



**Bajaj General Insurance Limited**  
**(Formerly known as Bajaj Allianz General Insurance Co. Ltd.).**

Corporate Identity Number (CIN): U66010PN2000PLC015329  
Unique Identification Number (UIN): IRDAN113CP0023V02201920  
Registered and Head Office: Bajaj Insurance House, Airport Road, Yerwada, Pune - 411006 (India)  
Transcript of Proposal for BURGLARY INSURANCE POLICY

Dear PROLOGIC FIRST INDIA PVT LTD,

We, **Bajaj General Insurance Limited [Company]**, wish to inform you that the your contract will based on the information and declaration given by you through telephonic conversation / email / web-inputs / TAB or other means which would be considered as the final proposal, the transcript of which is as follows:

You are requested to yourself reconfirm the same at your end. In case of our non-receipt of your disagreement or objection or any changes [as mentioned hereinabove] with respect to information mentioned below, it shall be deemed that you have positively confirmed to us the correctness of the below mentioned transcript and declaration. Where you disagree to any of information/contents of this transcript, standard Terms or conditions, you have the option to return the original Policy stating the reasons for your objection, and upon our receipt of original Policy together with your request to cancel the Policy, shall be entitled to a refund of the premium paid, subject only to there being no claim made under the Policy and also subject to a deduction of the expenses incurred by us and the stamp duty charges. Kindly note that as the information/contents and declarations/confirmations provided by you as contained in this transcript is the basis on which we have issued the Policy to you, we advise you to please ensure that you have provided/disclosed and or not withheld any material facts/information and declarations, as Policy becomes Void ab-initio if material facts are not provided/disclosed and or withheld and in such case no claim, if any, will be considered by us apart from forfeiture of the premium.

| Personal Information of Insured               |                                         |                                   |                                         |
|-----------------------------------------------|-----------------------------------------|-----------------------------------|-----------------------------------------|
| Title<br>[Mr/Mrs/Ms/Company/<br>other entity] |                                         | Insured Name                      | PROLOGIC FIRST INDIA PVT LTD            |
| Email Address                                 | Kohli@prologicfirst.com                 | Mobile Number                     | 9873430075                              |
| Date of Birth                                 |                                         | Nationality                       |                                         |
| Pan No                                        | AAACP6397A                              | Unique Identity (Aadhaar<br>No.)  |                                         |
| Permanent Address                             |                                         | Mailing Address                   |                                         |
| House No/ Building No/<br>Flat No             | 511 5TH FLOOR GLOBAL FOYER<br>SECTOR 43 | House No/ Building No/<br>Flat No | 511 5TH FLOOR GLOBAL FOYER<br>SECTOR 43 |
| Street/ Locality/ Land-<br>mark               |                                         | Street/ Locality/ Land-<br>mark   |                                         |
| State                                         | HARYANA                                 | State                             | HARYANA                                 |
| City                                          | GURGAON                                 | City                              | GURGAON                                 |
| Area                                          | INDUSTRIAL COMPLEX DUNDA-<br>HERA       | Area                              |                                         |
| Pincode                                       | 122016                                  | Pincode                           | 122016                                  |

1. a) Name of the financial institution/s (if any financial interest is involved):  
b) Nature of Trade or Business: Simple
2. Address of the premises to be insured:  
House No/ Building No/ Flat No: 511, 5TH FLOOR, Global Foyer, Sector 43  
Street/ Locality/ Landmark:  
State: INDUSTRIAL COMPLEX DUNDAHARA  
City: GURGAON  
Area: HARYANA  
Pincode: 122016
- 3.a) Whether warehouse, godown, shop or office? NA  
b) How long have you been an occupant of the premises? NA  
c) Are you the sole occupant? NA  
d) If not, who are other occupants? NA
4. What materials are used for construction (e.g. concrete, bricks, iron sheet or timber etc.)  
a) Walls: \_\_\_\_\_



b) Roof: \_\_\_\_\_  
c) Floor: \_\_\_\_\_

5. What protection is provided to?

- a) Doors: NA
  - b) Windows: NA
  - c) Skylights, ventilators, exhaust fans, Lights air conditioners, Trap doors: NA
  - d) Any other openings: NA
  - e) Mention any special precautions you have adopted for safeguarding your property: NA
- 6 a) Are the premises occupied by you at night? If not, by whom? NA  
b) Are the premises guarded by: Watchmen? If so by how many and during what time? NA  
c) Are the premises at any time left unoccupied? NA  
d) If so, how often and for how long? NA

7.A) Are all valuables secured in a safe(s) outside business hours? NA

B) Give

(1) Maker's name NA

(2) Height NA

(3) Width NA

(4) Depth NA

(5) Weight of Safe (s) NA

C) How many keys are there to the safe (s) and with whom are they kept? Can the safe(s) be opened by single key or by a combination of two or more keys? NA

