



**UNITED INDIA INSURANCE COMPANY LIMITED**  
**CERTIFICATE OF INSURANCE**  
**MOTORCYCLE / SCOOTER - LIABILITY ONLY POLICY**

(FORM 51 OF CENTRAL MOTOR VEHICLE RULES 1989)

Policy No.	2219043125P112683479				Certificate Number	2219043125P112683479			
Customer Id	23522310867				Issuing Office Address	Code	221904		
Name of the Insured	MR MOHD IRFAN AHAMAD								
Address of the Insured	VILL- GADHARUVA PO- KALAAM, PS- KOTWALI, KHERI, VILL- GADHARUVA PO- KALAAM, PS- KOTWALI, KHERI				C-20, JANAK CINEMA COMPLEX JANAK CINEMA COMPLEX, JANAK PURI NEW DELHI, NEW DELHI, DELHI 110058 WEST DELHI DELHI				
	262701 LAKHIMPUR KHERI UTTAR PRADESH				Telephone	(011) 49878986			
Business/Occupation	Others	Mobile No. - *****6809							
Insured's Declared Value ₹ 0									
Period of Insurance					From 00:00 Hrs of 08/11/2025 To Midnight of 07/11/2026				
Particulars of Vehicle Insured									
Registration No.		Obsolete Vehicle	Engine No.	Chassis No.	Make/Model	Type of Body	Year of Mfg	Cubic Capacity/KW	Seating including driver
Vehicle	Trailer (if any)								
UP - 31 - BN - 4841		No	HA11ERL9J30701	MBLHAC048L9J76962	HERO MOTOCORP LTD / HF DELUXE (KICK-DRUM-CAST)	SOLO WITH PILLION	2020	97	2
Registration Authority		Geographical Area			Financier				
UP31 KHERI		INDIA							
Amount in words:		Eight hundred forty-three rupees only							
Persons or classes of persons entitled to drive									
Any person including Insured provided that a person holds an effective driving licence at the time of accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective Learner's Licence may also drive the vehicle and such a person satisfies the requirements of Rule 3 of Central Motor Vehicle Rule, 1989.									
Note:- The policy does not cover liability for death, bodily injury or damage as excluded in section 150 (2) (ii) and (iii): (b) and (c) of the Motor Vehicles Act, 1988.									
Limitations as to use									
The policy covers use of the vehicle for any purpose other than									
a) Hire or Reward									
b) Carriage Goods (other than samples or personal luggage)									
c) Organized Racing									
d) Pace Making									
e) Speed Testing and Reliability Trials									
f) Use in connection with Motor Trade									
Limits of Liability					Premium:				
Under Section II-I (i) Death or bodily injury in respect of any one accident: As per Motor Vehicles Act 1988					₹ 714.00				
Under Section II-I (ii) Damage to third party property in respect of any one claim or series of claims arising out of one event: ₹ 100000 /-					IGST(18%):				
					₹ 129.00				
					Stamp Duty:				
					₹ 1.00				
					Total(Rounded Off):				
					₹ 843.00				
					Receipt Number :				
					10122190425117373404				
					Receipt Date:				
					07/11/2025				
					DebitNote Number:				
					Document Date:				
					Agency/Broker Code:				
					BRC1290115				
					LANDMARK INSURANCE BROKERS				
					PVT LTD_129 , Mobile: 8850766009				
					Dealer Name/Code:				
					Direct Business:				
					Development Officer Code:				

**Subject to IMT Endorsement No.s, terms and conditions printed herein / attached hereto**  
I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with provisions of Chapter X & XI of M.V Act, 1988.

Date of Issue: 07/11/2025

Note:-With reference to IRDAI circular no IRDAI/NL/CIR/MOTP/170/10/2018 dated 09/10/2018 and as per the declaration given in the proposal form by owner driver Compulsory Personal Accident (CPA) cover is removed, since he/she is not holding a valid driving license.

**Amount Subject to Reverse Charges-NIL**

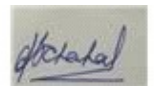
We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

**IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.**

The genuineness of the policy can be verified through "Verify Your Policy" link at

[www.uiic.co.in](http://www.uiic.co.in).

For and On behalf of  
United India Insurance Co. Ltd.



