

PAWAR ENTERPRISES

NIDHI TRADE CENTER, SHOP NO - 27, N.T.C. HINGOLI - 431513

Gst No. 27BEEPP4248G1ZD

Invoice No. 02

Invoice Date:- 21/03/2023

TO,

THE HEAD

District Implementation Unit Smart,

Project Director, ATMA, Hingoli



SUBJECT:- To Get Full Money Payment Of The Supply Of Vehicles For Training Cum Exposure Visit Within State For DIU SMART Hingoli

REF NO :- SMART / TCEVWS / RFQ / 73 / 2023

OUT W NO :- USO SMART / 156 / 2023

Order Date :- 08/03/2023

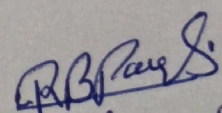
DEAR SIR,

You Are Hearby That Your Above Referred Work Of Supply Vehicles Is Has Been Completed By Us As Per Terms & Conditions So, Please To Get The Full Payment Of The Above Mentioned Work

SR. NO	ITEM/ SERVICES DISCRIMANATION	TECHNICAL SPECIFICATION	UNIT	TOTAL QTY	TOTAL RATE	TOTAL AMOUNT
1	Transport	Bus With Seat For 60 Trainee Appx 1000km	BUS	2	86500	173000
2	Break Fast Per Day	1 PerDay/ Trainee	NO	180	60	10800
3	Tea Per Day	2 Tea (Morning / Evening) Per Trainee	NO	360	7	2520
4	Lunch & Dinner	2 Trainee Full Meal	NO	360	180	64800
5	Drinking Water	R.O Water 20 lit Jar	NO	40	20	800
6	Boarding Facility At Night	Hall, Bathroom, Mattress For 60 Trainee	DAYS	2	23220	46440

TAXABLE VALUE	298359.32
CGST @ 9 %	26852.34
SGST @ 9 %	26852.34

TOTAL	352064.00
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पवार इंटरप्राइजेस
प्रोप्रायटर



GOVERNMENT OF MAHARASHTRA

Motor Vehicle Department

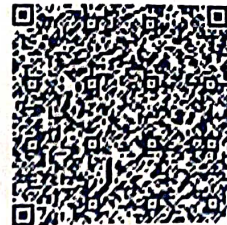
DY REGIONAL TRANSPORT OFFICE, HINGOLI

FORM 38

[See Rule 62(1)]

CERTIFICATE OF FITNESS

(Applicable in the case of transport vehicles only)




Vehicle No: MH38F2685(Bus) is certified as complying with the provisions of the Motor vehicles Act, 1988 and the rules made there under.

Registration No : MH38F2685
Application No : MH211111V5866748
Inspection Fee Receipt No : MH211111C0710687
Receipt Date : 11-Nov-2021
Chassis No : MCZA3LRTOGK355284
Engine No : E413CDGK111084
Seating Capacity : 41 (Including Driver)
Type of Body : BUS STARINE
Manufacturing Year : 2016
Category of Vehicle : HPV
Inspected on : 03-Dec-2021
Printed on : 06-Dec-2021 20:57:59

Certificate will expire on : 06-Dec-2023
Next Inspection Due Date : 08-Oct-2023

Inspected by (ASHIK D TADVI)


Signature of Inspecting Authority
DY REGIONAL TRANSPORT
OFFICE, HINGOLI

सेवा श्रद्धा समन्वितः

MIT]

