



WITH YOU ALWAYS

Auto Secure Two-Wheeler Package Policy



Insured Details – Key Information for You

Name	Mr. Kamalnath Ray
Address	Gram-Janakpur, Gaurichak, Fatehpur, Patna, Bihar,, FATWAH-BIHAR, 803201,
Email ID	dha*****@gmail.com
Contact No.	+91 75**05**74
Policy No.	6107960629 00 00
GSTIN	NA
Client ID	NA

Unlock Policy Details at Your Fingertips



Download now

TATA AIG App<https://taig.in/TAGINS/97dd576>

OR

Scan QR Code



You can also visit our website

www.tataaig.com

WhatsApp us at

[+91 9136160375](https://wa.me/919136160375)**Welcome! Together, Let's Make Every Mile a Safe One**

Hi Mr. Kamalnath Ray

Welcome to TATA AIG family & we thank you for choosing our Policy for your Motor Vehicle Insurance. Your Policy No. 6107960629 00 00 has been issued based on the information and declaration provided by you. You are requested to visit our website www.tataaig.com for Policy Wordings.

Period of Insurance & Premium - Your Timeline for Protection and Peace of Mind:

Coverage Details	Valid From	Valid Till
Own Damage Cover	17/09/2026 (00:01 Hrs)	16/09/2027 (Midnight)
Third-Party Cover	17/09/2026 (00:01 Hrs)	16/09/2027 (Midnight)
Compulsory Personal Accident Cover for Owner-Driver	NA	NA
Premium Amount (Including GST)	₹ 1259	

Quick Access for Seamless Service



Access Network Garage list



Initiate Online Claim



Go To Guide & FAQ



Policy Wordings

TATA AIG GENERAL INSURANCE COMPANY LIMITED

Registered office : Peninsula Business Park, Tower A, 15th Floor, G.K Marg, Lower Parel, Mumbai - 400013, Maharashtra, India.

24*7 Customer Support No.: 022 6489 8282 • Email: customersupport@tataaig.com • Website: www.tataaig.com

• IRDA of India Registration No: 108 • CIN: U85110MH2000PLC128425

Auto Secure Two-Wheeler Package Policy - UIN: IRDAN108RPMT0076V03201819



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Certificate of Insurance Cum Policy Schedule

Vehicle Details - Your Complete Vehicle Information at a Glance:

Policy No.	6107960629 00 00	Body Type	MOTOR CYCLE
Insured Name	Mr. Kamalnath Ray	CC / KW	125
Premium Amount	1259	Mfg. Year	2019
Registration No.	BR 01 EK 0365	Date of Registration	16/08/2019
Make / Model / Variant	HONDA/SP SHINE/CBS	Hire Purchase /Hypothecation /Lease With	SHRIRAM CITY UNION FINANCE LTE
Fuel Type	PETROL	Seating Capacity(Including Driver)	2
Engine No. /Motor No. (For EV)	JC73ET2238887		
Chassis No.	ME4JC73AAKT000472		

Zone Details:

RTO Location	PATNA
Zone	B
Geographical Area	India

Battery Details:

No. of Batteries	NA
Battery No.	NA
Cost of Battery	NA

Charger Details:

Charger No.	NA	No. of Charger	NA
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Agent/Intermediary Details - Working Together for You:

Agent/Intermediary Name	Agent/Intermediary Code	Agent/Intermediary Contact No.
dhanesh kumar	AGINCURPK8320E	7011303402

Insured Declared Value (IDV) ₹ Details:

Policy Year	Vehicle IDV (₹)	Electrical Accessories IDV (₹)	Non-Electrical Accessories - Vehicle IDV (₹)	Bi-Fuel/CNG/LPG Kit (₹)	Trailer/Side Car IDV (₹)	Total IDV (₹)
1	34381	0	0	0	0	34381.00

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Schedule of Premium

Section - I Loss Of Or Damage To The Vehicle Insured (A):
(Coverage for damage, theft, or loss to your own vehicle)

Own Damage Premium on Vehicle and Accessories	
Basic Own Damage (OD)	
Premium on Vehicle	₹ 302.55
Total Own Damage Premium (A)	₹ 302.55
Total Add-On Premium (C)	₹ 0

Section - II Liability to Third-Parties (B):
(Provides coverage for Third-Party damages, including injury or death of a Third-Party or damage to Third-Party property resulting from your vehicle use)

Third-Party (TP) Premium	
Basic TP Premium	₹ 714.00
Legal Liability	
Add: Legal liability to paid driver (IMT 28) Number Of Person: 1	₹ 50.00
Total Liability Premium (B)	₹ 764.00
Net Premium (A+B+C)	₹ 1,067.00
SGST 9%	₹ 96.00
CGST 9%	₹ 96.00
Total Policy Premium	₹ 1,259.00

Drivers Clause: Any person including the Insured: Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's License may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Limitations as to use: The Policy covers use of the vehicle for any purpose other than:

- | | |
|---|---|
| a) Hire or Reward | e) Speed Testing |
| b) Carriage of Goods (other than samples or personal luggage) | f) Reliability Trials |
| c) Organized Racing | g) Any Purpose in Connection with Motor Trade |
| d) Pace Making | |

PUC: Warranted that the Insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC. Further, the company reserves the right to take appropriate action in case of any discrepancy in the PUC, as applicable, during the subsistence of the Policy.

