PROPOSAL FORM

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 Contact Details: Intermediary Code: Specified Person's Code*/ PF ID: A. DETAILS ABOUT PROPOSER AND POLICY PERIOD (* Mandatory Fields) 1. Name of the Proposer: Ownership: Single **Joint** F Nationality: Gender: M Other Pleases specify the details of Co applicants Sr. no. Name of co-applicant Date of Birth 1. 2 2.Address of Proposer: City: State: Pincode: / Form 60/61 (if Available): Date of Birth: PAN*: Aadhaar No.: Passport / Driving License/ Voter Id: Any Other Occupation: Salaried Self Employed Email ID: Mobile no.: Landline no: I. Are you the owner / tenant? Owner Tenant No II. Is the premises is occupied by the owner (landlord): Yes 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: Note: For long term policy, Period shall not exceed 20 years. (No of Years in case of long-term policy: __ 4. Are You or any of the proposed applicants or close relatives is/are associated to Politically Exposed Person? 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. **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)

Disclaimer: SBI General Insurance Company Limited | Corporate & Registered Office: Fulcrum Building, 9th Floor, A & B Wing, Sahar Road, Andheri (East), Mumbai Q 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.

Home Contents Only

Home Building Only

Home Building & Home Contents

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 (₹)								
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 clot asphalt/canvas/tarpaulin, and the like are treated as Kutcha Construction. Construction other than Kutcha Construction is								
'Pucca Construction')								
Walls Construction*: Kutcha / Pucca Floor Construction*: Kutcha / Pucca Roof Construction*: Kutcha / Pucca (*strike out what is not applicable)	ca							
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 Sour building certified by IGBC?								
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:								

If Yes, Please	provid	le th	e det	ails bel	ow	:			No	mir	nati	ion	De	etai	ls:													
Cover for	Na	me		DOB. Age		ium In	sur	ed	N	lam	ne o	fΝ	lon	nine	ee		Relationship	2	Addr	ess	of t	the	Noı	min	ee		ge c	
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Child -2						₹xx	XX																					
Mother / Mother-inLaw	,					₹xx	xx																					
Father/ Father-inLaw						₹xx	xx																					
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Name of the Ap	pointe	e:_															Re	ela	tion	ship):							
VI. Do You requi (Valuable Cor items of simil If Yes, please	ntents c ar natu	of Yo re.)	ur Ho	me cor	nsis			-							$\overline{}$		No , paintings, wo	rk	s of a	art, a	anti	que	ite	ms.	, cu	rios	and	ţ
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IX. EMI Protection	on																											
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ame of A/c. older Bank:																	IFSC Code:											
ccount No:]	MICR Code:											

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

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.

H. Claims details		
Please specify details of any I	oss to the proposed Property	y in last 3 years:
Date of Loss Cause of	f Loss Claimed Amount	Settled Amount/please specify if claim is outstanding
I. Declaration by Insured		
		us in this Proposal Form are true to the best of my/our knowledge and form the basis of the contract between me/us and the
If any additions or alterations conveyed to the insurers imm		posed after the submission of this proposal form, then the same should be
Date: D D M M Y Y	YY	
Place:		Signature of the Proposer
J. ELECTRONIC INSURAN	CE ACCOUNTS DETAILS	
I would like Griha Raksha Plus	s and related information in:	Physical Format e-Format (electronic)
I have elA Number:		
I would like t o apply for eIA v	vith: NSDL Data Manageme	ent CSDL Insurance Repository Ltd
	Karvy Insur ance Repo	ository Ltd CAMS Repository Services Ltd
CKYC No (Central Know You	r Customer Registry Numbe	er), (if available):
		C OVD (Officially Valid Documents).
K. AML GUIDELINES (Pren	nium Payment shall be made	e by the Policyholder of the Policy)
of proceeds of crime relate Company has the right to o	ed to any of the offence list call for documents to estab I am/ have been found guil	be paid from bona fide sources and no premiums have been/will be paid out sted in Prevention of Money Laundering Act 2002. I understand that the blish source of funds. The Insurance Company has the right to cancel the ty by any competent court of law under any statues, directly or indirectly
Nationality: Indian	Non-Indian	If Non-Indian, please specify Country:
Type of Organisation (Only	applicable if policy issued on G	roup Basis):
Corporation	Government Non-G	overnmental Organisation Society Trust
Partnership	nternational Organisation	Cooperative Section 25 Companies
I hereby declare that the cur Customer can submit CKYC		om the avalilable in the Central identities Data Repository. Yes No.
Recent photograph of proposer: (Photograph is required. if customer does not have CKYC ID)		Signature of Proposer

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).

