

4.4.2 There are Established Systems and procedures for Maintaining and Utilizing Physical, Academic and support Facilities –Laboratory, Library, Sports Complex, Computers, Classrooms, etc.

Insurance

Standard Fire & Special Perils Policy (Material Damage), POLICY SCHEDULE FOR STUDENTS SAFETY PACKAGE

2018 - 19



2018-19

STANDARD FIRE & SPECIAL PERILS POLICY

1. Insured's Details :

Insured Name	:	PRINCIPAL, SH.COLLEGE
Customer ID	:	PO62667925
Address	:	THEVARA THEVARA ,KERALA, 682013
Phone No.	:	
E-mail Id/Fax	:	/
PAN No.	:	
GSTIN/UIN.	:	NA / NA

2. Issuing Office Details :

Office Name	:	ALUVA D.O. (760400)
Office Code	:	760400
Address	:	KODUVATH SHOPPING COMPLEX SUB JAIL ROAD 683101 KERALA , 683101.
Phone No.	:	04842626117 / 04842629747
E-mail Id/Fax	:	nia.760400@newindia.co.in / 0484-2623056
S.Tax Regn. No.	:	AAACN4165CST178
GSTIN	:	32AAACN4165C4ZX
SAC	:	997139 (Other non-life insurance services excl RI)

3. Policy Details :

Policy Number	:	76040011180100000113
Period of Insurance	:	From: 31/08/2018 03:48:23 PM To: 30/08/2019 11:59:59 PM
Date of Proposal	:	31-Aug-18
Prev. Policy no.	:	
Client Type	:	Non-Corporate
Business Source Code	:	
Dev.Off level./Broker	:	G Z PUTHENPEEDIKA - (AO4907461)
Agent/Bancassurance/SPECIFIED PERSON	:	Mrs. LYSSY VARGHESE (NIAAG00078578) LYSSY VARGHESE (SI00126599)
Phone No.	:	9847632528 / NA
E-mail Id/Fax	:	lycyvarghesekozhikkadan@gmail.com, / / /

4. Collection Particulars :

Premium	:	44166
GST	:	7950
Total (₹)	:	52116
Receipt No. & Date	:	76040081180000008844 - 31/08/18

5. Policy Level Covers :

Description of Property	:	As per Block Details
Location Address with Pin Code	:	As per Block Details
Risk Description	:	As per Block Details
Risk Code	:	As per Block Details
STFI Deletion	:	NO

Signature Not
Verified
Digitally signed
by Srinivasan
Vaidyanathan
Date: 2018.09.01

Policy No. : 76040011180100000113 Document generated by MAGMABATCH on 01/09/2018 02:05:32 Hours.
Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 20 14 14



Johnson X Palackappillil

Dr. Johnson X Palackappillil
Principal
Sacred Heart College (Autonomous)
Thevara, Kochi-682 013



RSMD Deletion	:	NO
Sum Insured	:	₹ 165107565

6. Block Details :

Risk Code	:	2
Location Address with Pin Code	:	S.H. ROAD, THEVARA, KL1108, THEVARA, KL, KERALA, INDIA, 682013.
Description of Property	:	ON BUILDING INCLUDING COMPOUND WALL, FURNITURES, FIXTURES, FITTINGS, INCL.GENERATOR, COMPUTERS, TV, ELE.FITTINGS ETC, Solar, Tress work

(a) Block:

Name of Block: SACRED HEART COLLEGE, THEVARA BUILDING INCL.COMPOUND WALL			
Sl. No.	Asset Description		Sum Insured (₹)
1.	On Building - Superstructure <i>including Tress work</i>	:	141871800
2.	On Building - Plinth & Foundations	:	0
3.	On Plant, Machinery and accessories	:	3000000
4.	On Furniture, Fittings, Fixtures and other Contents	:	20235765
5.	On Stocks and stocks in process	:	0
6.	On Stock held in trust	:	0
7.	Others (To Specify)	:	NA
	Total Sum Insured	:	165107565

7. Sum Insured Summary :

Sl. No.	Asset Description		Sum Insured (₹)
1.	Building - Superstructure	:	141871800
2.	Building- Plinth & Foundations	:	0
3.	Plant, Machinery and accessories	:	3000000
4.	Furniture, Fittings, Fixtures and other Contents	:	20235765
5.	Stocks and stocks in process	:	0
6.	Stock held in trust	:	0
7.	Compound Wall	:	0
8.	Other property specifically required to be covered	:	
	Total Sum Insured	:	165107565