Duly Constituted Attorney



**MOTOR INSURANCE - MOTORCYCLE / SCOOTER - LIABILITY ONLY POLICY SCHEDULE**

Policy Number	: 2219043125P112683479	Previous Policy No	:
Geographical Area	: India(A)	Insurance Start Date & Time	: 08/11/2025 00:00 (hours)
Insured Name/ID	: MR MOHD IRFAN AHAMAD/23522310867	Insurance expiry Date & Time	: 07/11/2026 midnight
Insured address	:	Policy Issuing Office Address	:
VILL- GADHARUVA PO- KALAAM, PS- KOTWALI, KHERI, VILL- GADHARUVA PO- KALAAM, PS- KOTWALI, KHERI		C-20, JANAK CINEMA COMPLEX JANAK CINEMA COMPLEX, JANAK PURI NEW DELHI, NEW DELHI, DELHI ,GST No:- 07AAACU5552C1ZL	
City: LAKHIMPUR KHERI	District: LAKHIMPUR KHERI	City: WEST DELHI	District: WEST DELHI
State: UTTAR PRADESH	Pincode: 262701	State: DELHI	Pincode: 110058
Telephone:	Mobile: *****6809	Telephone:(011) 49878986	
Business Channel Code: BRC1290115		Business Channel Sub Code:	
Dealer Name:		Agent Name:LANDMARK INSURANCE BROKERS PVT LTD_129	
Dealer Code:		Land Line No:18004 194199,Mobile:8850766009	

**VEHICLE DETAILS**

Registration Number	UP - 31 - BN - 4841	Obsolete Vehicle & Engine Number	No & HA11ERL9J30701	Year Of Manufacture	2020
RTA Name	UP31 KHERI	Chassis Number	MBLHAC048L9J76962	Cubic Capacity/KW	97
Registration Date	13/11/2020	Vehicle Make & Model	HERO MOTOCORP LTD & HF DELUXE (KICK-DRUM-CAST)	Type Of Body	SOLO WITH PILLION
AA Membership Number		Seating Capacity(Including SideCar)	2	Geographical Extension	

**INSURED DECLARED VALUE (₹)**

Vehicle	Trailer/Sidecar	Electrical/Electronic Accessories	Non Electrical Accessories	CNG Kit	LPG Kit	Total	Co-Insurance Details
0	0	0	0	0	0	0	100%

**OTHER DETAILS**

Financier	Policy Subject to IMT Endorsements	Applicable Addon-covers/Services	Unique Reference Code

**PERSONS OR CLASS OF PERSONS ENTITLED TO DRIVE:**As narrated in the certificate of insurance attached herewith.

**LIMITATIONS AS TO USE:**As narrated in the certificate of insurance attached herewith.

**LIMITS OF LIABILITY:**As narrated in the certificate of insurance attached herewith.

**EXCLUSIONS:**(1)Any accidental Loss Or Damage and/or liability caused sustained or incurred outside the geographical area.(2)Any claim arising out of any contractual liability.(3)Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss.(4)Any liability of whatsoever nature directly or indirectly caused by or contributed to or by arising out of ionizing radiations or contamination by radioactivity from any nuclear fuel.For the purpose of this exception,combustion shall include any self sustaining process of nuclear fission.(5)Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.(6)Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war), civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences or any consequences thereof and in default of such proof the Company shall not be liable to make any payment in respect of such a claim.

PA Cover CSI (₹)	DEDUCTIBLES (Under Section I) (₹)					
Owner Driver CSI (Under Section III)	0	Compulsory	100	Imposed	0	Voluntary
						0

**SCHEDULE OF PREMIUM (₹)**

A-OWN DAMAGE PREMIUM	B-LIABILITY PREMIUM	TOTAL PREMIUM	
Gross OD(A)	B. Basic TP ₹ 714.00	Premium(A+B)	₹ 714.00
	Total ₹ 714.00	IGST(18%)	₹ 129.00
		<b>TOTAL PAYABLE PREMIUM</b>	<b>₹ 843.00</b>
		Stamp Duty	₹ 1.00
		SAC Code	997134
	Gross TP(B) ₹ 714.00	Invoice No & Date	31251112683479 & 07/11/2025
	Total Liability Premium ₹ 714.00	Receipt Number	10122190425117373404
		Receipt Date	07/11/2025
		Receipt Amount	₹ 843.00
		Payment Mode	
		Paying Party	MR MOHD IRFAN AHAMAD

