

## SBI GENERAL TERRORISM SURAKSHA BIMA

### INTERMEDIARY'S DETAILS (\* Mandatory Fields if Sales Channel Type selected is Banca)

Policy Issuing Office Address :

Policy Issuing Code:

Intermediary/Agent Name\*:

Intermediary/Agent Code\*:  Mobile no\*:

### PART A - DETAILS ABOUT PROPOSER AND POLICY PERIOD (\* Mandatory Fields)

1. Name of Proposer and all subsidiary companies\*:

2. Address of Proposer\*: Plot No./Door No.:  Building name:   
 Road:  Area:   
 City:  Pincode:   
 Landmark:  Nationality:   
 State:  Date established:

3. Land line No:  Mobile no\*:   
 Alternate Contact no\*:

4. Email ID\*:

The digital copy of your policy document will be sent to the registered mobile number or registered email ID based on your consent, provided consent is provided.

Please opt for the mode of communication to receive the digital copy of the Policy document.

SMS  WhatsApp  Email ID

5. Status of Proposer:  Private Company  Public Company  government owned, etc.  Limited company

6. Proposer's shareholding:

7. Other Shareholders' percentage detailing nationality:

8. PAN No\*.:  / FORM 60/61\*:  9. GSTIN/ISDN:  IF APPLICABLE

10. Occupation/Description of Proposer's Business Operation:

11. Coverage required:  Section I- Property Damage  Section II - Business Interruption  
 Section III-Property Damage and Business interruption  Section IV -Terrorism Liability  
 Section V-Business Interruption – ALOP

12. Physical Assets and Business Interruption values at the location to be insured/ for multi-location schedule, please give an overview above and provide a separate sheet with details on 5 largest locations.

Building:  Contents:   
 Business Interruption:  Total Sum Insured:

13. Limit of Liability requested for Buildings, contents and business interruption:

14. Deductible Requested: as per market practice:

15. Details of all security arrangements & access by general public to the site:

16. Details of any public parking (including street parking):

17. Details of the area surrounding location(s) to be insured (i.e. rural, commercial, industrial, government, etc.):

Disclaimer: SBI General Insurance Company Limited | Corporate & Registered Office: Fulcrum Building, 9<sup>th</sup> Floor, A & B Wing, Sahar Road, Andheri (East), Mumbai - 400 099. | For more details on the risk factor, terms and conditions, please refer to the Sales Brochure and Policy Wordings carefully before conducting a sale. | For SBI General Insurance Company Limited IRDAI Reg. No. 144 dated 15/12/2009 | CIN: U66000MH2009PLC190546 | SBI Logo displayed belongs to State Bank of India and used by SBI General Insurance Company Limited under license. | SBI General Terrorism Suraksha Bima UIN: IRDAN144CP0002V01202324 | SBI General Insurance and SBI are separate legal entities and SBI is working as Corporate Agent of the company for sourcing of insurance products.

18. Details of any landmark buildings, government offices, five-star hotels or other high profile locations within 500 meters:

19. Describe occupants of surrounding buildings and their occupation:

20. Details of any direct or indirect threat that has been made against the Proposer's or any of the shareholders or any other person related to the company:

21. Details of any previous acts of Terrorism, Sabotage, SRCC, Malicious Damage, War, etc. against the Proposer's or any of the shareholders or any other person related to the company-

22. Reason for requesting a terrorism cover- competitive terms:

23. Description of security at location(s) to be insured: :

a. Is there a guard force?  b. Are there intrusion detection and CCTV systems?

c. Is there a perimeter fence?  Is it lighted?

d. Is there an access control system (i.e. card access, sign-in etc.)?

e. Is there a parking area?

if yes, where (i.e. within the building, outside etc.)?

24. Please indicate which of the Proposer's premises are either owned, leased from or rented to the government and/or government/state agency-

25. Please indicate if there are any of the following in the vicinity of the Proposer's premises.

(i) Government premises/sites e.g. Embassies, Consular Facilities, Army/Air Force base etc  (ii) Major economic centres e.g. Wall Street

(iii) Major tourist attractions e.g. Disney World  (iv) Major Sporting Stadium

(v) International Airports  (vi) Are there any assets already covered against terrorism (e.g under Fire Insurance policy)

26. \*Are You or any of the proposed applicants or close relatives is/are associated to Politically Exposed Person?  Yes  No

Politically Exposed Persons (PEPs) are individuals who have been entrusted with prominent public functions by a foreign country, including the heads of States or Governments, senior politicians, senior government or judicial or military officers, senior executives of state-owned corporations and important political party officials.