Valid : 01-Jan-2019

TRANSPORT DEPARTMENT, HINGOLI

Maharashtra

**PERMIT IN RESPECT OF CONTRACT CARRIAGE PERMIT (BUS (CC
PERMIT))
PART-A**



The Date of replacement of Vehicle under model condition of the Permit

- | | |
|---|---|
| 1. Permit No | MH/38/CC/BUS/2019/2 |
| 2. Name Of The Permit Holder | SARIKA CHAVARE |
| 3. Father's/Husband's Name (in case of Individual) | SUNIL CHAVARE |
| 4. Permanent Address | POST OFFICE ROAD HINGOLI HINGOLI, Maharashtra
Hingoli-431513 |
| 5. | |
| (i) Registration Mark of the Vehicle | MH38F2685 |
| (ii) Make/Model | VE COMMERCIAL VEHICLES LTD/EICHER 10.90L BUS
(39+1+D) |
| (iii) Date of Registration | 22-Nov-2016 |
| (iv) Chassis Number | MCZA3LRTOGK355284 |
| (v) Engine Number | E413CDGK111084 |
| (vi) Class of Vehicle | Bus |
| (vii) No of Passangers to be carried(including driver) | 41 |
| (viii) Fuel Type | DIESEL |
| Service Type | Ordinary Service |
| 6. Route/Area for which permit is valid: | |
| Region Covered : | C.C.PERMIT |
| 7. Validity of the Permit : | From: 01-Jan-2019 To: 31-Dec-2023 |
| 8. Date of Replacement of Vehicle | |
| 9. Nature of Goods to be Carried | |
| 10. Parking Place | |
| 11. Purpose Of Journey | |
| 12. Rate of fare approved | Approved by STAR/TA |
| 13. This permit shall be subject to the conditions laid down in Section 84 of the Motor Vehicle Act, 1988 | |
| 14. Conditions of Permit | List Attached |

Date: 01-Jan-2019

Secretary,
Deputy Regional Transport Office,
HINGOLI, Maharashtra

This Document is Digitally Signed

Signer: MILAP CHAND
Date: Thu, Mar 17, 2022 13:31:33 IST
Location: NOIDA
Reason: Signing Policy for OICL

MOTOR INSURANCE CERTIFICATE CUM POLICY SCHEDULE

PCCV-4 (more) wheeled vehicles-capacity > 6 and 3 wheelers-carrying passengers-capacity > 17 PACKAGE POLICY - ZONE C

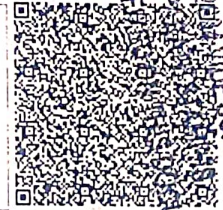
Policy No : 182091/31/2022/1314
Cover Note No : -
Insured's Code : 92642383
Insured's Name : SARIKA SUNIL CHAVARE (GSTIN: 0)
Address : R/O POST OFFICE ROAD
HINGOLI
PARBHANI MAHARASHTRA 431513
Tel /Fax /Email : / / 0 / NA

Prev Policy No : 182091/31/2021/1364
Cover Note Dt :
Issue Office Code : 182091
Issue Office Name : BC - HINGOLI (GSTIN:
27AAACT0627R4ZW)
Address : SHOP NO.40
CHAUDHARY COMPLEX, NEAR
AGRASEN CHOWK,
OLD Z P ROAD, HINGOLI
HINGOLI MAHARASHTRA
Tel /Fax /Email : 02456-220332 / /
sandip.ghodge@orientalinsurance.com

Lead/Breakin No : /

Agent/Broker Details

Dev.Off.Code : NA0000009343 DIRECT - EC HINGOLI(182091)
Agent/Broker : BA0000135836 SANDEEP SATYANARAYAN AGRAWAL
Address : NARAYAN
NAGAR, HINGOLI, HINGOLI, PARBHANI, MAHARASHTRA, 431513
Tel /Fax /Email : //9850252404//sachinagrawalori@gmail.com



Period of Insurance : FROM 00:00 ON 19/03/2022 TO MIDNIGHT OF 18/03/2023

Collection No & Dt : CSH 9440001678 - 17/03/2022 GST INVOICE NO : 2720787985 UIN : 0
Gross Premium : 52,765 GST : 9,498 Stamp Duty : .5 Total : 62,263
Geographical Area : INDIA Area Extension :

Particulars of Insured Vehicle:

