

GRIHA RAKSHA PLUS

This proposal is for covering Home Building and/or Home Contents, if opted against Fire and Allied Perils. Read the Prospectus/Key Features Document/Policy Wordings before filling up this proposal form to understand the meaning of the terms used herein better. The property proposed for insurance is not covered until the proposal is accepted and premium paid.

Policy Issuing Office Address & Code

INTERMEDIARY

Intermediary Name:

Intermediary Code: Intermediary Contact Details:

Specified Person's Code*/ PF ID:

A. DETAILS ABOUT PROPOSER AND POLICY PERIOD (* Mandatory Fields)

1. Name of the Proposer:

Ownership: Single Joint Gender : M F Other Nationality:

Plases specify the details of Co applicants

Sr. no.	Name of co-applicant	Date of Birth
1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>

2.Address of Proposer :

City: State: Pincode:

Date of Birth: PAN*: / Form 60/61 (if Available):

Aadhaar No.:

Passport / Driving License/ Voter Id:

Occupation: Salaried Self Employed Any Other

Mobile no.: Landline no.: Email ID:

I. Are you the owner / tenant ? Owner Tenant II. Is the premises is occupied by the owner (landlord) : Yes No

3. Policy to be issued in favour of (list out all the parties who have insurable interest) including the financial institutions :

Loan amount: Period of Insurance: From: to

(No of Years in case of long-term policy: _____) **Note: For long term policy, Period shall not exceed 20 years.**

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

Politically Exposed Persons (PEP) are individuals who are or have been entrusted with prominent public functions i.e., Heads/Ministers of central or state government, senior politicians, senior government, judicial or military officials, senior executives of government companies, important party officials.

B. COVERS OPTED

5. Is there any policy in place for the same property? Yes No

If Yes, please provide the details

6. Cover/s required: (When Home Building and Home Contents)

Home Building & Home Contents Home Building Only Home Contents Only

Disclaimer: SBI General Insurance Company Limited | Corporate & Registered Office : Fulcrum Building, 9th 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 licence. | Griha Raksha Plus UIN: IRDAN144RP0014V01202223 | SBI General Insurance and SBI are separate legal entities and SBI is working as Corporate Agent of the company for sourcing of insurance products.

C. Location of Home Building

7. Full postal Address:

City: State: Pincode:

8. Is it in a multi-storey building or is it a standalone house

9. In case of multi-storey building, please provide the floor number of Your house:

10. Is there a basement to Your house? Yes No

In case of Basement, If there are contents in it, please provide the Sum Insured:

D. Details of Home Building

11. Sum Insured (SI) for Home Building:

a. SI for residential structure of Your Home including fittings and fixtures (in ₹):

b. SI for additional structures (in ₹):

Additional Structure	Sum Insured (₹)
<input type="text"/>	<input type="text"/>

12. Carpet area of structure of Home in square metres/ square feet :

13. Rate of Cost of Construction per square metre/ square feet at the policy Commencement Date:

14. Age of Home Building: Less than 5 years 5-10 years 10-20 years Above 20 years

15. Construction Details

Please note the following:

(Building(s) having walls and/or roofs of wooden planks/thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/ asphalt/canvas/tarpaulin, and the like are treated as Kutcha Construction. Construction other than Kutcha Construction is a 'Pucca Construction')

Walls Construction* : Kutcha / Pucca Floor Construction* : Kutcha / Pucca Roof Construction* : Kutcha / Pucca
 (*strike out what is not applicable)

16. Home Contents Cover

If You have opted for Home Contents cover, please provide item wise Sum Insured for General Contents.
 (Sum Insured represents cost of replacement)

Furniture & Fixtures Electrical & Electronic items Others

• Are there any Fire Protection Devices? Yes No • Is your building certified by IGBC? Yes No

E. Optional Covers (available on payment of additional premium)

17. I. Acts of terrorism

Do you wish to opt for below coverage under Terrorism Cover?

• Political Violence cover required – Yes / No • Third Party Liability Cover required – Yes / No

II. Architect & surveyor fee Up to 5% of claim amount - Yes No

III. Removal of debris up to 2 % of the claim amount - Yes No

IV. Cover for (Please Tick)

Loss of Rent: I. Sum Insured: (Rent per month x number of months) II. Number of Months:

Rent for Alternative Accommodation: I. Sum Insured: (Rent per month x number of months)

II. Number of Months:

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V. Do You require 'Personal Accident Cover' for Yourself and Your Family? Yes No

If Yes, Please provide the details below :

Nomination Details:

Cover for	Name	DOB/ Age	Sum Insured	Name of Nominee	Relationship	Address of the Nominee	Age of nominee
Self			₹ xxxx				
Spouse			₹ xxxx				
Child -1			₹ xxxx				
Child -2			₹ xxxx				
Mother / Mother-inLaw			₹ xxxx				
Father/ Father-inLaw			₹ xxxx				

Where Nominee is a minor, give the details of Appointee

Name of the Appointee : _____ Relationship: _____

VI. Do You require 'Cover for Valuable Contents on Agreed Value Basis Yes No

(Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.)

If Yes, please mention the total amount:

Valuable Contents	Jewellery Items (others)	Valuable items (others)
Sum Insured Opted		

Valuation certificate to be attached.