8.A. Are stock and sales book maintained? NA

B. How frequently are these entered? NA

C. How often is stock taken? NA

D. Where are these books kept out of business hours? NA

9.A. Have any premises occupies by you been entered by thieves? NA

B. If so, give full particulars stating when and how access was obtained and the extent of the loss: NA

C. What precautions have been adopted to prevent such a recurrence? NA

10. A) The name of your existing insurance company: \_\_\_\_\_

B. Policy No.: OG-26-1155-4010-00023682

C. Period.: 11 Months 30 Days Months

11. In respect of property under your Burglary Insurance proposal, has any other insurance company or the Company:

A. Declined your proposal? NA

B. Cancelled or refused to renew your policy? NA

C. Accepted your proposal on special terms and conditions? NA

12. Have you ever claimed upon any insurance for loss by burglary or house breaking? If so, give details:

13. Amount for which contents are currently insured against fire and name of the Insurer: NA

14. Give full description of contents (i.e. the property to be insured) of the premises: NA

15. Do you need cover against riot and strike, terrorist activities on the payment of additional premium? NA

**16. PROPERTY TO BE INSURED (GIVE FULL DETAILS)**

| Item         | Sum to be insured (Rs) |
|--------------|------------------------|
| Contents     | 7,35,000.00            |
| <b>Total</b> | <b>7,35,000.00</b>     |

**N. B: To obtain full indemnity it is necessary to insure for the full value the property in the premises.**

17. Policy period sought from: 31-MAR-26 To: 30-MAR-27

18.(i) Is the insured location protected by a burglar alarm system? NA

(ii) If no, will be installed within NA days

(iii) If yes or will be installed, please give details of the alarm system. NA

(iv) Are there any other security systems or aids deployed, and if so what? NA

19. Is the burglar alarm system under a maintenance contract? NA

If yes \_\_\_\_\_ Quarterly \_\_\_\_\_ ½ yearly \_\_\_\_\_ Annually \_\_\_\_\_



20. Will the burglar alarm system and any other security systems or aids mentioned in answer to questions 18 and 19 be maintained as required so that they are in good working order and deployed for the prevention of any claim under the policy sought? NA

21. To Support Go Green initiative, send policy copy link on registered mobile number / email id :

I/We hereby give voluntary consent to BGIL/Company to share my/our personal information and data provided in this proposal form with its group companies or any other person in connection with the Insurance Policy or otherwise, including for providing products and services of group companies that may be of interest to me/us, to be used in accordance with their respective privacy policies and subject to appropriate measures being in place to safeguard my/our personal information: Yes

**DECLARATIONS AND WARRANTIES:**

A. The contents of the proposal [transcript of proposal of you is this document] and connected documents have been fully explained to you and you have fully understood the significance of the proposed contract basis which you have confirmed for policy issuance.

B. You declare that the statements and particulars given in this transcript are complete, true and accurate to the best of your personal knowledge and belief.

C. I authorize the Company to share information pertaining to my proposal for the sole purpose of underwriting the proposal and/or claims settlement and with any Governmental and/or Regulatory authority, reinsurers, group companies, auditors/legal counsel, service providers etc.,

D. I agree that the Standard Terms and Conditions sent to me for the Policy taken by me for the first time shall be applicable to the renewal Policy and the Company need not sent the Standard Terms and Conditions at the time of renewal and if I/we require the same I/We will seek the same from the Company.

Toll free Number: 1800-103-2529, 1800-102-5858 and 1800-209-5858

Email address: careforyou@bajajgeneral.com

Website: www.bajajgeneralinsurance.com

Contact our Policy servicing branch at: Block No -4, 07th Floor, DLF Towers, 15, Shivaji Marg, New Delhi-110015, Phone No: 01166278000

\*\* This is print of electronic records maintained by us in accordance with law and hence does not require signature.

Scrutiny No: 494735599

**SECTION 41 OF INSURANCE ACT, 1938**

No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer. Any person making default in complying with the provisions of this section shall be punishable with a penalty, which may extend to Ten Lakh Rupees.



Bajaj General Insurance Limited  
(Formerly known as Bajaj Allianz General Insurance Co. Ltd.).

Bajaj Insurance House, Airport Road, Yerwada, Pune - 411006 (India)  
**BURGLARY INSURANCE POLICY POLICY SCHEDULE**  
**UIN: IRDAN113CP0023V02201920**

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc. : Block No -4, 07th Floor, DLF Towers, 15, Shivaji Marg, New Delhi-110015 Phone No :01166278000

|                      |                                                                                                             |                                 |                          |
|----------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------|
| Policy No.           | OG-26-1155-4010-00023682                                                                                    | Fire Policy No.                 | OG-26-1155-4056-00030418 |
| Product              | BURGLARY INSURANCE POLICY                                                                                   |                                 |                          |
| Period of Insurance  | From 00:01 31-MAR-26 To 30-MAR-27 Mid- night                                                                | Policy Issued On                | 31-MAR-26                |
| Co-Insurance Details | Own Share: 100%                                                                                             |                                 |                          |
| Insured Name         | PROLOGIC FIRST INDIA PVT LTD                                                                                |                                 |                          |
| Insured Address      | 511 5TH FLOOR GLOBAL FOYER SECTOR 43, , PO Area - INDUSTRIAL COMPLEX DUNDAHERA, , GURGAON, HARYANA - 122016 |                                 |                          |
| Bank Details :       | No Details                                                                                                  | No Details                      |                          |
| GSTIN / UIN          | 06AAACP6397A1ZJ                                                                                             | Place of Supply/State Code/Name | 06 - Haryana             |
| Company GST No :     | 07AABCB5730G1ZZ                                                                                             | Invoice No :                    | 481138958/1              |
| Company PAN :        | AABCB5730G                                                                                                  |                                 |                          |
| Mobile No :          |                                                                                                             | Email ID :                      |                          |
| CoverNote No.        | 0                                                                                                           |                                 |                          |

