



POLICY SCHEDULE FOR PUBLIC LIABILITY (Act Only) INSURANCE

Insured's Name	: SRIKAR LABORATORIES PVT LTD		
Insured's Details		Issuing Office Details	
Customer ID	: PO28081048	Office Code	: HYDERABAD LCBO 960000 (960000)
Address	: PLOT NO:32/A, JN PHARMA CITY, PARWADA, VISHAKAPATNAM VISA KHAPATNAM ,ANDHRA PRADESH, 530002	Address	: LARGE CORPORATE AND BROKERS OFFICE, 104, 2ND FLOOR, SURYA TOWERS, S.P.ROAD, SECUNDERABAD ,500003
Phone No	: 9848984842	Phone No	: 4027810300 / 4027810302 / 4027810300
E-mail/Fax	: accounts@srikarlabs.com, mail@teloshyd.com /	E-mail/Fax	: lcohydro@newindia.co.in /
PAN No	: AAQCS3754A	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: 37AAQCS3754A1Z8 / NA	GSTIN	: 36AAACN4165C3ZQ
		SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details			
Policy Number	: 96000036203300000011	Business Source Code	
Period of Insurance	: From: 18/06/2020 12:00:01 AM To: 17/06/2021 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator	: ATLAS INSURANCE BROKERS PVT. LTD. - (BR00000191) SITE_ATLAS_613000 (SI00086520)
Date of Proposal	: 18-Jun-20	Agent/Bancassurance/ Specified Person	
Prev. Policy no.	: 96000036193300000010	Phone No	: 27667768, / NA
Client Type	: Non-Corporate	E-mail/Fax	: atlasinsurancehyd@gmail.com, / / /

Premium(₹)	ERF Premium(₹)	GST(₹)	Total (₹)	Total (₹ in words)	Receipt No. & Date
22102	22102	3978	48182	RUPEES FORTY-EIGHT THOUSAND ONE HUNDRED EIGHTY-TWO ONLY	960000812000000122 6 - 17/06/20

Details of risk covered under current year policy:

Retroactive Date	Paid Up Capital	No Of Locations Involved	AOA	AOA:AOY	AOY	Annual Turnover - Previous Year	Annual Turnover - Proposed Year	Deductibles No of workmen	No of Other Employee
17/06/2014	<= 15 Crore	1	30000000	1:3	90000000	40000000	40000000	125	15

Retroactive Dates

Retroactive Date Details	Date	Paid Up Capital	No Of Locations Involved	AOA	AOA:AOY	AOY	Annual Turnover - Previous Year	Annual Turnover - Proposed Year	Deductibles No of workmen	No of Other Employee
RETROACTIVE DATE 1	17/06/2014	15	1	3000000	1.3	9000000	4000000	4000000	125	15

Extensions under the Policy

Name of the Extension	Sub Limit of the Extension	Deductibles of the Extension
Special Conditions	AS PER PLI ACT POLICY FACTORY SITUATED AT PLOT NO 32A, JAWAHAR PHARMA CITY, PARWADA MDL., VIZAG 531019.	
Special Exclusions	NA	



Special Excess/Deductible	0
Retroactive Dates	Date
Policy Retroactive Date	17/06/2014

The policy shall be subject to the rules framed under the Public Liability Act 1991 and subsequent amendments from time to time.

The Policy shall be subject to PUBLIC LIABILITY (Act Only) INSURANCE Policy clauses attached herewith.

Clauses	Description	
Premium and GST Details		
	Rate of Tax	Amount in INR
Premium		₹ 44204.00
SGST	0	0
CGST	0	0
IGST	18	3978

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 22nd day of June,2020.

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 22/06/2020

Duly Constituted Attorney(s)

Stamp Duty under the Policy is ₹1

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

Tax Invoice No : 96000020E0001569

IRDA Registration Number: 190