8. Add on Covers Opted :

Sl. No.	Add on Cover		Sum Insured (₹)
1	Earthquake (Fire and Shock) (Add On 1009)	:	165107565

9. Terrorism :

Terrorism Covered	:	N (No)
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10. Hypothecation Details :

Sl.No.	Name of the Financiers
1	NOT OPTED





11. Coinsurance Details :

Sl.No.	Coinsurance Type	Company	Office Code	% Share	Premium Share
1	NOT OPTED				

12. Subjectivities :

The insurance under this policy is subject to

Warranties	:	N/A
Endorsements	:	Endorsement9 - Earthquake (Fire and Shock),
Clauses	:	Clause3 - Designation of property clause,
Special Conditions	:	NA
Risk Covered	:	As per Risk covered attached
Fire Products-Exclusions	:	As per Exclusions attached

13. Deductibles :

(a) Compulsory:-

- Sum Insured upto ₹10 Cr per location:
5% of the claim amount subject to a minimum of ₹ 10,000/- each and every loss.
- Sum Insured above ₹10 Cr per upto ₹ 100Cr per location:
5% of the claim amount subject to a minimum of ₹ 25,000/- each and every loss.
- Sum Insured above ₹100 Cr per upto ₹ 1500Cr per location:
5% of the claim amount subject to a minimum of ₹ 5,00,000/- each and every loss.
- Sum Insured above ₹1500 Cr per upto ₹ 2500Cr per location:
5% of the claim amount subject to a minimum of ₹ 25,00,000/- each and every loss.
- Sum Insured above ₹2500 Cr per location:
5% of the claim amount subject to a minimum of ₹ 50,00,000/- each and every loss.

(b) Voluntary / Imposed:-

Not Applicable

(c) Terrorism Deductibles:-

Nature of Risk	Deductibles (as a % of claim/loss amount)	Minimum Limit	Maximum Limit
Shops and Residential	1 % of claim amount	₹ 10,000/-	₹ 5,00,000/- (Rupees 5 Lacs)
Non Industrial	1 % of claim amount	₹ 25,000/-	₹ 10,00,000/- (Rupees 10 Lacs)
Industrial	5 % of claim amount	₹ 1,00,000/-	₹ 25,00,000/- (Rupees 25 Lacs)

14. Premium Details :

Premium Head	Premium Amount (₹)
Premium for Terrorism Cover	:
Net Premium under the policy	:
GST	44166
Total premium including GST	7950
Total premium including GST(In words)	52116
	: RUPEES FIFTY-TWO THOUSAND ONE HUNDRED SIXTEEN ONLY

Premium and GST Details

Rate of Tax

Amount in INR



THE NEW INDIA ASSURANCE CO. LTD.
(Government of India Undertaking)



Premium		₹ 44166.00
SGST	9	3975
CGST	9	3975
IGST	0	0

In witness whereof the undersigned being duly authorized by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 01st day of September, 2018.

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 01/09/2018

Duly Constituted Attorney(s)

Tax Invoice No : 7604001101000113

IRDA Registration Number: 190

Dr. Johnson X Palackappillil
Principal
Sacred Heart College (Autonomous)
Thevara, Kochi-682 013





POLICY SCHEDULE FOR STUDENTS SAFETY PACKAGE INSURANCE

Insured's Name : THE PRINCIPAL SACRED HEART COLLEGE THEVARA			
Insured's Details		Issuing Office Details	
Customer ID	: PO61553785	Office Code	: ALUVA D.O. (760400)
Address	: THE PRINCIPAL, SACRED HEART COLLEGE THEVARA, ERNAKULAM THEVARA, KERALA, 682013	Address	: KODUVATH SHOPPING COMPLEX SUB JAIL ROAD, 683101
Phone No	:	Phone No	: 04842626117 / 04842629747
E-mail/Fax	: /	E-mail/Fax	: nia.760400@newindia.co.in / 0484-2623056
PAN No	:	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIN	: NA / NA	GSTIN	: 32AAACN4165C4ZX
	:	SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details			
Policy Number	: 76040048182300000008	Business Source Code	
Period of Insurance	: From: 17/07/2018 02:44:45 PM To: 16/07/2019 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent	: G Z PUTHENPEEDIKA - (AO4907461)
Date of Proposal	: 17-Jul-18	Agent/Bancassurance	: Mrs. LYSSY VARGHESE (NIAAG00078578) LYSSY VARGHESE (SI00126599)
Prev. Policy no.	: PU0	Phone No	: 9847632528 / NA
Client Type	: Non-Corporate	E-mail/Fax	: lcyvarghesekozhikkadan@gmail.com, / /

