Policy Number : 370106502210000496	जारीकर्ता कार्यालय/Issuing Office
व्यवसाय  स्त्रोत/ Business Source : 9000195647	कार्यालय कोड /Office Code : 370106 कार्यालय पता / Office Address : JAIPUR BRANCH   Shanti Sadan, Church Road, Opposite Shalimar, Jaipur, Rajasthan, - 302001. State Code: 8 , Rajasthan GSTIN: 08AAACN9967E1Z3 eMail:
	विक्रिय चैनल संपर्क नम्बर/ Sales Channel Contact Number : 9024726529 सह दलाल कोड / Co Broker Code:
विक्रय चैनल का नाम/ Sales Channel Name : Miss Ananya Sharma	कस्टमर केयर टॉल फ्री नंबर/Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in

ग्राहक का नाम/Customer Name: BANASTHALI VIDYAPITH	ग्राहक आईडी/ Custom	er ID: 9701094551	पैन/ PAN: AAATB8477A
पता/ Address: POST BANASTHALI TEH NIWAI DISST TONK, City:		फोन/ Phone:	
PIN: 304022.  Mobile: 9352141481			

Premium:	₹ 26,04,534.00	Total SI:	₹81,92,50,000,00		
CGST	₹ 2,34,408.00	- 26			
SGST/UTGST	₹ 2,34,408.00				
IGST ₹ 0.00	Proposal Number and Date:	8800180727809596 Dt. 15/09/2022			
Kerala Flood Cess ₹ 0.00			10703/2022		
Less:GST_TDS	₹ 0.00				
Recoverable Stamp Duty:	₹ 0.00	Receipt Number:	370106812210005384		
Total Amount: ₹ 30,73,350.00		Receipt Date:	30/09/2022		
(Rupees Thirty Lakh Seventy Th Hundred Fifty Only.)	ree Thousand Three	Co-Insurance Details:	N/A		

Additional Premium:	₹ 6,660.00	Insured's Request Date:	21/10/2022	
CGST	₹ 599.00			
SGST/UTGST	₹ 599.00			
IGST	₹ 0.00 Endorsement Number: 3	370106502282100040		
Kerala Flood Cess	₹ 0.00		0.0103002202700040	
Less:GST_TDS	₹ 0.00			
Recoverable Stamp Duty:	₹ 0.00	Endorsement Issue Date:	21/10/2022	
Total Amount :	₹ 7,859.00	Receipt Number:	370106812210006198	
Rupees Seven Thousand Eight Hundred Fifty Nine Only.)		Receipt Date:	21/10/2022	

General / Common Information change

Subject otherwise to the Terms, Exclusion and Conditions of this Policy. The sum insured value is changed from 818,500,000.00 to 819,250,000.00.

Premium is changed from 2,604,534.00 to 2,611,194.00 the Sum Insured stated in the Policy Schedule is increased from 818,500,000.00 to 819,250,000.00.

IN CASE OF DISHONOUR OF THE PREMIUM CHEQUE, THIS DOCUMENT STANDS AUTOMATICALLY CANCELLED 'AB-INITIO	١,
	-

For and On Behalf Of Nation	onal Insurance Company Limited
	Authorized Signatory

Policy Number: 370106502210000496	जारीकर्ता कार् <b>यालय/Issuing Office</b>			
व्यवसाय  स्त्रोत/ Business Source : 9000195647	कार्यालय कोड /Office Code : 370106 कार्यालय पता / Office Address : JAIPUR BRANCH   Shanti Sadan, Church Road, Opposite Shalimar, Jaipur, Rajasthan, - 302001. State Code: 8 , Rajasthan GSTIN: 08AAACN9967E1Z3 eMail:			
	विक्रिय चैनल संपर्क नम्बर/ Sales Chann Contact Number : 9024726529 सह दलाल कोड / Co Broker Code:			
विक्रय चैनल का नाम/ Sales Channel Name : Miss Ananya Sharma	कस्टमर केयर टॉल फ्री नंबर/Customer Care Toll Free Number: 1800 345 0330 ईमेल/ email:customer.support@nic.co.in			

## **Debit Note**

**Details of Supplier:** 

National Insurance Company Limited., JAIPUR BRANCH I Shanti Sadan, Church Road, Opposite Shalimar, Jaipur, Rajasthan, - 302001

State : GSTIN No :

8 , Rajasthan 08AAACN9967E1Z3

Details Of Receiver: BANASTHALI VIDYAPITH

Address: POST BANASTHALI TEH NIWAI DISST TONK, RAJASTHAN, 304022.

Place of Supply State: Rajasthan State Code: 8 GSTIN No: NA

Invoice Serial No:

30253H2E00100040

30253H2P00000496

Invoice Date:

21/10/2022

Reference to Serial No. of Corresponding Tax Invoice / Bill of Supply Reference to Date of the corresponding tax invoice / bill of supply

30/09/2022

SAC Code	Descripti on of	Total(₹)	Disco	Taxable Value(₹)	CGST	SGST/UTGST		IGST		Kerala Flood Cess Amount(₹)	
	DELAICE	Value(\)	The second section is a second	Rate	Amount(₹	Rate	Amount(₹)				
997139	Other non-life insurance services (excludin g reinsuran ce services)	6,660.00	0%	6,660.0 0	9%	599	9%	599	0%	0	
TOTAL		6,660.00		6,6 <del>6</del> 0.0 0		599		599	10.10 60 1000	0	

Total Value (In figures) : ₹ 7,859
Total Value (In words) : Rupees Seven Thousand Eight Hundred Fifty Nine Only.
Amount of Tax Subject to Reverse Charge : No

कृते नेशनल इन्श्योरेन्स कंपनी लमिटिडा For and on behalf of National Insurance Company Limited

अधिकृति हस्तात्क्षरकर्ता/ Authorized Signatory



E.&.O.E