**TERMS & CONDITIONS:**As per the Indian Motor Tariff, personal copy of the same is available free of cost on request.Further the Indian Motor Tariff is also available and displayed at all United India Insurance company Offices and on Website [www.uilic.co.in](http://www.uilic.co.in)

**DISCLAIMER:**The policy stands Cancelled or void in the event of Cheque Dishonored.The company may cancel the policy by sending 7 days notice in case of fraud,misrepresentation,nondisclosure of material fact or non co-operation of the insured.

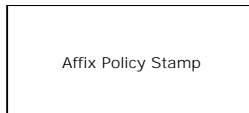
**IMPORTANT NOTICE:**The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable fom the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For Legal Interpretation, English Version will hold good.In case of accident the insured must inform United India Insurance Co. Immediately to arrange spot survey.

**Anti Money Laundering Clause:**-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date & Signature of Proposal : 07/11/2025

In Witness Whereof this policy has been signed at BO JANAKPURI 221904 on this 07th day of November ,2025



For United India Insurance Company Limited

Duty Constituted Attorneys

Issuing Agent: LANDMARK INSURANCE BROKERS PVT LTD\_129  
Agent Location: 221904

Printed By : LANLTD0077 @ 07/11/2025 11:09:13 PM  
Underwritten By - LANLTD0077 ( BROKER )