| Location Description | Address                                                                                     | Item Description               | Item SI     | Item Premium |
|----------------------|---------------------------------------------------------------------------------------------|--------------------------------|-------------|--------------|
| Simple               | 511, 5TH FLOOR, Global Foyer, Sector 43 INDUSTRIAL COMPLEX DUNDAHERA GURGAON HARYANA 122016 | Computers AND Office Equipment | 7,35,000.00 | 221.00       |

|                        |        |
|------------------------|--------|
| Additional** Loading @ | %      |
| Additional Discount@   | %      |
| Base Premium           | 221.00 |
| Special Discount       |        |
| Net Premium            | 221.00 |
| Terrorism** Surcharge  | 0.0    |
| Stamp Duty             |        |
| Integrated GST (18%)   | 40.00  |
| Final Premium          | 261.00 |

\*\*\* All Premium figures are in Rupee.

On specific request and subject to terms and conditions, record of information exchange will be made available.

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year.

I/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.

|                    |                                                                                                                                                                           |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Scope of Cover     | As per the policy wording attached.                                                                                                                                       |
| Risk Covered       | -1                                                                                                                                                                        |
| Special Perils     | -2                                                                                                                                                                        |
| Special Exclusions | -                                                                                                                                                                         |
|                    | Larceny and terrorism.                                                                                                                                                    |
|                    | The exclusion for direct and indirect loss as a result of infectious diseases or contagious disease; including but not limited to diseases arising out of corona viruses. |
|                    | Any change with respect to Any changes/revised rates/revised instructions from regulatory/supervisory bodies like IRDA/IIB/GIC Re/GI Council.                             |
|                    | Cyber Risk exclusion NMA 2915.                                                                                                                                            |
|                    | Sanction and Limitations clause.                                                                                                                                          |
|                    | THEFT & RSMD                                                                                                                                                              |
| Exclusion          | Theft                                                                                                                                                                     |
| Exclusion          | Rsmd                                                                                                                                                                      |
| Exclusion          | Larceny and Terrorism                                                                                                                                                     |
| Subject to Clauses |                                                                                                                                                                           |



Warranties  
Special Conditions For burglary FIR is mandatory.  
Excess 5% of the claim amount subject to a min of Rs 2500 each claim

Remarks  
Disclaimer  
Comments -  
Bank RM Employee Code : Y

|                                    |                   |
|------------------------------------|-------------------|
| Agency Code 10014704               | Channel Name : BA |
| Agency Name : HDFC BANK            |                   |
| Contact No : 2261606161/2261606161 |                   |
| Email - support@hdfcbank.com       |                   |
| SP/POSP Code :                     |                   |

Premium Collection Details [Receipt No/Collection No/Amount] 1155-00621300 / 494735599 / Rs. 261.00 ,  
\*\*\* If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque  
\*\*\* This policy is subject to the standard policy wordings, warranties and conditions applicable for this product in addition to any specific warranty or condition attached



For & On Behalf of Bajaj General Insurance Limited.

Authorized Signatory  
Printed , Signed and Executed at Pune



This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Insurance House,Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.  
Consolidated stamp duty of Rs. 0.50/- paid for insurance policy stamps Challan No. MH010139001202526M Order No. LOA/ENF-1/CSD/121/2025 Order Dated 10-NOV-25 Defaced Date dated 10-NOV-25 having validity from 10-NOV-25 to 31-OCT-27 of General Stamp Office, Mumbai, India.  
BGIL GST No : :a | Principal Location : Block No-4, 7th Floor, DLF Towers, 15, Shivaji Marg, -, New Delhi - 110015 PH:011-66278000 | Services Accounting Code : 997137 - Other property insurance services. No reverse charge is payable on these services.

In case of any claim, please contact our 24 Hour Call centre at 1800-102-5858 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'careforyou@bajajgeneral.com'.

It is mandatory to keep your policy with updated contact (Mobile No., Email ID and PAN Card) and bank account details, to process any of your service requests faster and hassle-free in future.  
You can update the same through Caringly yours App {Link}, WhatsApp Service { Say Hi on WhatsApp +91 75072 45858}, Contact our 24-Hour Call Center at 1800-209-5858, 1800-102-5858, Give a Missed Call on 8080945060, SMS WORRY to 575758, Email careforyou@bajajgeneral.com, website {https://www.bajajgeneralinsurance.com/}, contact your agent or nearest branch.

494735599/-/10014704/10011719/0

Prefix your area code if you are calling from a Mobile Device.

A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

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**Bajaj General Insurance Limited**  
**Bajaj Insurance House, Airport Road, Yerwada, Pune - 411006 (India),**  
**Reg. no. 113 CIN: U66010PN2000PLC015329**  
**UIN : IRDAN113CP0023V02201920**

## Issuing Office

# BURGLARY INSURANCE POLICY

## Policy Wordings

Whereas the Insured has made to Bajaj General Insurance Limited (hereinafter called the "Company"), a proposal which is hereby agreed to be the basis of this Policy and has paid the premium specified in the Schedule, now the Company agrees, subject always to the following terms, conditions, exclusions, and limitations, to indemnify the Insured in excess of the amount of the Deductible and subject always to the Limit of Indemnity against such loss as is herein provided.

