



Personal Accident Insurance ()
UIN NUMBER - IRDAN190P0003201314

Insured Name		: SANSKRUTI COLLEGE OF PHARMACY	
Insured's Details		Issuing Office Details	
Customer ID	: PO96737140	Office Code	: L B NAGAR DO (613700)
Address	: KONDAPUR(V),GHATKESAR(M),MED CHAL(D) Hyderabad ,TELANGANA, 501301	Address	: D.NO:3-11-21, 1 FLOOR, ANJALI ARCADE, SY.NO:64, LAKSHMINAGAR COLONY, LB NAGAR - UPPAL MAIN ROAD NEAR KAMINENI HOSPITAL HYDERABAD - 500074 ,500074
Phone No	:	Phone No	: 04024122462
E-mail/Fax	: /	E-mail/Fax	: nia.613700@newindia.co.in /
PAN No	:	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: NA / NA	GSTIN	: 36AAACN4165C3ZQ
		SAC	: 997133 (Accident and health insurance services)

Policy Details

Policy Number	: 61370042220100000025	Business Source Code	
Period of Insurance	: From:29/04/2022 01:47:17 PM To: 28/04/2023 11:59:59 PM	Dev.Off level./Broker/Corp. Agent/IMF/POS/Web Aggregator	: CH SYAM BABU - (2D4196647)
Date of Proposal	: 29-Apr-22	Agent/Bancassurance/Specialized Person/CPSC User	: C RAM BABU (NIA2D4196217) AGENT SITE 51558 (2D4223283)
Prev. Policy no.	:	Phone No	:
Client Type	: Non-Corporate	E-mail/Fax	: / / /
Staff Discount	: No	Type of Cover	: 24 hours Cover required

Premium:	GST:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
₹ 2160	₹ 388	₹ 2548	₹5	RUPEES TWO THOUSAND FIVE HUNDRED FORTY-EIGHT ONLY	6137008122000000 0335 - 29/04/22

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 Extension	War & Allied Cover opted		
										Sum Insured	Country	Type of Period
1	1	Adimula Rajendra prasad	33	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
2	2	Purma Aravinda Reddy	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
3	3	NEELA RAJASHEKAR	28	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
4	4	Kalakota Chaitanya prasad	31	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
5	5	Kathula umadevi	30	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
6	6	SUDHAKAR BOLLEDDU	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
7	7	Ravula mounika	28	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA

Signature Not Verified

Digitally signed by SRINIVASAN VAIDESWARAN Date: 2022.04.29

Policy No. : 61370042220100000025 Document generated by 37714 at 28/04/2022 15:53:21 hours.
Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 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. If 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://newindia.co.in>.

Principal
SANSKRUTI COLLEGE OF PHARMACY
KONDAPUR (V), GHATKESAR (M), MEDICAL CHAL (D)
HYDERABAD DISTRICT



8	8	SHAPUR AM TEJASRE E	31	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
9	9	Kalate . Radhika	38	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
10	10	USHASRI KALIVETI	35	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
11	11	Ganta Jyothsna	31	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
12	12	CHILUKU RI SUSHMA	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
13	13	Teki mercy Florence	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
14	14	Gariganti Swathi	31	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
15	15	Pochara m	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
16	16	Konduru Anand kumar	35	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
17	17	Thumku nta Sudhaka r	34	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
18	18	DIRSHAN APU RATHNA SREE	31	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
19	19	Aditya mathur	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
20	20	G Sowjanya	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
21	21	Pasala mary	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
22	22	Vijaya axmi T	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
23	23	G.Anitha mma	41	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
24	24	Pedapalli Prathyus ha	23	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
25	25	Amtul Muqet Rafia	27	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
26	26	Noureen	23	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
27	27	R. Madhulik a	29	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
28	28	RAVIKUM AR VEJENDL A	48	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
29	29	Shivapra sad. M	33	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
30	30	Smitha Madhuri	33	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
31	31	Nevuri sravya	28	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
32	32	SANALA KIRAN	33	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA

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Principal
College of Pharmacy
Kondapur, Dist. Nalgonda
Mehthal Dist. Nalgonda

