POLICY

Maximum 25 persons for Rs.200000/- Death due to Accident and Rs.100000/- Loss of two limbs and Rs.50000/- for loss of one limb and Rs.25000/-Medical expenses due to accident for devotees

AOA would be 20 lacs(10 persons x 2 lacs)

Devotee in accident will be certified by The VithalRukhmini Mandir Samitte, Pandharpu

Suicide, intentional self Injuries, injuries under influence ot intoxication and involving in illigal act, war and warlike situation are not covered

Excess: NIL

Place:

Date: 26/10/2023



For and on behalf of The Oriental Insurance Company Limited

Attached to and forming part of policy number 161900/48/2024/3549

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

In witness whereof the undersigned being authorised by and on behalf of the company has/have herein to set his/their hands at DO SHOLAPUR (GSTIN: 27AAACT0627R4ZW) on 26TH DAY OF OCTOBER 2023

For and on behalf of The Oriental Insurance Company Limited

Entered By : R.S.SAWANT

Examined By : R.A.GUJARAN

Authorised Signatory

Place:

Date: 26/10/2023





For and on behalf of The Oriental Insurance Company Limited

GPA - TAILOR MADE POLICY SCHEDULE

Policy No : 161900/48/2023/3613 Prev Policy No : 161900/48/2022/4089

Cover Note No : Cover Note Dt :

Insured Code : 73991846 Issue Office code : 161900

Insured's Name : KARYKARI ADHIKARI (GSTIN: 0) Issue Office Name : DO SHOLAPUR (GSTIN:

27AAACT0627R4ZW)

Address : SHRI VITTHAL RUKMINI MANDIR Address : 442, West Mangalwar Peth, SAMITI .

Opp. Telephone Bhavan, Solapur Ph. 0217-2326744, 2323645, 2320818

FAX 2326714 Solapur.

SHOLAPUR MAHARASHTRA 413304 MAHARASHTRA 413002

/ 161900@orientalinsurance.co.in

Agent/Broker Details

Dev.Off.Code : NA0000004142

Agent/Broker : BA0000054896 BHARAT J BHARAT J FULARI

A/P.& TAL.PANDHARPUR.

DIST.SOLAPUR

FULARI

Address: 337,SOUTH KASABA, SOLAPUR.,SHOLAPUR,MAHARASHTRA,413001

Tel/Fax/Email : 0//pbkulkarnisol@bsnl.ir

Period of Insurance: FROM 00:00 ON 01/11/2022 TO MIDNIGHT OF 31/10/2023

Collection No & Dt : DC_I_IND 3171007206 - 01/11/2022 GST INVOICE NO :2721490907 UIN :0

Gross Premium : 9,00,000 Service Tax : 1,62,000 Stamp Duty : 200 Total : 10,62,000

Coinsurance Details: NIL

RISK DETAILS

Place:

Date: 01/11/2022





For and on behalf of

The Oriental Insurance Company Limited

Authorised Signatory

All the Amount mentioned in this policy are in Indian Rupees

Page 1 of 3

Attached to and forming part of policy number 161900/48/2023/3613

Section : GPA - TAILOR MADE - UNNAMED

Number of Locations covered: 1

Total Sum Insured : 10,00,00,00 AOA Limit : 93,75,000

Details of Insured Persons:

Loc ID.	Location Description	Nature of Risk	NO. OF. PERSONS	M.E %	Section	Sum Insured	Additional Covers
1	Accident to NormalRisk	25 25%	Table of benefits I	5,00,00,00	Medical Expenses		
	Devotees of Pandharpur in				Table of benefits II	5,00,00,00	Loading
	the area of Pandharpur Municipal limits, Wakhari, Gopalpur, Shegaon dumale, Takali, bhatumbare grampanchayat limits	r mits, kali,				10,00,00,00	GPA Tailor Made - Basic

Term of Insurance: As per the Clauses written hereunder and/or attached herewith

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Age group covered from 5 years to 80 year

Accident to devotees in the municipal limit of Pandharpur, Grampanchayat limit of wakhari, shegaon Dumale, Gopalpur,

Takal; Bhatumbare and 65 acres of developeed area for Devottees by Mandir Committe

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Maximum 25 persons for Rs.200000/- Death due to Accident and Rs.100000/- Loss of two limbs and Rs.50000/- for loss of one limb and Rs.25000/-Medical expenses due to accident for devotees

AOA would be 20 lacs(10 persons x 2 lacs)

Devotee in accident will be certified by The VithalRukhmini Mandir Samitte, Pandharpu

Suicide, intentional self Injuries, injuries under influence ot intoxication and involving in illigal act, war and warlike situation are not covered

Excess: NIL

Place:

Date: 01/11/2022





For and on behalf of The Oriental Insurance Company Limited

Attached to and forming part of policy number 161900/48/2023/3613

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

In witness whereof the undersigned being authorised by and on behalf of the company has/have herein to set his/their hands at DO SHOLAPUR (GSTIN: 27AAACT0627R4ZW) on 01ST DAY OF NOVEMBER 2022

For and on behalf of The Oriental Insurance Company Limited

Entered By : R.S.SAWANT

Examined By : R.A.GUJARAN

Authorised Signatory

Place:

Date: 01/11/2022





For and on behalf of The Oriental Insurance Company Limited