### Operative Clause

The Company will indemnify the Insured for Claims made in respect of: 1.1 Loss of or damage to Contents or any part thereof whilst contained in the Insured Premises caused by actual or attempted Burglary and/or Robbery during the Policy Period; 1.2 Property Damage (including the reasonable costs incurred by the Insured for changing damaged locks at the entry and/or exit points to the Insured Premises and at internal entry and/or exit points) caused by actual or attempted Burglary during the Policy Period; 1.3 In the event of an admitted Claim under Operative Clause 1.1 and/or 1.2, then the Company will also indemnify the Insured in respect of the reasonable costs incurred by the Insured: 1.3.1 immediately after the occurrence of an insured event solely with the intention of minimising the quantum of a Claim to be made under this Policy; 1.3.2 for restoring paper files, plans, records and drawings, and restoring data (including computer software) stored electronically on the Insured's computer system if such are used for the Insured's Business; 1.3.3 in clearing up the damage caused to the Insured Premises, including the removal of any debris from the Insured Premises to the nearest waste disposal site; 1.3.4 for replacing or restoring property (other than vehicles and Valuables) belonging to any Employee that was in the Insured Premises at the time of an insured event at the specific request of the Insured and stored by an Employee as required by the Insured.

### 2 Definitions

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy, and references to the singular or to the masculine shall include references to the plural and to the female wherever the context so permits: 2.1 "Property Damage" means actual physical damage to the Insured Premises caused by actual or attempted Burglary. 2.2 "Policy Period" means the period between the commencement date and the expiry date shown in the Schedule. 2.3 "Insured Premises" means the place(s) named in the Schedule. 2.4 "Policy" means the proposal, the Schedule, this policy document, and any endorsement attaching to or forming part hereof, either at inception or during the Policy Period. 2.5 "Schedule" means the schedule, and any annexure to it, attached to and forming part of this Policy. 2.6 "Deductible" means the amount stated in the Schedule, which shall be borne by the Insured in respect of each and every Claim made under this Policy. 2.7 "Limit of Indemnity" means the amount stated in the Schedule, which shall be the Company's maximum liability under this Policy (regardless of the number of the total number or amount of Claims made) for any one Claim or in the aggregate for all Claims during the Policy Period for each category of Contents specified in the Schedule and at all times subject to Special Condition 4 below. 2.8 "Contents" means items specified in the Schedule. 2.9 "Business" means the business of the Insured as stated in the Schedule. 2.10 "Burglary" means the unforeseen and unauthorised entry to or exit from the Insured Premises by aggressive and detectable means with the intent to steal Contents therefrom. 2.11 "Claim" means a claim under an Operative Part in respect of an insured event that has taken place or is likely to take place. 2.12 "Robbery" means the theft of Contents at the Insured Premises using unforeseen, aggressive and violent means against the Insured's Employees. 2.13 "Employee" means any person with whom the Insured has entered into a contract of service. 2.14 "Unused" means unoccupied for a consecutive period of 7 days or more. 2.15 "Valuables" means: 2.15.1 gold or silver or any precious metals or articles made from any precious metals; 2.15.2 watches or jewellery or precious stones or models or coins or curios, sculptures, manuscripts, stamps, collections of stamps, rare books, medals, moulds, designs or any other collectibles; 2.15.3 deeds, ATM cards, credit cards, charge cards, bonds, bills of exchange, bank notes, treasury or promissory notes, cheques, money, securities, or any other negotiable instrument;

### 3 Exclusions

No indemnity is available hereunder for any Claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following: 3.1 Valuables, unless specifically covered in the Schedule. 3.2 In which the Insured, any Employee or any other person lawfully on or about the Insured Premises is or is alleged to be in any way concerned or implicated. 3.3 Earthquake, flood, storm, cyclone or other convulsions of nature or atmospheric disturbances. 3.4 War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion, unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority, riot, strike, or terrorist activities. 3.5 Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. 3.6 The radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof. 3.7 Any consequential losses of any kind, be they by way of loss of profit, business interruption, market loss or otherwise, and any other legal liability of any kind. 3.8 Contents from any safe following the use of a key to gain access to the safe, or any duplicate thereof belonging to the Insured unless such key has been obtained by Robbery. 3.9 Any motorised vehicle or trailer of any type or description. 3.10 Livestock. If the Company asserts that by reason of these Exclusions any Claim is not covered by this Policy, the burden of proving that such Claim is covered shall be upon the Insured.

### 4 Special Condition: No Reinstatement of Sum Insured

Immediately upon the happening of any insured event, the Limit of Indemnity shall be reduced by the amount of the loss or damage claimed and the reduced Limit of Indemnity shall then represent the maximum liability of the Company in respect of any further Claims made during the Policy Period, unless the Company consents, upon the Insured's payment of any additional premium requested, to reinstate the Limit of Indemnity to the level available at the inception of this Policy.

### 5 General Conditions

#### 5.1 Due Observance by the Insured

The due observance of and compliance with the terms, provisions, warranties and conditions of this Policy insofar as they relate to anything to be done or complied with by the Insured shall be a condition precedent to any liability of the Company under this Policy.