IIIIOIIIIalioii l		, (Full name of the witness)		ave been clearly explained to me/us form have been recorded as per the
	-	pposer/Primary insured)		adult and inhabitant of (city)
and residing a			nereby certify that I have rea	ad out and explained the contents of
				BI General Insurance Company Ltd.,
				nat whatever I/we have stated herein
		st of knowledge and belief.		
Sign	ature of the Witness	Insured	Signature/T	humb impression of the Proposer
Date:	D M M Y Y Y	7		Place:
M. Agent De	claration:			
ı		(Full Name) in my canacity ac an Incura	nce Advisor/ Specified Person of the
contents of t	his Proposal Form, in	•	•	eclare that I have explained all the posal Form to the Proposer including
details sough accepted by response(s) is furnished, the non-disclosu	t herein will form the the Company for iss s/are contained in thi e Company shall hav re of any material fact	basis of the Contract of Insu uance of the Policy. I have f s Proposal Form/including ac e the right to vary the bene	ner in this Proposal Form to rance between the Compan urther explained that if any dendum(s), affidavits, state fits which may be payable a favour pursuant to this Prop	o questions contained herein or any and the Proposer, if this Proposal is untrue statement(s)/ information / ments, submissions, furnished/to be nd further more if there has been a osal may be treated by the Company
details sough accepted by response(s) is furnished, the non-disclosu	t herein will form the the Company for iss s/are contained in thi e Company shall hav re of any material fact	basis of the Contract of Insu uance of the Policy. I have f s Proposal Form/including ac e the right to vary the bene to the policy issued to his/her	ner in this Proposal Form to rance between the Compan urther explained that if any dendum(s), affidavits, state fits which may be payable a favour pursuant to this Prop	o questions contained herein or any y and the Proposer, if this Proposal is untrue statement(s)/ information / ments, submissions, furnished/to be nd further more if there has been a
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Signature of Agent

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.



AML Declaration as per AML Master Guideline 2022:

- 1. KYC Details for Individual Memebers covered under the Group Insurance:
 - "I/ We hereby agree to keep record of KYC details of all the individual members covered under the group insurance, and ensure to provide the details of beneficiaries to the Company as and when required."
- 2. Determination of Beneficial Ownership:

I/We hereby confirm that the below mentioned person/s have controlling ownership interest/ exercises control through other means and shall be considered for the purpose of determining Ultimate Beneficial Owner:

Sr. No	Name of Ultimate Beneficial Owner	Percentage (%)*	Remarks, if any				

*Notes:

- a) Where the client is a company, the beneficial owner(s) is the natural person(s), who, whether acting alone or together, or through one or more juridical person, has a controlling ownership interest or who exercises control through other means.
 - "Controlling ownership interest" means ownership of or entitlement to more than ten percent of shares or capital
 or profits of the company;
 - 2. "Control" shall include the right to appoint majority of the directors or to control the management or policy decisions including by virtue of their shareholding or management rights or shareholders agreements or voting agreements;
- b) Where the client is a partnership firm, the beneficial owner(s) is the natural person(s), who, whether acting alone or together, or through one or more juridical person, has ownership of/entitlement to more than **fifteen percent of capital** or profits of the partnership.
- c) Where the client is an unincorporated association or body of individuals, the beneficial owner(s) is the natural person(s), who, whether acting alone or together, or through one or more juridical person, has ownership of or entitlement to more than fifteen percent of the property or capital or profits of such association or body of individuals.
- d) Where no natural person is identified under (a) or (b) or (c) above, the beneficial owner(s) is the relevant natural person who holds the position of senior managing official.
- e) Where the client is a trust, the identification of beneficial owner(s) shall include identification of the author of the trust, the trustee, the beneficiaries with **ten percent or more interest in the trust** and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.
- 3. Please note, In absence of PAN, kindly provide Form 60/61 (irrespective of premium amount).