Note (\*) marked details are mandatory to be captured as per applicability. Alternate number has to be different from the provided mobile number.

### DECLARATION

- I/We hereby declare that the statements made by me/us in this Proposal Form are true and complete in all respects to the best of my/our knowledge and belief and that there is no other information, which is relevant to my application for insurance that has not been disclosed to you. I/We hereby agree that statements made by me and this declaration shall form the basis of the contract between me/us and SBI General Insurance Company Limited (SBI General) and I/We agree to accept a policy, subject to the conditions prescribed by SBI General and to pay premium on the amount estimated. I/We undertake to exercise all ordinary and reasonable precautions for safety of the property as if it were uninsured.

I/We understand that the Policy issued by the Company shall be voidable at the option of the Company in the event of any mis-representation, mis-description or nondisclosure/concealing of any material particulars by me/us. My/our failure to comply with this obligation now may result in the rejection of my/our claim and the avoidance of my/our Policy when a claim is made.

I/We hereby undertake that if any additions/alterations are carried out in the risk proposed after the submission of this Proposal Form then the same shall be conveyed to SBI General immediately by me/us.

I/We understand that SBI General is under no obligation to accept my/our Proposal for insurance and the liability of SBI General does not commence on the receipt of this Proposal by SBI General and it does not result in a concluded contract of insurance until the proposal has been accepted by SBI General and upon full realization of the premium by SBI General. If SBI General does not accept this Proposal, it will inform me/us and refund any payment received from me/us without interest.

I/We hereby give my/our consent to SBI General that it can disclose/use/handle, directly or through a third party, the information (including the sensitive personal data or information, if any) provided in this Proposal Form, whereas I/we have the option not to provide this consent or withdrawal.

I hereby declare that I am not a Politically Exposed Person (PEP)-  Yes  No

Date:         Place:  Signature of Proposer: \_\_\_\_\_

### ELECTRONIC INSURANCE ACCOUNT DETAILS SECTION

I would require SBI General Terrorism Suraksha Bima related information in:  Physical Format  e-Format (electronic); as & when applicable.

Choose your Insurance Repository (For those selecting e-Format)

NSDL Data Management Ltd.  CDSL Insurance Repository Ltd.  Karvy Insurance Repository Ltd.  CAMS Repository Services Ltd.

I have an e-Insurance Account & the No. is

My CKYC No. (Central Know Your Customer Registry Number) is  (If available).

Kindly visit our website [www.sbgeneral.in](http://www.sbgeneral.in) to view the list of KCY OVD (Officially Valid Documents).

Disclaimer: SBI General Insurance Company Limited | Corporate & Registered Office: Fulcrum Building, 9<sup>th</sup> Floor, A & B Wing, Sahar Road, Andheri (East), Mumbai - 400 099. | For more details on the risk factor, terms and conditions, please refer to the Sales Brochure and Policy Wordings carefully before conducting a sale. | For SBI General Insurance Company Limited IRDAI Reg. No. 144 dated 15/12/2009 | CIN: U66000MH2009PLC190546 | SBI Logo displayed belongs to State Bank of India and used by SBI General Insurance Company Limited under license. | SBI General Terrorism Suraksha Bima UIN: IRDAN144CP0002V01202324 | SBI General Insurance and SBI are separate legal entities and SBI is working as Corporate Agent of the company for sourcing of insurance products.

**PAYMENT DETAILS** (Claim/Refund amount will be deposited in this Bank Account only unless changed subsequently)

Please draw your Cheque (A/c payee only) in the name of "SBI General Insurance Company Limited"

(\*Mandatory fields)

Instrument Type:  Cheque/  Debit Card/  Credit Card

Cheque No./DD No.:  Amount:

Date:

Bank Name:

Branch:

Bank Account No.\*:

IFSC Code\*:

Period of Insurance: From:  To:

\*Note - SBIGI does not accept Cash for Premium Payments against the Policy.

**AML GUIDELINES** (Premium Payment shall be made by the Policyholder of the Policy)

I/We hereby confirm that all premiums have been/ will be paid from bona fide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act 2002. I understand that the Company has the right to call for documents to establish source of funds. The Insurance Company has the right to cancel the Insurance Contract in case I am/ have been found guilty by any competent court of law under any statutes, directly or indirectly governing the Prevention of Money Laundering in India.

Nationality: Indian  Non-Indian  Non-resident Indian(NRI)  Others

If Non-Indian please specify the nationality and country address \_\_\_\_\_

If NRI please give details for resident country and address \_\_\_\_\_

Type of Organisation:  Corporation  Government  Non-Governmental Organisation  Society  Trust  
(Only applicable if policy issued on Group Basis)  Partnership  International Organisation  Cooperative  Section 8 Companies

I hereby declare that the current address is different from the available in the Central identities Data Repository.  Yes  No. Customer can submit CKYC form for update.