#### 5.2 Reasonable Precautions

The Insured shall: 5.2.1 Take all reasonable steps to safeguard the Contents and the Insured Premises against any insured event. 5.2.2 Ensure that any security system or aid specified in the Proposal is maintained in accordance with any maintenance schedule or recommendations of the manufacturer or if none then as may be required, and kept in good and effective working condition. 5.2.3 Out of normal office or business hours, ensure that: 5.2.3.1 all means of entry to or exit from the Insured Premises have been properly secured, and 5.2.3.2 all safety installations and aids (including but not limited to, any burglar alarm system) have been properly deployed, and 5.2.3.3 any security system or aid specified in the Proposal has been properly deployed, and 5.2.3.4 the keys of or codes to any safe or strong room are removed from the Insured Premises unless the Insured Premises and, if there are several keys and/or codes for one safe or strong room, that these are kept separately from each other.

#### 5.3 Alteration of Risk

The cover afforded under this Policy shall be suspended and no payment shall be made hereunder if: 5.3.1 the Insured carries on any business at the Insured Premises other than the Business, and/or 5.3.2 there is any material change in the facts and matters stated in the proposal, and/or 5.3.3 the ownership of the Contents and/or the Insured Premises passes from the Insured to any other person or entity otherwise than by the operation of the law of succession as applicable, and/or 5.3.4 if the Insured Premises are Unused, And such suspension shall continue until



such time as the Company has agreed to lift the suspension and the Insured has paid any additional premium that may be requested by the Company.

#### 5.4 Claim Procedure

It is a condition precedent to the Company's liability under this Policy that, upon the happening of any event giving rise to or likely to give rise to a Claim under this Policy: 5.4.1 the Insured shall within 14 days give written notice of the same to the address shown in the Schedule for this purpose, and in case of notification of an event likely to give rise to a Claim to specify the grounds for such belief, and 5.4.2 immediately lodge a complaint with the police detailing the items lost and/or damaged and in respect of which the Insured intends to claim, and provide a copy of that written complaint, the First Information Report and/or Final Report to the Company, and 5.4.3 the Insured shall within 14 days deliver to the Company a detailed written statement of the loss or damage that has occurred and an estimate of the quantum of any Claim along with all documentation required to support and substantiate the amount sought from the Company, and 5.4.4 the Insured shall expeditiously provide the Company and its representatives and appointees with all the information, assistance and documentation that they might reasonably require, and 5.4.5 take all reasonable steps to affect a recovery of the perpetrators of the Burglary and/or Robbery and recover any Contents lost 5.4.6 On receipt of all required information/ documents that are relevant and necessary for the claim, the Company shall, within a period of 30 days offer a settlement of the claim to the insured. If the Company, for any reasons, decides to reject a claim under the policy, it shall do so within a period of 30 days from the receipt of last relevant and necessary document. In the event the claim is not settled within 30 days as stipulated above, the insurer shall be liable to pay interest at a rate, which is 2% above the bank rate from the date of receipt of last relevant and necessary document from the insured/claimant by insurer till the date of actual payment.

#### 5.5 Limits of Indemnity and Calculation of Loss Payment

5.5.1 Subject to Special Condition 4 above and the Insured's Deductible, in respect of any Claim under: 5.5.1.1 Operative Clauses 1.1 and/or 1.2, the Company's maximum liability shall be the Limit of Indemnity or all that remains thereof. 5.5.1.2 Operative Clause 1.3.1, the Company's maximum liability shall be up to 10% of the Limit of Indemnity or all that remains thereof subject to a maximum of Rs. 1 Lac each Claim.. 5.5.1.3 Operative Clause 1.3.2, the Company's maximum liability shall be up to Rs.10,000/- for each Claim. 5.5.1.4 Operative Clause 1.3.3, the Company's maximum liability shall be up to 10% of the Limit of Indemnity or all that remains thereof, whichever is less subject to maximum of Rs.10,000/- 5.5.1.5 Operative Clause 1.3.4, the Company's maximum liability shall be up to Rs.5,000/- for each Claim. 5.5.2 The Company may in its sole and absolute discretion either: 5.5.2.1 reinstate, replace or repair the Contents lost or damaged or any part thereof; 5.5.2.2 reinstate or repair the Insured Premises but the Company shall not be bound to reinstate exactly or completely but only as circumstances permit and in a reasonably sufficient manner and in no case shall the Company be bound to expend more in reinstatement or repair than it would have cost to replace the same, and subject always to the Limit of Indemnity

#### 5.6 Average

If the property hereby insured shall at the time of any Claim be collectively of greater value than the sum insured thereon, then the Insured shall be considered as being his own insurer for the difference, and shall bear a rateable proportion of the loss or damage accordingly. Every item insured hereunder shall be separately subject to this condition.

#### 5.7 Contribution

If, at the time of the happening of any loss or damage covered by this Policy, there shall be existing any other insurance of any nature whatsoever covered by the same, whether effected by the Insured or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage.

#### 5.8 Subrogation

The Insured and any claimant under this Policy, shall at the expense of the Company do or concur in doing or permit to be done all such acts and things that may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or obtaining relief or indemnity from other parties to which the Company shall be or would become entitled or subrogated upon the Company paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the Insured's indemnification by this Company.

