	Policy No]
	,						4
Name & cor	ntact detail o	f the Policy ho	older				
. Email							
. Bank/Financ	cial Institutio	n:					
. Policy Perio							
. Coverage &		rs					
		sil and ILR) /A	\WS				
2. Term Sh				1			
3. Sum Ins	ured @ Hect	are					
4. Premiur	n Rate						
i. Premium &	Indemnity de	etails					
Crop	Farmers	Hectares	Sum Insured	Premium	Premium Share		
					Farmer	State Receivable	GOI Receivable
					Received	Receivable	Receivable
'.Execss							
			Premium receiv	ed Detail (Farme	rs' Share)		
D Account							
Amount							
Recept Number Date							
he Policy sch	edule be read	d with					
Policy word							
. PMFBY guid							
. Agreed Banl	k Clause						
igned for and	on behalf of	the SBI Gene	ral Insurance Con	npany Limited.			