



Personal Accident Insurance ()
UIN NUMBER - IRDAN190P0003201314

Insured Name	DR AMBEDKAR MEMORIAL INSTITUTE OF IT&MGT SCIENCE		
Insured's Details		Issuing Office Details	
Customer ID	POA4813590	Office Code	Micro Office VEDVYAS (550505)
Address	AT-JAGDA,ROURKELA DIST-SUNDERGARH ODISHA JHIRPANI ,ODISHA, 769042	Address	Plot No.5/B,1ST FLOOR SAWMILL CHOWK VEDVYAS PO.VEDVYAS,DIST.SUNDARGARH 769004
Phone No	XXXXXX7773	Phone No	6612660006
E-mail/Fax	/	E-mail/Fax	nia.550505@newindia.co.in /
PAN No		S.Tax Regn. No	AAACN4165CST178
GSTIN/UIN	NA / NA	GSTIN	21AAACN4165C2Z2
		SAC	997133 (Accident and health insurance services)

Policy Details		Business Source Code	
Policy Number	55050542230100000001	Dev.Off level./Broker/Corp. Agent/IMF/POS/Web Aggregator	DI_Micro Office VEDVYAS DI_Micro Office VEDVYAS - (DI550505)
Period of insurance	From:29/04/2023 12:00:01 AM To: 28/04/2024 11:59:59 PM	Agent/Bancassurance/Specialised Person/CPSC User	Mr. TANKA DHAR ROUT (NIAAG00078354) TANKA DHAR ROUT (SI00144644)
Date of Proposal	29-Apr-23	Phone No	9438425800 / 6612660006. /
Prev. Policy no.	NA	E-mail/Fax	rout tanka76@rediffmail.com, / / /
Client Type	Non-Corporate	Type of Cover	24 hours Cover required
Staff Discount	No		

Premium:	GST:	Total (₹)	Stamp Duty	Rupees (in words)	Receipt No. & Date:
₹ 4,125	₹ 742	₹ 4,867	₹5	RUPEES FOUR THOUSAND EIGHT HUNDRED SIXTY-SEVEN ONLY	5505058123000000 0175 - 28/04/23

Benefits under the Policy: GROUP NAMED

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	DR.JATIN DRA NAYAK	73	EMPLOYEE	Self	Risk Group I	0	100000	No	0	NA	NA
2	2	BHABANI SHANKAR DAS	55	EMPLOYEE	Other	Risk Group I	0	100000	No	0	NA	NA
4	3	SWAHA RAY	42	PROFESIONAL	Mother	Risk Group I	0	100000	No	0	NA	NA
5	4	PROF.USHA MISHRA	50	EMPLOYEE	Spouse	Risk Group I	0	100000	No	0	NA	NA
6	5	DR.SNIGDHA MISHRA	33	EMPLOYEE	Spouse	Risk Group I	0	100000	No	0	NA	NA
7	6	PROF.CHANDRAY SOREN	41	EMPLOYEE	Other	Risk Group I	0	100000	No	0	NA	NA

Signature Not Verified

Digitally signed by JAGAT YEE PANIGRAHI Date: 2023.04.28

Policy No. : 55050542230100000001 Document generated by 28761 at 28/04/2023 17:21:13 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>.

[Signature]
PRINCIPAL
Dr. Ambedkar Memorial Institute of
I.T. & Management Science
Jagda, Rourkela-42

दि न्यू इन्डिया एस्योरन्स कं. लि.
The New India Assurance Co. Ltd.
मंडल कार्यालय / Divisional Office
सुपर मार्केट / Super Market 1st Floor



COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office
Address

Micro Office VEDVYAS (550505)
PKN No.5/B,1ST FLOOR SAWMILL CHOWK VEDVYAS PO,VEDVYAS,DIST SUNDARGARH
769004
ROURKELA
6612660006
nia.550505@newindia.co.in
5505058123000000175
28/04/2023
D1550505

Insured Plan Number
Phone
Email
Fax
Collection Number
Collection Date
Business Source Code
PAN No of Payer

Received with thanks from DR AMBEDKAR MEMORIAL INSTITUTE OF IT&MGT SCIENCE
The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount	A/C Code	Sub A/C Code
55050542230100000001	Bank-550505	4867.00	9100.550505	BA00016827-550505-9100
Total = ₹ 4867.00				

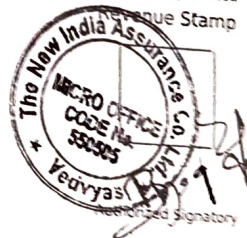
Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Cheque	4867.00	265924	28-APR-23	STATE BANK OF INDIA	KOELNAGAR RKL	5505052310000309	N.A.
Total = ₹ 4867.00							

Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
4125.00	742.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NIAAG00078354	TANKA DHAR ROUT	42

For The New India Assurance Company Limited
Revenue Stamp



Date of Issue: 28/04/2023

Cashier's Initial

Note -

- Please note the Policy Number, Collection Number and date in all future correspondence. This Receipt is subject to Realisation of Cheque.
- 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 : 55050523P0000159

IRDA Registration Number: 190
NIA PAN NUMBER: AAACN4165C

Signature Not Verified
Digitally signed by JAGAT K. YETI
PANIGGALAI
Date: 2023.04.28
17:22:57+05'30'

Document generated by 28781 at 28/04/2023 17:22:57 Hours.

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

P. Jagan
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I.T. & Management Science
Jagda, Rourkela-42