Premium(₹)	GST(₹)	Total (₹)	Total (₹ in words)	Receipt No. & Date
72976	13136	86112	RUPEES EIGHTY-SIX THOUSAND ONE HUNDRED TWELVE ONLY	7604008118000000620 1 - 17/07/18

No of Students	936	Medical Expenses per student (Inclusive of OPD)	25000
Limit per student	100000	Special conditions	936 STUDENTS ARE COVERED. ACCIDENTAL DEATH&PTD 1LAKH PER STUDENT, ACCIDENTAL DEATH FOR FIRST EARNING PARENT 2 LAKH, ACCIDENTAL HOSPITALISATION EXPENSES PER STUDENT 25000/
Limit per accident	25000		

No of parents	0		
Total SI of Parents or Guardian for payment of Tuition and Hostel fees	0	Payment of tuition and hostel fee for remaining semesters in the students account with the institute in case the Parent/Guardian dies due to accident	0

This policy shall be subject to STUDENTS SAFETY PACKAGE INSURANCE policy clauses attached herewith..

Premium and GST Details

Premium

Rate of Tax

Amount in INR

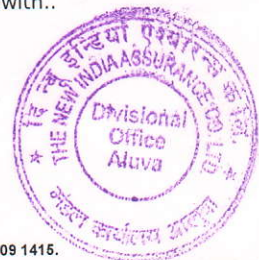
₹ 72976.00

Signature Not Verified

Digitally signed by Srinivasan Valdeswaran
Date: 2018.07.17

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 www.newindia.co.in.

Dr. Johnson X Palackappillil
Principal
Sacred Heart College (Autonomous)
Thevara, Kochi-682 013





SGST
CGST
IGST

9
9
0

6568
6568
0

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 17th day of July, 2018.

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 17/07/2018

Duly Constituted Attorney(s)

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

सी. लता / C. LATHA

प्रशासनिक अधिकारी / ADMN. OFFICER

एस.आर.नं/ S.R. No.22007

दि न्यू इंडिया एश्यरिज कंपनी लिमिटेड

NEW INDIA ASSURANCE COMPANY LTD.

आलुवा मं.का / ALUVA DO.

Tax Invoice No : 7604004823000008

IRDA Registration Number: 190



Dr. Johnson X Palackappillil
Principal
Sacred Heart College (Autonomous)
Thevara, Kochi-682 013



Policy No. : 76040048182300000008 Document generated by 17893 at 17/07/2018 15:03:52 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. 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://newindia.co.in>.



COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office : ALUVA D.O. (760400)
Address : KODUVATH SHOPPING COMPLEX
SUB JAIL ROAD
683101
ALUVA
Phone : 04842626117
Email : nia.760400@newindia.co.in
Fax : 0484-2623056
Collection Number : 76040081180000006201
Collection Date : 17/07/2018
Business Source Code : 1D4907461
PAN No of Payer :

Received with thanks from THE PRINCIPAL SACRED HEART COLLEGE THEVARA.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount	A/C Code	Sub A/C Code
76040048182300000008	Bank-760400	86112.00	9100.760400	BA00014635-760400-9100

Total = ` 86112.00

Your Payment/Adjustment Details are as under -

Mode	Amount	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Cheque	86112.00	831680	17-JUL-18	SOUTH INDIAN BANK	THEVARA	7604001810013354	N.A.

Total = ` 86112.00

Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
72976.00	13136.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NIAAG00078578	LYSSY VARGHESE	48

For The New India Assurance Company Limited

Revenue Stamp

Date of Issue: 17/07/2018

Cashier's Initial

Authorized Signatory

Note -

1. Please note the Policy Number, Collection Number and date in all future correspondence. This Receipt is subject to Realisation of Cheque..
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.

Tax Invoice No : 7604004823000008

IRDA Registration Number: 190

Signature Not
Verified
Digitally signed
by Srinivasan
Vaideswaran
Date: 2018.07.17
15:03:52 +05'30'



Dr. Johnson X Palackappillil
Principal
Sacred Heart College (Autonomous)
Thevara, Kochi-682 013



Policy No. : 76040048182300000008 Document generated by 17893 at 17/07/2018 15:03:52 Hours.

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