#### 5.9 Fraud

If the Insured shall make or advance any Claim knowing the same to be false or fraudulent as regards amount or otherwise, this Policy shall be void and all Claims or payments hereunder shall be forfeited.

#### 5.10 Cancellation

This Policy may be cancelled by the Insured at any time by giving at least 7 days written notice to the Company. Provided there has been no Claim under this Policy, the Company will refund premium according to the Company's short-period scale. This insurance may also be cancelled by or on behalf of the Company by giving the Insured at least 7 days written notice to the address stated in the Schedule. The Company will retain premium on a pro-rata basis corresponding to the period that has then elapsed under the Policy, but retaining least 25% of the annual premium. If there has been any Claim under this policy no premium shall be refunded. Under normal circumstances, the Policy will not be cancelled except for reasons of mis-representation, fraud, non-disclosure of material facts or non-cooperation of the Insured

#### 5.11 Arbitration

5.11.1 Any and all disputes or differences, which may arise under or in relation to this Policy, including its interpretation or the quantum of any Claim shall be referred to arbitration and to a sole arbitrator to be appointed in accordance with Arbitration and Conciliation Act 1996, as amended from time to time, within a period of 30 days of either the Company or the Insured giving notice of a dispute or difference. 5.11.2 The applicable law in and of the arbitration shall be the law of India. 5.11.3 The expenses of the arbitrator(s) shall be shared between the parties equally and such expenses, along with all reasonable costs in the conduct of the arbitration, shall be awarded by the arbitrator(s) to the successful party or, where no party can be said to have been wholly successful, to such party as has substantially succeeded. 5.11.4 It is agreed a condition precedent to any right of action or suit upon this Policy that an award by such arbitrator or arbitrators shall be first obtained. 5.11.5 In the event that these arbitration provisions shall be held to be invalid then all such disputes shall be referred to the exclusive jurisdiction of the Indian Courts.

#### 5.12 Renewal Notice

The Company shall not be bound to accept any renewal premium nor give notice that such renewal is due. On renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may subject to change.

#### 5.13 Notifications and Declarations

Any and all notices and declarations for the attention of the Company shall be submitted in writing and shall be sent to the address specified in the Schedule.

#### 5.14 Governing Law

The construction, interpretation and meaning of the provisions of this Policy shall be determined in accordance with the law of India. The section headings of this Policy are included for descriptive purposes only and do not form part of this Policy for the purpose of its construction or interpretation. The terms of this Policy shall not be waived or changed except by endorsement issued by the Company.

#### 5.15 Territorial Limits

The indemnity provided under this Policy is restricted to Claims brought in India and determined according to Indian law, and the obligation of the Company to make payment shall be to make payment in Indian Rupees only.

#### Resolving Issues

We do our best to ensure that our customers are delighted with the service they receive from Bajaj General Insurance Limited. If you are dissatisfied we would like to inform you that we have a procedure for resolving issues. Please include your policy number in any communication. This will help us deal with the issue more efficiently. If you don't have it, please call your Branch office.

#### First Step

Initially, we suggest you contact the Branch Manager / Regional Manager of the local office which has issued the policy. The address and telephone number will be available in the policy.

#### Second Step

Naturally, we hope the issue can be resolved to your satisfaction at the earlier stage itself. But if you feel dissatisfied with the suggested resolu-



tion of the issue after contacting the local office, please e-mail or write to: Customer Care Cell Bajaj General Insurance Limited Bajaj Insurance House, Airport Road, Yerwada, Pune - 411006 (India), E-mail:[careforyou@bajajgeneral.com](mailto:careforyou@bajajgeneral.com)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Level 1 In case you have any concern, you may please reach out to our Customer Experience Team through any of the following options:<br>Our Website @ <a href="https://portal.bajajgeneral.com/Corp/aboutus/general-insurance-customer-service.jsp">https://portal.bajajgeneral.com/Corp/aboutus/general-insurance-customer-service.jsp</a><br>Call us on our Toll free no 1800 209 5858<br>Mail us on <a href="mailto:careforyou@bajajgeneral.com">careforyou@bajajgeneral.com</a><br>Write to Bajaj General Insurance Limited.<br>Bajaj Insurance House, Airport Road, Yerwada, Pune - 411006 (India) |
| Level 2 In case you are not satisfied with the response given to you by our team, you may write to our Grievance Redressal Officer Mr. Jerome Vincent at <a href="mailto:ggro@bajajgeneral.com">ggro@bajajgeneral.com</a>                                                                                                                                                                                                                                                                                                                                                                               |
| Level 3 If in case, your grievance is not resolved and you wish to talk to our care specialist, please Give a missed on +91 80809 45060 OR SMS WORRY To 575758 and our care specialist will call you back                                                                                                                                                                                                                                                                                                                                                                                               |
| If you are still not satisfied with the solutions provided, write to Mr. Ankit Goenka, Head of Customer experience directly at <a href="mailto:head.customerservice@bajajgeneral.com">head.customerservice@bajajgeneral.com</a> .                                                                                                                                                                                                                                                                                                                                                                       |
| Grievance Redressal Cell for Senior Citizens Bajaj General Insurance Limited introduces a dedicated team for all the senior citizens, so no more wait time, no more standing in long queue. Senior citizens can now contact us on 1800-103-2529 or write to us at <a href="mailto:seniorcitizen@bajajgeneral.com">seniorcitizen@bajajgeneral.com</a>                                                                                                                                                                                                                                                    |