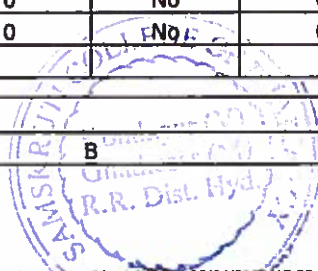


33	33	KANDAL A NEELA MANEES HA	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
34	34	TONDA SWATHI	122	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
35	35	Shiva Srikrishna	41	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA
36	36	Yella Sirisha	35	STAFF	Self	Risk Group I	NA	100000	No	0	NA	NA

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	No	0	No	0	No	0	Yes	100000
2	No	0	No	0	No	0	Yes	100000
3	No	0	No	0	No	0	Yes	100000
4	No	0	No	0	No	0	Yes	100000
5	No	0	No	0	No	0	Yes	100000
6	No	0	No	0	No	0	Yes	100000
7	No	0	No	0	No	0	Yes	100000
8	No	0	No	0	No	0	Yes	100000
9	No	0	No	0	No	0	Yes	100000
10	No	0	No	0	No	0	Yes	100000
11	No	0	No	0	No	0	Yes	100000
12	No	0	No	0	No	0	Yes	100000
13	No	0	No	0	No	0	Yes	100000
14	No	0	No	0	No	0	Yes	100000
15	No	0	No	0	No	0	Yes	100000
16	No	0	No	0	No	0	Yes	100000
17	No	0	No	0	No	0	Yes	100000
18	No	0	No	0	No	0	Yes	100000
19	No	0	No	0	No	0	Yes	100000
20	No	0	No	0	No	0	Yes	100000
21	No	0	No	0	No	0	Yes	100000
22	No	0	No	0	No	0	Yes	100000
23	No	0	No	0	No	0	Yes	100000
24	No	0	No	0	No	0	Yes	100000
25	No	0	No	0	No	0	Yes	100000
26	No	0	No	0	No	0	Yes	100000
27	No	0	No	0	No	0	Yes	100000
28	No	0	No	0	No	0	Yes	100000
29	No	0	No	0	No	0	Yes	100000
30	No	0	No	0	No	0	Yes	100000
31	No	0	No	0	No	0	Yes	100000
32	No	0	No	0	No	0	Yes	100000
33	No	0	No	0	No	0	Yes	100000
34	No	0	No	0	No	0	Yes	100000
35	No	0	No	0	No	0	Yes	100000
36	No	0	No	0	No	0	Yes	100000
37								

Sl.No	Special Conditions
1	



Handwritten signature
Principal
Sanskriti College of Pharmacy
Chatkesar (M.S.)
Medchal Dist. 500001

Policy No. : 6137004222010000025 Document generated by 37714 at 29/04/2022 15:53:21 Hours.

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Sl.No	Special Conditions
2	B
3	B
4	B
5	B
6	B
7	B
8	B
9	B
10	B
11	B
12	B
13	B
14	B
15	B
16	B
17	B
18	B
19	B
20	B
21	B
22	B
23	B
24	B
25	B
26	B
27	B
28	B
29	B
30	B
31	B
32	B
33	B
34	B
35	B
36	B
37	

Premium and GST Details

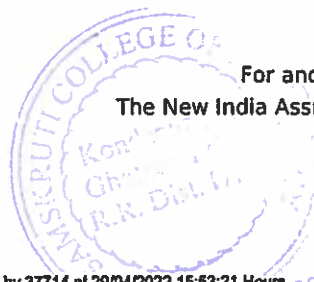
	Rate of Tax	Amount in INR
Premium		₹ 2160.00
SGST	9	194
CGST	9	194
IGST	0	0

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

Place:-

Date:-

For and on behalf of
The New India Assurance Company Limited



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Duly Constituted Attorney(s)

Mudrank _____ Dt. _____ consolidated Stamp Fees Paid by Pay Order Number _____ vide receipt
number _____ dt. _____.

Stamp Duty under the Policy is ₹

Tax Invoice No : 61370022P0000716

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C



[Handwritten Signature]
Samskrit
Kondapur (V), Ulhasnagar, P.
Medchal Dist. PIN: 410401