Agent User Name: LANLTD0077

CUSTOMER INFORMATION SHEET															
This document provides only key information about your policy. Please refer to Policy document for detailed terms and conditions															
SI No	Title	Description	Policy Clause												
1	Product Name	Two Wheeler Liability only policy	Policy Schedule												
2.	Unique Identification Number (UIN) allotted by IRDAI	UIN: IRDAN545RP0052V01199900	Policy Schedule												
3.	Structure Basis of Sum Insured (IDV)	Section I : Liability to Third Parties Section II : Personal Accident Cover for Owner-driver (applicable only if opted by the Insured in the policy) - Benefit based	Policy Schedule												
4.	Interests Insured	Section I : Motor Third Party Liability - Covers Liability towards Third Party Death/Injury and Third Party Property Damage  Section II : Motor Personal Accident driver (applicable only if opted by the Insured in the policy) - covers for accidental death, bodily injuries, and physical disabilities (temporary and permanent) of the Owner/driver of the Insured vehicle.	Policy Schedule												
5.	Sum Insured / Motor Insured Declared Value Scope	<b>Section: Liability to Third Party</b> For Third Party Death / bodily injury/ Third Party Property Damage  <b>Section - Personal Accident Cover For Owner-Driver (if Opted and shown in the Policy Schedule):</b> Benefit payment up to 15 Lakhs basis	<b>Liability to Third Party Section</b>  <b>Personal Accident Cover for Owner-Driver Section(Death and Permanent Total Disablement)</b>												
6	Policy Coverage	<p><b>1. Section - Liability to Third Party Section:</b> Subject to the Limit of liability as laid down in the schedule hereto, the Company will indemnify the insured in the event of accident caused by or arising out of the use of the Motor Vehicle anywhere in India against all sums including claimant's costs and expenses which the insured shall become legally liable to pay in respect of</p> <p>i) death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicles Act.</p> <p>ii) damage to property other than property belonging to the insured or held in trust or in the custody or control of the insured up to the limit specified in the schedule.</p> <p>2. The Company will pay all costs and expenses incurred with its written consent.</p> <p>3. In terms of and subject to the limitations of the indemnity which is granted by this policy to the insured, the Company will indemnify any driver who is driving the Motor Vehicle on the insured's order or with insured's permission provided that such driver shall as though he/she were the insured observe fulfill and be subject to the terms exceptions and conditions of this policy in so far as they apply.</p> <p>4. In the event of the death of any person entitled to indemnity under this policy the Company will in respect of the liability incurred by such person indemnify his/her personal representative in terms of and subject to the limitations of this Policy provided that such personal representative shall as though such representative was the insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.</p> <p>5. The Company may at its own option</p> <p><b>A) arrange for representation at any Inquest or Fatal Inquiry in respect of any death which may be the subject of indemnity under this Policy and</b></p> <p><b>B) undertake the defence of proceedings in any Court of Law in respect of any act or alleged offence causing or relating to any event which may be the subject of indemnity under this Policy.</b></p> <p><b>Section - Compulsory Personal Accident (CPA)</b> Subject otherwise to the terms exceptions conditions and limitations of this Policy, the Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the owner-driver of the vehicle in direct connection with the vehicle insured or whilst mounting into/dismounting from or traveling in the insured vehicle as a co-driver, caused by violent, accidental, external and visible means which independently of any other cause shall within six calendar months of such injury result in</p> <table border="1"> <thead> <tr> <th>Details of injury</th><th>Scale of compensatio</th><th>Details of injury</th><th>Scale of compensation</th></tr> </thead> <tbody> <tr> <td>(i) Death</td><td>100%</td><td>(iii) Loss of one limb or sight of one eye</td><td>50%</td></tr> <tr> <td>(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye</td><td>100%</td><td>(iv) Permanent total disablement from injuries other than named above</td><td>100%</td></tr> </tbody> </table> <p>Provided always that</p> <p>1) the compensation shall be payable under only one of the items (i) to (iv) above in respect of the owner-driver arising out of any one occurrence and the total liability of the insurer shall not in the aggregate exceed the sum as per schedule during any one period of insurance.</p> <p>2) No compensation shall be payable in respect of death or bodily injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) intentional self injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.</p> <p>This cover is subject to</p> <p>(a) the owner-driver is the registered owner of the vehicle insured herein;</p> <p>(b) the owner-driver is the insured named in this policy.</p> <p>(c) the owner-driver holds an effective driving licence, in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, at the time of the accident</p>	Details of injury	Scale of compensatio	Details of injury	Scale of compensation	(i) Death	100%	(iii) Loss of one limb or sight of one eye	50%	(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%	(iv) Permanent total disablement from injuries other than named above	100%	<p><b>Liability to Third Party Section</b></p> <p><b>Personal Accident Cover for Owner-Driver Section(Death and Permanent Total Disablement)</b></p>
Details of injury	Scale of compensatio	Details of injury	Scale of compensation												
(i) Death	100%	(iii) Loss of one limb or sight of one eye	50%												
(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%	(iv) Permanent total disablement from injuries other than named above	100%												
7	Major Exclusions	<p><b>Major Exclusions are as shown below:</b></p> <ul style="list-style-type: none"> <li>The Company shall not be liable in respect of any claim arising whilst the vehicle insured herein</li> <li>a.being used otherwise than in accordance with the 'Limitations as to Use' or</li> <li>b.being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.</li> <li>The Company shall not be liable in respect of any claim arising out of any contractual liability.</li> </ul> <p>•Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death arising out of and in the course of employment of a person in the employment of the insured or in the employment of any person who is indemnified under this policy or bodily injury sustained by such person arising out of and in the course of such employment.</p> <p>Detailed list of exclusions are as per policy schedule</p>	<b>General Exclusions</b>												