VII. Accidental Damage Cover – General Contents Yes No

VIII. Temporary Resettlement Expenses Yes No

IX. EMI Protection

EMI amount 3 Months 6 Months Sum Insured

X. Utility Expense Cover Yes No

XI. Electrical Clause / Electrical Installation Clause Yes No

XII. Tenant Liability Cover Yes No

XIII. Pet Insurance Yes No

XIV. Loss of Key Yes No

F. Premium Details

Premium Amount ₹: Cheque No./ Pay Ref. No.: Date:

Premium payment option: Cheque DD Debit Card / Credit Card

Bank Name: IFSC Code:

Bank Account Number:

G. Bank account Details

Cheque will be issued in the name of the Proposer only.

In case of cancellation of policy, if premium were paid through credit card the refund amount would be credited to Credit Card account directly or refund will be paid through cheque. Please provide the following bank details and a copy of Cancelled Cheque if you opt for direct credit of refund/ claim into your bank account: (Cancelled Cheque should be of the same bank account in which the refund / claim needs to be credited directly.

Cheque No.: Cheque Date: Amount for ₹

Bank Name: Branch Name:

Name of A/c. Holder Bank: IFSC Code:

Account No: MICR Code:

Note: The Proposer agrees and undertakes to intimate in writing to SBI General Insurance about any change in bank account details. If ECS is selected, please submit the standing instruction form available at our branches.

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H. Claims details

Please specify details of any loss to the proposed Property in last 3 years:

Date of Loss	Cause of Loss	Claimed Amount	Settled Amount/please specify if claim is outstanding

I. Declaration by Insured

I/ We hereby declare that the statements made by me / us in this Proposal Form are true to the best of my/our knowledge and belief and I/We hereby agree that this declaration shall form the basis of the contract between me/us and the _____.

If any additions or alterations are carried out in the risk proposed after the submission of this proposal form, then the same should be conveyed to the insurers immediately.

Date:

Place: _____

Signature of the Proposer

J. ELECTRONIC INSURANCE ACCOUNTS DETAILS

I would like Griha Raksha Plus and related information in: Physical Format e-Format (electronic)

I have eIA Number:

I would like to apply for eIA with: NSDL Data Management CSDL Insurance Repository Ltd
Karvy Insurance Repository Ltd CAMS Repository Services Ltd

CKYC No (Central Know Your Customer Registry Number), (if available):

Kindly visit our website www.sbigeneral.in to view the list of KCY OVD (Officially Valid Documents).

K. 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 If Non-Indian, please specify Country: _____

Type of Organisation (Only applicable if policy issued on Group Basis):

Corporation Government Non-Governmental Organisation Society Trust
 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 updation.

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

Signature of Proposer

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L. VERNACULAR DECLARATION

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) _____ (Relation with the Proposer/Primary insured) _____ adult and inhabitant of (city) _____ and residing at _____ do hereby certify that I 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 knowledge and belief.

[Signature box for the Witness Insured]

Signature of the Witness Insured

[Signature/Thumb impression box for the Proposer]

Signature/Thumb impression of the Proposer

Date: [D][D][M][M][Y][Y][Y][Y]

Place: _____

M. Agent 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: [Text entry box]

SP Name: [Text entry box]

SP Code: [Text entry box] License No.: [Text entry box]

Date: [D][D][M][M][Y][Y][Y][Y]

Place: [Text entry box]

[Signature box for the Agent]

Signature of Agent

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N. Insurance Act, 1938, Section 41-Prohibition of Rebates

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.

Please note:

Your Home Building is a building consisting of a residential unit, having an enclosed structure and a roof, basement (if any) and fixtures and fittings permanently attached to the floor, walls or roof, like fixed sanitary fittings, electrical wiring and other permanent fittings etc.

It also includes 'additional structures' if they are on the same site, are used as part of Your Home Building:

- a. garage, domestic out-houses used for residence, parking spaces or areas, if any;
- b. compound walls, fences, gates, retaining walls, internal roads;
- c. verandah or porch and the like;
- d. septic tanks, bio-gas plants, fixed water storage units or tanks, solar panels, wind turbines and air conditioning systems, central heating systems and the like, if not included in Home Contents Cover, any other structure.

Please note the following for Sum Insured (SI) for Home Building section:

(The amount required to construct Your Home Building at the policy Commencement Date. The amount is calculated as follows:

a. For residential structure of Your Home including fittings and fixtures:

Carpet area of the structure in square metres/square feet X Rate of Cost of Construction at the policy Commencement Date.

The Rate of Cost of Construction is the prevailing rate of cost of construction of Your Home Building at the policy Commencement Date.

b. For additional structures: the amount that is based on the prevailing rate of cost of construction at the Policy Commencement Date.)

Details of Home Contents

Please note the following:

- I. **Home Contents** refer to articles or things in Your Home that are not permanently attached or fixed to the structure of Your Home. Home Contents may consist of General Contents and/or Valuable Contents.
- II. **General Contents** are all the contents of household use in Your Home, e.g., furniture, electronic items and goods, antennas, solar panels, water storage equipment, kitchen equipment, electrical equipment (including those fitted on walls), clothing and apparel and items of similar nature.

Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.