In case your complaint is not fully addressed by the insurer, You may use the Integrated Greivance Management System (IGMS) for escalating the complaint to IRDAI or call 155255 . Through IGMS you can register your complain online and track its status. For registration please visit IRDAI website [www.irda.gov.in](http://www.irda.gov.in).

| Office Details                                                                                                                                                                                                                                                                                                                                               | Jurisdiction of Office Union Territory, District) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| <b>AHMEDABAD - Shri Kuldip Singh</b><br>Office of the Insurance Ombudsman,<br>Jeevan Prakash Building, 6th floor,<br>Tilak Marg, Relief Road,<br>Ahmedabad - 380 001.<br>Tel.: 079 - 25501201/02/05/06<br>Email: <a href="mailto:bimalokpal.ahmedabad@cioins.co.in">bimalokpal.ahmedabad@cioins.co.in</a>                                                    | Gujarat, Dadra and Nagar Haveli, Daman and Diu.   |
| <b>BENGALURU - Smt. Neerja Shah</b><br>Office of the Insurance Ombudsman,<br>Jeevan Soudha Building, PID No. 57-27-N-19<br>Ground Floor, 19/19, 24th Main Road,<br>Bengaluru - 560 078.<br>Tel.: 080 - 26652048 / 26652049<br>Email: <a href="mailto:bimalokpal.bengaluru@cioins.co.in">bimalokpal.bengaluru@cioins.co.in</a>                                | Karnataka.                                        |
| <b>BHOPAL - Shri Guru Saran Shrivastava</b><br>Office of the Insurance Ombudsman,<br>Janak Vihar Complex, 2nd Floor,<br>6, Malviya Nagar, Opp. Airtel Office,<br>Near New Market,<br>Bhopal - 462 003.<br>Tel.: 0755 - 2769201 / 2769202<br>Fax: 0755 - 2769203<br>Email: <a href="mailto:bimalokpal.bhopal@cioins.co.in">bimalokpal.bhopal@cioins.co.in</a> | Madhya Pradesh Chattisgarh                        |
| <b>BHUBANESHWAR - Shri Suresh Chandra Panda</b><br>Office of the Insurance Ombudsman,<br>62, Forest park,<br>Bhubneshwar - 751 009.<br>Tel.: 0674 - 2596461 /2596455                                                                                                                                                                                         | Orissa.                                           |



|                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                               |
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| <p>Fax: 0674 - 2596429<br/>Email: bimalokpal.bhubaneswar@cioins.co.in</p>                                                                                                                                                                                                                                                    |                                                                                                                                                               |
| <p><b>CHANDIGARH - Dr. Dinesh Kumar Verma</b><br/><br/>Office of the Insurance Ombudsman,<br/>S.C.O. No. 101, 102 and 103, 2nd Floor,<br/>Batra Building, Sector 17 - D,<br/>Chandigarh - 160 017.<br/>Tel.: 0172 - 2706196 / 2706468<br/>Fax: 0172 - 2708274<br/>Email: bimalokpal.chandigarh@cioins.co.in</p>              | <p>Punjab, Haryana(excluding Guru-gram, Faridabad, Sonapat, Bahadurgarh), Himachal Pradesh, Union Territories of Jammu and Kashmir, Ladakh and Chandigarh</p> |
| <p><b>CHENNAI - Shri M. Vasantha Krishna</b><br/><br/>Office of the Insurance Ombudsman,<br/>Fatima Akhtar Court, 4th Floor, 453,<br/>Anna Salai, Teynampet,<br/>CHENNAI - 600 018.<br/>Tel.: 044 - 24333668 / 24335284<br/>Fax: 044 - 24333664<br/>Email: bimalokpal.chennai@cioins.co.in</p>                               | <p>Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).</p>                                                                             |
| <p><b>DELHI - Shri Sudhir Krishna</b><br/><br/>Office of the Insurance Ombudsman,<br/>2/2 A, Universal Insurance Building,<br/>Asaf Ali Road,<br/>New Delhi - 110 002.<br/>Tel.: 011 - 23232481/23213504<br/>Email: bimalokpal.delhi@cioins.co.in</p>                                                                        | <p>Delhi and Following Districts of Haryana - Gurugram, Faridabad, Sonapat and Bahadurgarh.</p>                                                               |
| <p><b>GUWAHATI - Shri Kiriti .B. Saha</b><br/><br/>Office of the Insurance Ombudsman,<br/>Jeevan Nivesh, 5th Floor,<br/>Nr. Panbazar over bridge, S.S. Road,<br/>Guwahati - 781001(ASSAM).<br/>Tel.: 0361 - 2632204 / 2602205<br/>Email: bimalokpal.guwahati@cioins.co.in</p>                                                | <p>Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura</p>                                                                            |
| <p><b>HYDERABAD - Shri I. Suresh Babu</b><br/><br/>Office of the Insurance Ombudsman,<br/>6-2-46, 1st floor, "Moin Court",<br/>Lane Opp. Saleem Function Palace,<br/>A. C. Guards, Lakdi-Ka-Pool,<br/>Hyderabad - 500 004.<br/>Tel.: 040 - 23312122<br/>Fax: 040 - 23376599<br/>Email: bimalokpal.hyderabad@cioins.co.in</p> | <p>Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry</p>                                                                                  |
| <p><b>JAIPUR - Smt. Sandhya Baliga</b><br/><br/>Office of the Insurance Ombudsman,<br/>Jeevan Nidhi - II Bldg., Gr. Floor,<br/>Bhawani Singh Marg,<br/>Jaipur - 302 005.<br/>Tel.: 0141 - 2740363<br/>Email: Bimalokpal.jaipur@cioins.co.in</p>                                                                              | <p>Rajasthan.</p>                                                                                                                                             |
| <p><b>ERNAKULAM - Ms. Poonam Bodra</b></p>                                                                                                                                                                                                                                                                                   | <p>Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.</p>                                                                                     |



