



**ACKO BHARAT SOOKSHMA UDYAM SURAKSHA  
POLICY SCHEDULE**

This is to certify that Acko Bharat Sookshma Udyam Suraksha Policy has been issued to the Proposer named below for the Policy Period as indicated. It is to be noted that the insurance accorded by the Policy described herein is subject to all the terms, exclusions and conditions contained within the Policy wordings.

|                                                                 |        |          |          |           |             |        |
|-----------------------------------------------------------------|--------|----------|----------|-----------|-------------|--------|
| <b>INTERMEDIARY DETAILS</b>                                     |        |          |          |           |             |        |
| Intermediary Name:                                              |        |          |          |           |             |        |
| Intermediary Code:                                              |        |          |          |           |             |        |
| Intermediary Contact:                                           |        |          |          |           |             |        |
| <b>POLICY DETAILS</b>                                           |        |          |          |           |             |        |
| Policy Number:                                                  |        |          |          |           |             |        |
| Policy Period:                                                  |        |          |          |           |             |        |
| <b>POLICYHOLDER DETAILS</b>                                     |        |          |          |           |             |        |
| Proposer Name:                                                  |        |          |          |           |             |        |
| Address (Permanent):                                            |        |          |          |           |             |        |
|                                                                 |        |          |          |           |             |        |
| Address (Correspondence):                                       |        |          |          |           |             |        |
|                                                                 |        |          |          |           |             |        |
| PAN No.                                                         |        |          |          |           |             |        |
| GSTN:                                                           |        |          |          |           |             |        |
| Contact No.:                                                    |        |          |          |           |             |        |
| Email ID:                                                       |        |          |          |           |             |        |
| Policyholder(s) Name:                                           |        |          |          |           |             |        |
| <b>BUSINESS AND LOCATION OF BUSINESS</b>                        |        |          |          |           |             |        |
| Business of Proposer                                            |        |          |          |           |             |        |
| Location of risk/business to be covered                         | SI No. | Address  | Pin Code | Occupancy | Age of Unit | Floor* |
|                                                                 | 1.     |          |          |           |             |        |
|                                                                 | 2.     |          |          |           |             |        |
|                                                                 | 3.     |          |          |           |             |        |
|                                                                 | 4.     |          |          |           |             |        |
| *Floor: Ground Floor (GF) / Mezzanine Floor (MF)                |        |          |          |           |             |        |
| <b>DETAILS ABOUT BUSINESS COVERED AT THE INSURED LOCATION</b>   |        |          |          |           |             |        |
| Details of Insured Property                                     |        |          |          |           |             |        |
| a. Offices, Shops, Hotels, etc                                  |        | Yes / No |          |           |             |        |
| b. Industrial / Manufacturing risks                             |        | Yes / No |          |           |             |        |
| c. Storage Outside Industrial / Manufacturing Risks             |        | Yes / No |          |           |             |        |
| d. Tanks / Gas Holders Outside Industrial / Manufacturing Risks |        | Yes / No |          |           |             |        |
| e. Utilities Located Outside Industrial/Manufacturing Risks.    |        | Yes / No |          |           |             |        |
| f. Boundary wall                                                |        | Yes / No |          |           |             |        |
| g. Basement storage                                             |        | Yes / No |          |           |             |        |