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Limits of Liability:

Under Section II - 1 (i) of Policy (Death of or Bodily Injury)	Such amount as is necessary to meet the requirements of the Motor Vehicles Act, 1988	Under Section II - 1 (ii) of Policy (Third-Party Property Damage)	₹ 100,000.00	Under Section III - Compulsory Personal Accident Cover for Owner Driver	PA Owner Driver Capital Sum Insured:0 based on Insured's declaration that he/she already has a 24 hour Personal Accident cover against Death and Permanent Disability (Total and Partial) for Capital Sum Insured of at least 15 lakhs.
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This Policy does not cover Pre-Existing Damages as per Inspection Photographs and Report.

Nominee Details:

Sr No.	CSI	Name & Age	Relationship	% of Claim	Mobile No.	E-mail ID	Present & Permanent Address	Bank Details	Appointee Details (If Nominee is Minor)	
									Name	Relationship to Nominee
1.	15 Lakhs (Sum Insured)	NA	NA						NA	NA

Deductible Under Section I	Compulsory Deductible : ₹ 100.00 Voluntary Deductible :0.00 Imposed Excess :0.00 Franchisee :NA	No Claim Bonus	The Insured is entitled for a No Claim Bonus (NCB) on the own damage section of the Policy, if no claim is made or pending during the preceding year(s), as follows : The preceding year 20%, preceding two consecutive years 25%, preceding three consecutive years 35%, preceding four consecutive years 45%, preceding five consecutive years 50% of NCB on Own Damage Premium. NCB will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous Policy.
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Subject to: A) IMT Endorsement Number: IMT 28, IMT 22

B) TATA AIG Auto Secure Endorsement Number (TA):

We hereby certify that the Policy to which this Certificate relates as well as the Certificate of Insurance are issued in accordance with the provisions of Chapter XI of the Motor Vehicles Act, 2019. In witness whereof this Policy has been signed at Mumbai.

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Stamp Duty Details:

Consolidated stamp duty paid to state exchequer.

Receipt No.	PD300024323409	Service Account Code	997134	GSTIN	10AABCT3518Q1ZB
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Policy Servicing Office: 2ND FLOOR, S P TOWER, S. P. VERMA ROAD P.S. KOTWALI PATNA, BIHAR. , GARDANIBAGH , BIHAR , 800001

For TATA AIG General Insurance Company Limited

Digitally Signed by: Malpa Devi Maharana

Date: 15/09/2026

Location: Mumbai

Authorised Signatory

Important Notice:

The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicles Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY".

Note:

1. You are advised to go through the Policy Schedule cum Certificate of Insurance which is issued based on information and declaration provided by you.
2. Transcript of Information & Declaration is also provided herewith to enable you to go through the same again and if any error/discrepancy is found in respect of vehicle details, No Claim Bonus or any other information provided by you, it should be brought to our notice within 15 days of receipt of this policy for necessary correction along with the supporting documents, otherwise it will be deemed to be correct.
3. You may visit the Company website at www.tataaig.com for detailed benefits, terms and conditions and exclusions of the Policy issued and held by you.
4. Our Grievance Redressal Procedure and details about Ombudsman are available at the Company website www.tataaig.com
5. Please note that Any Established fraud of the Insured will lead to cancellation of Policy ab initio with forfeiture of Premium and non-consideration of claim, if any.
6. We will specifically seek confirmation on No Claim Bonus availed by you from your previous Insurer.
7. In case we receive confirmation that you had lodged claim with them then we will intimate you to pay the No Claim Bonus Amount within 20 days.
8. In case we don't receive the No Claim Bonus recovery then it will be adjusted against claim amount payable to you if any.
9. This Schedule, Policy terms and conditions available on the company website and Endorsements mentioned herein above shall be read together and any word or expression to which a specific meaning has been attached to/in any part of this Policy or of the Schedule shall bear the same meaning wherever it may appear.
10. Any amendments/modifications/alterations made on this system generated Policy Schedule is not valid and the Company shall not be liable for any liability whatsoever arising from such changes unless written request is made to the Company and the Company accepts the requested amendments/modifications/alterations and records the same through separate endorsement.
11. Please carefully read the Customer Information Sheet (CIS) attached to your Policy.

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Receipt

Receipt No.		PD300024323409		Receipt Date		15/09/2026	
Sr. No.	Policy Number	Mode of Payment	Total Premium (₹)	Utilised from the Receipt for Policy (₹)		Balance (₹)	
1.	6107960629 00 00	paymentLinkCustomer	1,259	1,259		0	

Payer Name: Kamalnath Ray

Notes:

1. This is a computer-generated receipt and does not require a signature.
2. Upon issuance of this receipt, all previously issued temporary receipts, if any, related to this Policy shall be considered null and void.
3. Amounts received by cheque shall be subject to realisation.
4. Any amount received in excess of the Premium is being/shall be refunded by the Company.