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| Office of the Insurance Ombudsman,<br>2nd Floor, Pulinat Bldg.,<br>Opp. Cochin Shipyard, M. G. Road,<br>Ernakulam - 682 015.<br>Tel.: 0484 - 2358759 / 2359338<br>Fax: 0484 - 2359336<br>Email: bimalokpal.ernakulam@cioins.co.in                                                     |                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>KOLKATA - Shri P. K. Rath</b><br><br>Office of the Insurance Ombudsman,<br>Hindustan Bldg. Annexe, 4th Floor,<br>4, C.R. Avenue,<br>KOLKATA - 700 072.<br>Tel.: 022 - 26106552 / 26106960<br>Fax: 022 - 26106052<br>Fax : 033 22124341<br>Email: bimalokpal.kolkata@cioins.co.in   | West Bengal, Sikkim, Andaman and Nicobar Islands                                                                                                                                                                                                                                                                                                                                                 |
| <b>MUMBAI - Shri Milind A. Kharat</b><br><br>Office of the Insurance Ombudsman,<br>3rd Floor, Jeevan Seva Annexe,<br>S. V. Road, Santacruz (W),<br>Mumbai - 400 054.<br>Tel.: 022 - 26106552 / 26106960<br>Fax: 022 - 26106052<br>Email: bimalokpal.mumbai@cioins.co.in               | Goa, Mumbai Metropolitan Region excluding Navi Mumbai and Thane.                                                                                                                                                                                                                                                                                                                                 |
| <b>NOIDA - Shri Chandra Shekhar Prasad</b><br><br>Office of the Insurance Ombudsman,<br>Bhagwan Sahai Palace<br>4th Floor, Main Road,<br>Naya Bans, Sector 15,<br>Distt: Gautam Buddh Nagar,<br>U.P - 201301.<br>Tel.: 0120-2514252 / 2514253<br>Email: bimalokpal.noida@cioins.co.in | State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur. |
| <b>PATNA - Shri N. K. Singh</b><br><br>Office of the Insurance Ombudsman,<br>1st Floor, Kalpana Arcade Building,,<br>Bazar Samiti Road,<br>Bahadurpur,<br>Patna 800 006.<br>el.: 0612-2680952<br>Email: bimalokpal.patna@cioins.co.in                                                 | Bihar, Jharkhand                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>PUNE - Shri Vinay Sah</b><br><br>Office of the Insurance Ombudsman,<br>Jeevan Darshan Bldg., 3rd Floor,<br>C.T.S. No.s. 195 to 198,<br>N.C. Kelkar Road, Narayan Peth,<br>Pune - 411 030.<br>Tel.: 020-41312555<br>Email: bimalokpal.pune@cioins.co.in                             | Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region                                                                                                                                                                                                                                                                                                                  |

**Note:** Address and contact number of Governing Body of Insurance Council Secretary General Governing Body of Insurance Council Jeevan Seva Annexe, 3rd Floor, S.V. Road, Santacruz (W), Mumbai 400 054 Tel No: 022-2610 6889, 26106245, Fax No. : 022-26106949, 2610 6052, E-mail ID: [inscoun@cioins.co.in](mailto:inscoun@cioins.co.in)

**Bajaj General Insurance Limited.**

Block No -4, 07th Floor, DLF Towers, 15, Shivaji Marg, New Delhi - 110015  
Contact No:Contact No: 01166278000; Fax No: 01166278043

# RECEIPT

|                  |               |
|------------------|---------------|
| Receipt Number   | 1155-00621300 |
| Receipt Date     | 31/03/2026    |
| Business Channel | DIRECT        |

Received with thanks from      PROLOGIC FIRST INDIA PVT LTD

(Customer ID : 463447034 ) a total sum of Rupees Nine Thousand Two Hundred Eighteen Only by,

| Instrument Type | Instrument No. | Instrument Date | Bank Name | Branch Name | Amount |
|-----------------|----------------|-----------------|-----------|-------------|--------|
| Online Payment  | 115302964      | 31/03/2026      | NA        | NA          | 9,218  |

|                     |            |                 |
|---------------------|------------|-----------------|
| <b>Total Amount</b> | <b>Rs.</b> | <b>9,218.00</b> |
|---------------------|------------|-----------------|

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

\* Cheque/DD/PO receipt is valid subject to realisation of the instrument.

For & on behalf of

Bajaj General Insurance Limited.



Authorised Signatory

**Regd.Office: Bajaj Insurance House, Airport Road, Yerwada, Pune - 411006 (India)**