|                                                                                                                                      |                                      |         |       |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------|-------|
| h. If Basement storage, Sum Insured of goods stored (in ₹)                                                                           |                                      |         |       |
| i. Others                                                                                                                            |                                      |         |       |
| The list of goods stored if the Property is used as warehouse / godown (not located in a manufacturing unit)                         |                                      |         |       |
| Products manufactured at the location if the Property is used as an Industrial Manufacturing unit                                    |                                      |         |       |
| Whether detailed block plan showing various facilities has been enclosed if the Property is used as an Industrial Manufacturing unit | Yes / No                             |         |       |
| Whether the factory is working or silent if the Property is used as an Industrial Manufacturing unit                                 | Yes / No                             |         |       |
| Fire Protection devices installed                                                                                                    | Portable Extinguishers: Yes / No     |         |       |
|                                                                                                                                      | Small bore hose reels: Yes / No      |         |       |
|                                                                                                                                      | Trailer Pumps/Fire engines: Yes / No |         |       |
|                                                                                                                                      | Hydrant System: Yes / No             |         |       |
|                                                                                                                                      | Sprinkler System: Yes / No           |         |       |
|                                                                                                                                      | Fixed Water Spray System: Yes / No   |         |       |
|                                                                                                                                      | Foam System: Yes / No                |         |       |
|                                                                                                                                      | Fire Alarm System: Yes / No          |         |       |
|                                                                                                                                      | Gas Flooding System: Yes / No        |         |       |
|                                                                                                                                      | Others:                              |         |       |
| Whether AMC (Annual Maintenance contract) for the Fire Protection Appliances is in force                                             | Yes / No                             |         |       |
| Construction Details                                                                                                                 | Walls: Kutcha / Pucca                |         |       |
|                                                                                                                                      | Floor: Kutcha / Pucca                |         |       |
|                                                                                                                                      | Roof: Kutcha / Pucca                 |         |       |
| Number of Floors                                                                                                                     |                                      |         |       |
| Age of the Building                                                                                                                  | Less than 5 years                    |         |       |
|                                                                                                                                      | 5-10 years                           |         |       |
|                                                                                                                                      | 10-20 years                          |         |       |
|                                                                                                                                      | Above 20 years                       |         |       |
| Distance between the risk to be covered and nearest Fire Brigade                                                                     |                                      |         |       |
| Whether You have insured the same property with any other Insurance Company with the same type of coverage                           | Yes / No                             |         |       |
| Whether Insurance was declined by any other Company                                                                                  | Yes / No                             |         |       |
| Premium / Claim details for the past 36 months excluding the expiring policy period                                                  | Year                                 | Premium | Claim |
|                                                                                                                                      |                                      | ₹       | ₹     |
|                                                                                                                                      |                                      | ₹       | ₹     |
|                                                                                                                                      |                                      | ₹       | ₹     |
|                                                                                                                                      |                                      | ₹       | ₹     |
|                                                                                                                                      | TOTAL                                | ₹       | ₹     |

#### DETAILS FOR IN-BUILT COVER FOR FLOATER



|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         |       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------|----------------------------------------------------|--------------|---------------------------|--------------------------------|-------------------------|-------|
| Floater Cover (for stocks at various locations)                                                                                                                       | Location (Postal Address with Pin Code)                       |                   | Sum Insured (in ₹)                                 |              |                           |                                |                         |       |
|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         |       |
|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         |       |
|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Maximum value at any one location (in ₹)                                                                                                                              |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Whether stocks stored in open                                                                                                                                         |                                                               |                   | Yes / No                                           |              |                           |                                |                         |       |
| SUM INSURED DETAILS (S.I.)                                                                                                                                            |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Description of Block                                                                                                                                                  | Building including plinth, Basement and additional structures | Plant & Machinery | Furniture & Fixtures, Fittings and other equipment | Raw Material | Stocks-in process         | Finished Stock                 | Other Contents (if any) | Total |
|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         | ₹     |
|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         | ₹     |
|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         | ₹     |
|                                                                                                                                                                       |                                                               |                   |                                                    |              |                           |                                |                         | ₹     |
| Add-on Covers / Clauses Opted                                                                                                                                         |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Name of Add-on Cover / Clause                                                                                                                                         |                                                               |                   | Benefit Opted                                      |              | Sum Insured (₹), if opted |                                |                         |       |
| Declaration Policy for Stocks                                                                                                                                         |                                                               |                   | Yes/No                                             |              |                           |                                |                         |       |
| PREMIUM DETAILS (Rs.)                                                                                                                                                 |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Premium (without tax)                                                                                                                                                 |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Applicable Tax(s)                                                                                                                                                     |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Total Premium (with tax)                                                                                                                                              |                                                               |                   |                                                    |              |                           |                                |                         |       |
| The stamp duty of Rs. XXX paid vide receipt /Challan No. XXX dated DD-MM-YYYY                                                                                         |                                                               |                   |                                                    |              |                           |                                |                         |       |
| AGREED BANK CLAUSE (Rs.)                                                                                                                                              |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Applicable only if you have mortgaged, hypothecated or created any security over any Insured Property in favour of a Bank, and the Bank has an interest in the Policy |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Name of the Bank                                                                                                                                                      |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Location:                                                                                                                                                             |                                                               |                   |                                                    |              |                           |                                |                         |       |
| Date:                                                                                                                                                                 |                                                               |                   |                                                    |              |                           | Acko General Insurance Limited |                         |       |