GSTIN: 10AABCT3518Q1ZB

Service Accounting Code: 997134

Revenue (consolidated) Stamp Duty duly paid vide challan No. date for applicable cases.

Issuance of this receipt does not amount to acceptance of the risk by TATA AIG General Insurance Company Limited. The Insurance cover for the risk shall be as per the terms conditions of the Insurance Policy if and when issued.

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Transcript Of Proposal

Insured and Vehicle Details:

1. Name (Registered owner of the Motor Vehicle): Mr. Kamalnath Ray
2. Address for Communication: Gram-Janakpur, Gaurichak, Fatehpur, Patna, Bihar,, 803201,, FATWAH, BIHAR, India
3. Vehicle Details: HONDA SP SHINE CBS
4. Vehicle Type: MOTOR CYCLE
5. Fuel Type: PETROL
6. EV Details:
 - i. Battery Number: NA
 - ii. Charger Number: NA
 - iii. No. of Batteries: NA
 - iv. Cost of Battery: NA
 - v. No. of Chargers: NA
 - vi. Is Battery Provided by Manufacturer: NA
 - vii. Name of Battery Manufacturer: NA
 - viii. Is Battery a Part of Ex-Showroom Price of the Vehicle: NA
7. Insured's Declared Value: 34,381
8. Date of Registration: 16/08/2019
9. Proposed Period of Insurance:
 - Own Damage Cover Period: From 17/09/2026 (00:01 Hrs) To 16/09/2027 (Midnight)
 - Third-Party Cover Period: From 17/09/2026 (00:01 Hrs) To 16/09/2027 (Midnight)
 - Compulsory Personal Accident Cover Period: From NA To NA
 - Compulsory Personal Accident Cover: Insured has standalone PA cover >= 15 lakhs

Previous Insurance Details:

Name of the Insurer:

1. Policy Number: NA
2. Date of Expiry: NA
3. Type of Cover: NA
4. Address of the Insurer: NA
5. Claim in Previous Policy Period: No
6. NCB in Previous Policy: NA
7. NCB Claimed: NA
8. Period of Insurance:
 - Own Damage Cover Period: From NA to NA
 - Third-Party Cover Period: From NA to NA
 - Compulsory Personal Accident Cover Period: From NA to NA

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Nominee Details:

Sr No.	CSI	Name & Age	Relationship	% of Claim	Mobile No.	E-mail ID	Present & Permanent Address	Bank Details	Appointee Details (If Nominee is Minor)	
									Name	Relationship to Nominee
1.	15 Lakhs (Sum Insured)	NA	NA						NA	NA

Restriction of Cover/ Discounts/ Concessions/ Extended Covers:

1. ARAI Membership Number: NA
2. Third-Party Property Damage Cover Restricted to ₹6000 Only: No
3. Is Voluntary Deductible Opted: No
4. Amount of Deductible Opted: NA
5. Vehicle is Fitted With Anti-Theft Device Approved by ARAI: No
6. Add-On Covers Opted: NA
7. PUC Certificate Number and PUC Expiry Date: NA - NA

Declaration for No Claim Bonus (If NCB Confirmation is Not Submitted but NCB Claimed)

- ☒ I/We declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring Policy Period (Copy of Policy enclosed). I/We further undertake that if this declaration is found Incorrect all benefits under the Policy In respect of own Damage Section I of the Policy will stand forfeited.

AML Guidelines:

1. I/We hereby confirm that all premiums paid/payable in future will be from bonafide sources and not paid out of proceeds of crime and that such premiums are not disproportionate to my/our income. I/We understand that the company has the right to call for documents to establish sources of funds and to cancel the Insurance Policy in case I/We are found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering law in India.
2. I/We are not Politically Exposed Persons* nor are their close relatives/family members/ associates. I/We shall keep the company informed if we subsequently become a Politically Exposed Person/close relative/family member/associate of Politically Exposed Persons.
*"Politically Exposed Persons" shall have the meaning assigned to it under Prevention of Money-Laundering (Maintenance of Records) Amendment Rules, 2023 as amended from time to time.

- ☒ I hereby give my consent to receive one page Insurance Policy.

- ☒ I understand that I will receive digital copy of my Policy and service-related communication via Email only.

Grievance Redressal Procedure:

As per Chapter 7 of the IRDAI (Protection of Policyholders' Interests, Operations and Allied Matters of Insurers) Regulations, 2024.

Add-On UIN Numbers:

TAGIC/PS/MRTW/Feb 22/05

Disclaimer: Insurance is the subject matter of solicitation. For more details on benefits, exclusions, limitations, terms & conditions, please refer to the sales brochure/policy wordings on www.tataaig.com carefully, before concluding a sale. Add-On covers can only be purchased with the base product and on payment of an additional premium. The trade logo displayed above belongs to Tata Sons Private Limited and AIG and is used by TATA AIG General Insurance Company Limited under License.

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