Registration Mark & Place	Engine No. & Chassis No.	Make - Model	Type Of Body Type Of Fuel	G.V.W	Year Of Manf.	Seating Cap (incl Driver)	Cubic Capacity
MH 38 F 2685 Hingoli - Hingoli	E4313CDGK1110 84 MC2A3LRT0GK53 55284	10.90 L BUS AB PS BS4 SKYLINE SCH	Fully-built bus body DIESEL		2016	40 + 1	3358

Limitations as to Use

The Policy covers use only under a permit within the meaning of the Motor Vehicle Act 1988 or such a carriage falling under Sub-section 3 of Section 66 of the Motor Vehicles Act 1988.

Driver: Any person including insured : Provided that a person driving holds an effective driving license at the time of the

Place : HINGOLI
Date : 15/03/2022



IRDA-REGNO-556

For and on behalf of
The Oriental Insurance Company Limited

Sandip Ghodge
Administrative Officer
MILAP CHAND
General Manager
Authorised Signatory

This is an electronically generated document (Policy Schedule). The Policy document duly stamped will be sent by post.
In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupees

Page 1 of 3

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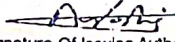
Regn. No. MH38X2670

MH15238528

Regd. Owner MAYUR RATNADEEPAK CHAWRE
S/D/W of RATNADEEPAK CHAWRE
Purpose NEW / HPA
Regn. Date 12/04/2022
Colour BRILLIANT WHITE
Fuel DIESEL
Vehicle Class Bus - TR
Body Type BUS
Manufacturer VE COMMERCIAL VEHICLES LTD
Chassis No. MC2FDLRT0NAB10008
Engine No. E446CDML023874
Model No. EICHER 2090 L BUS 41S BSVI
Hypothecated To SUNDARLAL SAWJI URBAN CO OP BANK LT
Manufacturing Dt 01/2022
Seat Capacity 041 No. Of Cyc 04
Stand. Capacity 00 Owner Serial 01
Tax Paid Up To See Tax Rcpt
Regd. Validity See F Cert
Address 9/13, POST, OFFICE ROAD HINGOLI HINGOLI Hingoli
MH 431513

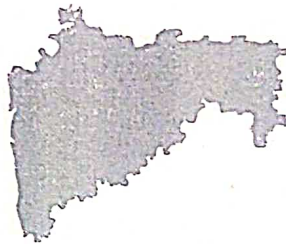
Unladen Wt 005770
Cubic Capacity 007960
Wheel Base 005740
R.L.W 008850