8	Special Conditions and Warranties	<p>1. Notice shall be given in writing to the Company immediately upon the occurrence of any accident and in the event of any claim. Every letter claim writ summons and/or process shall be forwarded to the Company immediately on receipt by the insured. Notice shall also be given in writing to the Company immediately the insured shall have knowledge of any impending Prosecution Inquest or Fatal Inquiry in respect of any accident which may give rise to a claim under this Policy.</p> <p>2. No admission, offer, promise, payment, or indemnity shall be made or given by or on behalf of the insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the insured the defence or settlement of any claim or to prosecute in the name of the insured for its own benefit any claim for indemnity or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the insured shall give all such information and assistance as the Company may require. If the Company shall make any payment in settlement of any claim and such payment includes any amount not covered by this Policy the insured shall repay to the Company the amount not so covered.</p> <p>3. The insured shall take all reasonable steps to maintain the insured vehicle in efficient condition and the company shall have at all times free and full access to examine the insured vehicle or any part thereof or any driver or employee of the insured.</p> <p>In addition to above, detailed Conditions and Warranties are as mentioned in the Policy</p>	Conditions
9	Admissibility of Claim	<p>Claim should be notified immediately on the date of accident through online intimation, email to the address mentioned in policy or through any other means.</p> <p>Due diligence should be taken by Insured upon occurrence of loss as mentioned in conditions of the policy.</p>	
10	Policy service/ Claim service	<ul style="list-style-type: none"> <li>• Please contact your Policy issuing office, details of which are mentioned in your Policy Schedule for any assistance in policy</li> <li>• In case of accident, Online intimation of the claim can be given through phone, online through mail to Agent or policy issuing office or through portal. Details of the contact number and mail id are mentioned in the policy.</li> </ul> <p>The following are the Basic Claim documents to be submitted by the insured: Insured has to submit all the relevant documents at the time of taking insurance. List of documents mentioned in the proposal form should be submitted along-with the proposal.</p> <p>Basic Documents to be submitted during proposal acceptance;</p> <ul style="list-style-type: none"> <li>• Proposal form duly signed by Insured</li> <li>• RC of the Insured vehicle/Invoice copy in case of new vehicle</li> <li>• Pollution certificate</li> <li>• KYC document of the Insured</li> <li>• Bank details of the Insured</li> </ul> <p>Basic Documents at the time of claim:</p> <ul style="list-style-type: none"> <li>• Motor Claim Form -claim form may be downloaded from uiic.co.in website</li> <li>• Copy of Registration Certificate of the Insured vehicle if there is change in ownership</li> <li>• Copy of Driving License of person driving at the time of loss</li> </ul> <p>Any other specific documents related to the claim</p>	
11	Cancellation	<p>a) The policyholder can cancel the policy at any time during the term, by informing the insurer. In case the policyholder cancels the policy, he/she is not required to give reasons for cancellation.</p> <p>The insurer can cancel the policy only on grounds of established fraud, by giving minimum notice of 7 days to the policy holder.</p> <p>b) Under no circumstances can the insurer cancel the statutory Motor Third Party Liability Insurance or any other compulsory insurance mandated by law except in case of double insurance or total loss</p> <p>c) The insurer shall -</p> <ol style="list-style-type: none"> <li>i. Refund proportion of premium for unexpired policy period, If the term of the policy is upto one year and there is no claim(s) made during the policy period.</li> <li>ii. Refund premium for the unexpired policy period, in respect of the policy with the term more than one year and the risk coverage for such policy years has not commenced.</li> </ol> <p>d) In all cases minimum premium of Rs.100/- will be retained by the insurer</p>	Conditions
12	Policy Servicing / Grievances Complaints	<ul style="list-style-type: none"> <li>• Details of company officials: Please contact your Policy issuing office, details of which are mentioned in your Policy Schedule</li> <li>• In case of any grievance, you may contact UIIC through: <ul style="list-style-type: none"> <li>• a. Website: <a href="http://www.uiic.co.in">www.uiic.co.in</a></li> <li>• b. Toll Free Number: 1800 425 333 33</li> <li>• c. E-Mail: <a href="mailto:customercare@uiic.co.in">customercare@uiic.co.in</a></li> <li>• d. You may also approach the grievance cell at any of our branches with details of the grievance</li> </ul> </li> <li>• Alternatively, you may lodge a complaint at the IRDAI Integrated Grievance Management System (<a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a>).</li> </ul>	
13	Obligations of the Policyholder	<ul style="list-style-type: none"> <li>• Insured is at obligation to disclose all material information in the Proposal form.</li> <li>• In the event of misrepresentation, mis-description or non- disclosure of any material fact by the Insured, the Policy shall be void</li> <li>• Insured can contact our policy issuing office, details of which are mentioned in the policy schedule.</li> </ul> <p>(i) To intimate any change to the material information affecting the policy.</p> <p>(ii) Any change in the ownership of the vehicle, any kind of modification in the vehicle/RC which might enhance the risk is considered as material information and should be informed to insurance company for necessary endorsement on policy.</p>	

Legal Disclaimer Note: The information must be read in conjunction with the policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy shall prevail.

Declaration by the Policy Holder:

I have read the above and confirm having noted details

Place:

Date:

\*Duplicate copy has to be signed and submitted to the company.

Signature of Policy Holder

This is a system generated document and any manual alteration / correction / overwriting in the document will make it invalid.