



5. Period of Insurance: From         to

6. Policy Type:  Individual  Family Floater

7. Policy Period:  Three and a half months (3 ½ months)

Six and a half months (6 ½ months)

Nine and a half months (9 ½ months)

### SUM INSURED

50,000  1,00,000  1,50,000  2,00,000  2,50,000

3,00,000  3,50,000  4,00,000  4,50,000  5,00,000

### OPTIONAL COVER

Hospital Daily Cash : Yes  No

### DETAILS OF PERSONS TO BE INSURED

Sr. No.	Name of the Insured	Sum Insured	Date of Birth	Age	Gender	Height	Weight	Occupation	Marital Status	Relationship with the Proposer	Nationality
1											
2											
3											

### NOMINEE'S DETAILS

Name	Date of Birth	Age	Relationship with the primary insured
	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

Where Nominee is a minor, give the details of the Appointee

Name of the Appointee	Relationship

### PREVIOUS EXISTING DISEASE DECLARATION

Are you or is any of your family member suffering from any Pre-existing conditions / Illness other than

Mental Illness, Accidental Injuries & HIV / AIDS - YES  / NO  (please tick the appropriate) If Yes, please specify

Sr. no.	Name of Insured member	PED Disease / Condition

### HEALTH DECLARATION

1. Have either of you or someone in your family who is staying with you come in the contact with following in last 1 month?

a. Active COVID-19 Positive case

b. Person travelled from other countries to India in the last 30 days.

c. No contact with anyone with Symptoms

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## AML Guidelines

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 the Prevention of Money Laundering Act 2002. I/We 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  No- Indian If Non-Indian, please specify Country:

### Type of Organisation:

Corporation  Government  Non-Governmental Organisation  Society  Trust  
 Partnership  International Organisation  Cooperative  Section 25 Companies

## AGENT'S DECLARATION

I/We, \_\_\_\_\_ (Full Name) in my capacity as an Insurance Advisor / Specified Person of the Corporate Agent / Authorised 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.

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

Date:         Place:  Signature of the Agent: \_\_\_\_\_

## DECLARATION & WARRANTY ON BEHALF OF ALL PERSONS PROPOSED TO BE INSURED

- i. I/We hereby declare on my behalf and on behalf of all persons proposed to be Insured that the above statements are true and complete in all respects to the best of my knowledge and that I/We am/are authorised to propose on behalf of these other persons.
- ii. I understand that the information provided by me will form the basis of the Insurance Policy, is subject to the Board approved under writing policy of the Insurance Company and that the Policy will come into force only after full receipt to the premium chargeable.
- iii. I/We further declare that I/We will notify in writing any change occurring in the occupation or general health of the life to be Insured/Proposer after the proposal has been submitted but before communication of the risk acceptance by the Company.
- iv. I/We declare and further consent to the Company Seeking medical information from any hospital which at any time has attended on the life to be Insured/Proposer or from any past or present employer concerning anything which affects the physical and mental health of the life to be Insured/Proposer and seeking information from any Insurance company to which an application or Insurance on the life to be Insured/Proposer has been made for the purpose of underwriting the proposal and /or claim settlement.
- v. I/We authorise the Company to share information pertaining to my proposal including the medical records for the sole purpose of proposal underwriting and/ or claims settlement and with any Governmental and/or Regulatory Authority.
- vi. I/We am/are aware of premium loading, (if any declared above) for habits & diseases as declared / mentioned by me/ us above.

## INSURER'S DECLARATION

**Note:** The liability of the Company does not commence until the acceptance of the Proposal has been formally intimated by the Insured and full premium has been realised by the Company.

We are under no obligation to accept any proposal for Insurance. The Proposer agrees that the receipt of the Proposal Form by SBI General Insurance Company Limited along with the premium payment does not tantamount to the acceptance of the Proposal for Insurance by SBI General Insurance Company Limited and does not result in a concluded contract of Insurance. The acceptance of the Proposal for Insurance shall be at the Company's sole and absolute discretion and upon full realisation of the premium payment .In the event of acceptance of the Proposal for Insurance by SBI General Insurance Company

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Limited, such acceptance shall be specifically intimated to the Proposer by SBI General Insurance Company Limited along with the date from which the Insurance Cover shall become effective. SBI General Insurance Company Limited shall not be liable for any claim in respect of an event giving rise to a claim covered under the Policy of Insurance that has occurred prior to Policy issuance is not covered under this Policy (Your proposal form will be considered after SBI General Insurance Company Limited receives premium payment.)

You are obliged to inform SBI General Insurance Company Limited without any delay & in writing of all doctors or other members of medical profession whom you or any of the proposed members have consulted & all changes in your or any other proposed members' state of health between the filing of this application form & inception of your Insurance cover. If you are in any doubt, please seek the advice of your Insurance advisor.

**Fraud Warning:** This policy shall be voidable at the option of the Company in the event of mis-representation, mis-description or non-disclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to fraud the insurance company or any other person, files a proposal for insurance containing any false information, or conceals or the purpose of misleading, Information concerning any fact material thereto, commits a fraudulent insurance act, which will render the policy voidable at the sole discretion of the insurance company and result in a denial of insurance benefits.

**Anti-Rebating Warning:** As per Section 41 of the Insurance Act 1938, as amended, the practice of rebating is prohibited, as follows: 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 Policy in respect to 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 or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer. Violation of Section 41 of the Insurance Act 1938, as amended, shall be punishable with a fine which may extend up to ₹ 10 lakhs.

Place: 

D	D	M	M	Y	Y	Y	Y
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Date: 

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Signature of the Proposer

## 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) \_\_\_\_\_ Relationship 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 my/our knowledge and belief.

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Signature of the Witness Insured

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Signature/Thumb impression of the Proposer/Primary Insured

Date: 

D	D	M	M	Y	Y	Y	Y
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 Place: 

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## SECTION 41 OF THE INSURANCE ACT, 1938

As per Section 41 of the Insurance Act 1938, as amended, the practice of rebating is prohibited, as follows:

- (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 or risk relating to lives or property in India, any rebate of 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 or continuing a Policy accept any rebate except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer.
- (2) Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend up to Rupees Ten Lakhs.

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