





GROUP JANATA PERSONAL ACCIDENT INSURANCE POLICY

UIN NUMBER - IRDA/NL-HLT/NIA/P-P/V.J/56/14-15

Insured's Name	:	CUTTACK CENTRAL CO-OPERATI	VE BANK LTD.				
Insured's Details			Issuing Office Details				
Customer ID		POB3549734	Office Code		CUTTACK BO (550401)		
Address	:	NIMCHOURI, PLOT NO. 1724, KHATA NO. 435/165, CUTTACK CUTTACK ,ODISHA, 753002	Address	:	LINK ROAD, OPP. ARUNODAYA MARKET ,CUTTACK ,753012		
Phone No		XXXXXX3133	Phone No		6712310225 / 6712335042		
E-mail/Fax	:	ritesh.pattanaik@saferisk.in, development@cuttackccb.co.in /	E-mail/Fax	:	nia.550401@newindia.co.in / 6712332070		
PAN No		AAABC0373Q	S.Tax Regn. No	:	AAACN4165CST178		
GSTIN/UIN		21AAABC0373Q1ZT / NA	GSTIN	:	21AAACN4165C2Z2		
OGTHVOH			SAC		997133 (Accident and health insurance services)		

		Poli	cy Details			
Policy Number	:	55040142247600000001	Business Source Code			
Period of Insurance	:	From:01/04/2024 12:00:01 AM To: 31/03/2025 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User	:	Saferisk Insurance Brokers Private Ltd - (BR00000223) Saferisk Broker-550401 - (Sl00268490),	
Date of Proposal	:	01-Apr-24	Agent/Bancassurance/Spe cified Person	:	a, a Å	
Prev. Policy no.			Phone No	:	7894414200 / NA	
Client Type	1	Non-Corporate	E-mail/Fax	:	shwetabh@saferisk.in, sumeetmohanty@saferisk.in / /	

emium GST	Total(RS)	Receipt No. & Date
2,043,471 0	20,43,471	55040181230000013474 - 31/03/24

POLICY SCHEDULE

Sr. No.	Number of insured persons	Geographica I area	Description of persons covered	Age Group	SI per person	Assignment details	Name of Owner/Benefic iary
1	339447	NA	Policy covers Kisa n Credit Card Hold ers of the Bank on Unnamed Basis who will avail short term crop loan dur ing Kharif-2024 an d Rabi 2024-25 alo ng with other Vari ants.	NA	100000	NA	NA .

Special Conditions: Death or any Permanent Disablement due to Snake Bite/Animal Bite/Lightning covered. Midterm addition of members on Pro-Rata Basis subject to availability of sufficient CD/APD account balance. Subject to Janata Personal Accident Insurance Policy Clause as attached hereto.

NOTE: WARRANTED THAT IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO'. विषये विषये

Signature Not Verified Policy No.: 5504014224760000001Document generated by 35633 at 31/03/2024 15:36:12 Hours. Regd. & Head Office: New India Assurance Bidg., 87 M.G. Road, Fort, Mumbal - 400 001. TOLL FREE No. 1 800 209 1415. Date: 2024.03.31
Fo5radic Lat 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 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 v http://newindla.co.in.

ASSURANCECO

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





COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office

: CUTTACK BO (550401)

Address

LINK ROAD, OPP, ARUNODAYA MARKET, CUTTACK

,753012 CUTTACK

Insured Pan Number

: AAABC0373Q : 6712310225

Phone

: nia.550401@newindia.co.in

Email Fax

: 6712332070

Collection Number

: 55040181230000013474

Collection Date

: 31/03/2024

Business Source Code

: BR00000223

PAN No of Payer

: AAABC0373Q

Received with thanks from CUTTACK CENTRAL CO-OPERATIVE BANK LTD...

mount received/Adjusted is toward	ds -		AJC Code	Sub A/C Code
Policy No.	A/C Description	Amount₹	A/C Code	BA00008632-550401-9100
55040142247600000001	Bank-550401	2043471.00	9100.550401	TH TO COLOR

Total = ₹ 2043471.00

Your Paym	ent/Adjustmen		re as under -	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Mode	Amount ₹	Cheque No.	Cheque Date	MACON 10040-00	CUTTACK	5504012410001076	N.A.
RTGS	2043471.00	394262	30-MAR-24	CUTTACK CENTRAL CO-OPERATIVE BANK LTD.	COTTACK	350.02	

Total = ₹ 2043471.00

Premium GST Stemp = 9 0 2043471.00 0.00 0.00 Department Code 2043471.00 Agency Name 42	Jtilization details of the Co	llected Amount :	Stamp Duty	Excess Amount
Agency Name	NAME OF TAXABLE PARTY O			Department Code
ST no. Agency code	SI no. Agency Co	de	Agency Name SAFERISK INSURANCE BROKERS PRIVATE LTD	

For The New India Assurance Company Limited

Revenue Stamp

POIST, BR. LIV जिला शास्त्र

Date of Issue: 31/03/2024

Cashier's Initial

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 : 55040123P0012766

IRDA Registration Number: 190 NIA PAN NUMBER: AAACN4165C

Policy No.: 55040142247600000001Document generated by 35633 at 31/03/2024 15:36:12 Hours. Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

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



The New India Assurance Co.Ltd.

Policy Office

LINK ROAD, , OPP. ARUNODAYA MARKET , CUTTACK , ,

Proposer Name

CUTTACK CENTRAL CO-OPERATIVE BANK LTD.

Telephone No.

XXXXXX3133

Email

ritesh.pattanaik@saferisk.in, development@cuttackccb.co.in

Product Name

Group Janta Insurance

Policy Number

55040142247600000001

Period of Cover:

From

01-APR-24 12:00:01 AM

To

31-Mar-2025 11:59:59 PM

Insured Details

For Insurance Renewals contact

Agent/Development Officer/Broker

SAFERISK INSURANCE BROKERS PRIVATE LTD

Telephone No

SAFERISK INSURANCE

BROKERS PRIVATE LTD

Email

shwetabh@saferisk.in

For Claims contact our OFFICE

Policy Issuing Office

LINK ROAD, , OPP. ARUNODAYA MARKET , CUTTACK , ,

Proposer Name

CUTTACK CENTRAL CO-OPERATIVE BANK LTD.

City

CUTTACK

Tel.No.

Email

XXXXXX3133

ritesh.pattanaik@saferisk.in, development@cuttackccb.co.in

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Date: 2024.03.31
F66 的时间上降10 2004.03.31
F66 的时间上降10 2004.03.31
F66 的时间上降10 2004.03.31
F66 的时间上降10 2004.03.31
F66 的时间上降10 2004.03.31 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