Recent photograph of proposer:  
(Photograph is required. if customer does not have CKYC ID)

Signature of Proposer:

**DECLARATION** (If signed in vernacular language / If you have affixed thumb impression above)

Applicable where the Proposer is illiterate or is suffering from a disability due to which writing is restricted or where the Proposer has signed in vernacular language.

(Note: The below must be witnessed by someone other than the Advisor/Employee of the Company).

I/We certify that the product applied for by me/us and the contents of the Proposal Form have been clearly explained to me/us and I/We have fully understood them. I/We further certify that the replies in the Proposal Form have been recorded as per the information provided by me/us.

I, (Full name of the witness) \_\_\_\_\_ (Relationship with the Proposer) \_\_\_\_\_ adult and inhabitant of (City) \_\_\_\_\_ and residing at \_\_\_\_\_ do hereby certify that I/We have read out and explained the contents of the Proposal Form and all other documents incidental to availing the Insurance Policy from SBI General Insurance Company Ltd., to the Proposer/Primary Insured and he/she/they have understood the same.

I/We declare that whatever I/We have stated herein above is true and correct to the best of my knowledge and belief.

Date:

Place:

Signature of the Witness

Signature/Thumb impression of the Proposer/Primary Insured

**AGENTS DECLARATION**

I, \_\_\_\_\_ (Full Name) in my capacity as an Insurance Advisor/ Specified Person of the Corporate Agent/Authorized employee of the Broker/Relationship Officer, do hereby declare that I have explained all the contents of this Proposal Form, including the nature of the questions contained in this Proposal Form to the Proposer including statement(s), information and response(s) submitted by him/her in this Proposal Form to questions contained herein or any details sought herein will form the basis of the Contract of Insurance between the Company and the Proposer, if this Proposal is accepted by the Company for issuance of the Policy. I have further explained that if any untrue statement(s)/ information/response(s) is/are contained in this Proposal Form/including addendum(s), affidavits, statements, submissions, furnished/to be furnished, the Company shall have the right to vary the benefits which may be payable and further more if there has been a non-disclosure of any material fact, the policy issued to his/her favour pursuant to this Proposal may be treated by the Company as null and void and all premiums paid under the Policy may be forfeited to the company.

Agent Name: \_\_\_\_\_

SP Name: \_\_\_\_\_

Licence No. \_\_\_\_\_

SP Code: \_\_\_\_\_

Date:

Place:

Signature of Agent: \_\_\_\_\_

Disclaimer: SBI General Insurance Company Limited | Corporate & Registered Office: Fulcrum Building, 9<sup>th</sup> Floor, A & B Wing, Sahar Road, Andheri (East), Mumbai - 400 099. | For more details on the risk factor, terms and conditions, please refer to the Sales Brochure and Policy Wordings carefully before conducting a sale. | For SBI General Insurance Company Limited IRDAI Reg. No. 144 dated 15/12/2009 | CIN: U66000MH2009PLC190546 | SBI Logo displayed belongs to State Bank of India and used by SBI General Insurance Company Limited under license. | SBI General Terrorism Suraksha Bima UIN: IRDAN144CP0002V01202324 | SBI General Insurance and SBI are separate legal entities and SBI is working as Corporate Agent of the company for sourcing of insurance products.

Note: For more details on the risk factor, terms and conditions, please refer to the Sales Brochure and Policy Wordings carefully before conducting a sale.

#### INSURANCE ACT 1938 SECTION 41 - PROHIBITION OF REBATES

1. 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 a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend up to ₹ 10 Lacs.

#### INSURANCE IS THE SUBJECT MATTER OF SOLICITATION

Disclaimer: SBI General Insurance Company Limited | Corporate & Registered Office: Fulcrum Building, 9<sup>th</sup> Floor, A & B Wing, Sahar Road, Andheri (East), Mumbai - 400 099. | For more details on the risk factor, terms and conditions, please refer to the Sales Brochure and Policy Wordings carefully before conducting a sale. | For SBI General Insurance Company Limited IRDAI Reg. No. 144 dated 15/12/2009 | CIN: U66000MH2009PLC190546 | SBI Logo displayed belongs to State Bank of India and used by SBI General Insurance Company Limited under license. | SBI General Terrorism Suraksha Bima UIN: IRDAN144CP0002V01202324 | SBI General Insurance and SBI are separate legal entities and SBI is working as Corporate Agent of the company for sourcing of insurance products.