DY RTO HINGOLI
Issuing Authority


Signature Of Issuing Authority



MAHARASHTRA STATE GOVERNMENT
CERTIFICATE OF REGISTRATION



Form 23A

PERMIT]
of Approval : 13-Apr-2022

TRANSPORT DEPARTMENT,DY REGIONAL TRANSPORT
OFFICE, HINGOLI



Maharashtra



PERMIT IN RESPECT OF CONTRACT CARRIAGE PERMIT (BUS (CC
PERMIT))
PART-A

The Date of replacement of Vehicle under model condition of the Permit

1. Permit No **MH2022-CC-9596A**
2. Name Of The Permit Holder **MAYUR,RATNADEEPAK CHAWRE**
3. Father's/Husband's Name (in case of Individual) **RATNADEEPAK CHAWRE**
4. Permanent Address **9/13, POST OFFICE ROAD HINGOLI HINGOLI,
Maharashtra Hingoli-431513**
5.
 - (i) Registration Mark of the Vehicle **MH38X2670**
 - (ii) Make/Model **VE COMMERCIAL VEHICLES LTD/EICHER 2090 L
BUS 41S BSVI**
 - (iii) Date of Registration **12-Apr-2022**
 - (iv) Chassis Number **MC2FDLRT0NAB10008**
 - (v) Engine Number **E446CDML023874**
 - (vi) Class of Vehicle **Bus**
 - (vii) No of Passangers to be carried(including driver) **41**
 - (viii) No of Passangers standing **0**
 - (ix) No of Passangers sleeper **0**
 - (x) Fuel Type **DIESEL**
- (ix) Name of Financier,if any,with whom the Vehicle
is under Hire Purchase aggrement **SUNDARLAL SAWJI URBAN CO OP BANK LT**
- Service Type **Ordinary Service**
6. Route/Area for which permit is valid:
Region Covered : C.C.PERMIT
7. Validity of the Permit : **From: 13-Apr-2022 To: 12-Apr-2027**
8. Date of Replacement of Vehicle
9. Nature of Goods to be Carried
10. Parking Place
11. Purpose Of Journey
12. Rate of fare approved **Approved by STA/RTA**
14. Conditions of Permit **List Attached**

Date: 13-Apr-2022


Secretary
State/Regional Transport Authority,
Hingoli
DY REGIONAL TRANSPORT OFFICE, HINGOLI, Maharashtra

This Document is Digitally Signed

Signer: MILAP CHAND
Date: Thu, Jan 19, 2023 14:14:56 IST
Location: NOIDA
Reason: Signing Policy for OICL

MOTOR INSURANCE CERTIFICATE CUM POLICY SCHEDULE
PCCV-4 (more) wheeled vehicles-capacity > 6 passengers
PACKAGE POLICY - ZONE C

Policy No : 182091/31/2023/11
Cover Note No : -
Insured's Code : 154965885
Insured's Name : MAYUR RATNADEEPAK CHAWRE (GSTIN: 0)
Address : 9/13, POST OFFICE ROAD HINGOLI HINGOLI MAHARASHTRA 431513
Tel /Fax /Email : / / 9822221295 / NA
Lead/Breakin No : /

Prev Policy No : -
Cover Note Dt :
Issue Office Code : 182091
Issue Office Name : BC - HINGOLI (GSTIN: 27AAACT0627R4ZW)
Address : SHOP NO.40 CHAUDHARY COMPLEX, NEAR AGRASEN CHOWK, OLD Z P ROAD, HINGOLI 431513 HINGOLI MAHARASHTRA 431513
Tel /Fax /Email : 02456-220332 / / sandip.ghodge@orientalinsurance.co.in

Agent/Broker Details

Dev.Off.Code : NA000009343 DIRECT - EC HINGOLI(182091)
Agent/Broker : BA0000135836 SANDEEP SATYANARAYAN AGRAWAL
Address : NARAYAN NAGAR,HINGOLI,HINGOLI,PARBHANI,MAHARASHTRA,431513
Tel /Fax /Email : /9850252404/sachinagrawalori@gmail.com



Period of Insurance : FROM 00:00 ON 04/04/2022 TO MIDNIGHT OF 03/04/2023

Collection No & Dt : CHQ 9440000002 - 04/04/2022 GST INVOICE NO :27212109 UIN :0
Gross Premium : 56,510 GST : 10,172 Stamp Duty : .5 Total : 66,682
Geographical Area : INDIA Area Extension :

Particulars of Insured Vehicle:

Registration Mark & Place	Engine No. & Chassis No.	Make - Model	Type Of Body Type Of Fuel	G.V.W	Year Of Manf.	Seating Cap (incl Driver)	Cubic Capacity
NEW	E446CDML023814	EICHER 2090	Bus body		2022	40 + 1	3000
-	MC2FDLRTONAB10008		DIESEL				

Particulars of Trailer

Chassis No.	Registration No.	Manufacturer	Make

Limitations as to Use

The Policy covers use only under a permit within the meaning of the Motor Vehicle Act 1988 or such a carriage falling under Sub-section 3 of Section 66 of the Motor Vehicles Act 1988.

Place : HINGOLI
Date : 04/04/2022



The Oriental Insurance Company Limited

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupees

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