PROPOSAL FORM

ACT ONLY INSURANCE POLICY



(For Private Cars / Two Wheelers)

A. Questions that are necessarily to be listed for granting the cover as per the Motor Vehicles Act – 1988.

GO SMART FLEXI CO	VER (I	Pay	As Y	ou	Driv	/e):																									
Do you want to opt for	GO Sr	nart	Fle	ci c	over	(Pa	y a	s y	ou	driv	/e)	?		Ye	s [No)													
If yes, kindly fill the deta	ails in t	he "	OPT	10	NAL	ADI	DC	N (CO	VE	RS	" se	ctic	n.	•																
A (I) PERSONAL DETA	AILS O	F PR	ROP	OSI	ER/	ow	NE	R																							
1. Name of the Proposer's	′s*:																														
2. Present Address*:																															
		Villa	age/	Cit	y:																		PIN	l co	de:						
		Gra	m Pa	anc	haya	at: [Ī	Sta	te:											
My Present Address is s	same a	as Pe	erma	ane	nt A	ddr	ess	: [<u> </u>	ĺ	•	•	•			•	•								-		-	-			
Permanent Address:										_																					
		Villa	ige/	Cit	y:		İ			Τ	T		T						•				PIN	1 co	de:						
		Gra	m Pa	anc	haya	at: [j			İ	Ì	Ī	İ					1	Sta	te:										j	
		Ger	nder	*:		мΓ	\exists	F	_]	Ot	her		1				_													
	Mob	ile N	۱o*:			٦				Ţ			Τ	_ 	lte	rnat	e M	lob	oile	No	*:										
Aadhaar No.:			\searrow		\searrow	\bigcirc	\bigcirc						•	PA	N*:							Ī				/			60/6		
3. Occupation / Busines	ss:	Sala	aried	I	Se	elf-E	Emp	olo	yec	d 🗌		Oth	ners	: [Е	mai	IIC): [
Marital Status	*:	Mai	rried		U	nma	arri	ed		Dat	e o	f Bir	th*:	D	D	M	M	Υ	Υ	Υ	Y] (Gen	der	*: M] F[Oth	er	
4. Type of Cover:		Lial	oility	Or	nly Po	olicy	/ [
5. Period of Insurance:T	TP Sec	tion	:		Fro	m [D	D	Μ	\ \ \	Υ	′ \	/ Y	<u> </u>	ŀ	Hrs]:[To)	D	D	M	M	Υ	Υ	Υ	Υ
Period of Insurance: F	PA Ow	ner			Fro	m [D	D	Μ	N	Υ	′ \	/ Y	′ \	ŀ	Hrs]:[To)	D	D	Μ	M	Υ	Υ	Υ	Υ
Driver Section: 6. Are You or any of the	propo	sec	app	lica	ants	or c	los	e re	ela	tive	s is	s/ar	e as	sso	ciat	ed t	to P	oli	tica	lly	Ехр	ose	ed F	ers	on	?[Y	es		No)
Politically Exposed Person or Governments, senior p party officials.																															
The digital copy of your polithe policy document, please																					nail II	D. H	owe	ver, i	fyou	unee	edap	ohys	ical c	ору	of
NOMINEE DETAILS*																															
Nominee 1																															
*Name:																															
*Relationship with Nominee:											*	'Da	te c	f Bi	rth	of N	Nom	nin	ee:	D	D	M	M	Υ	Υ	Υ	Υ				
*Mobile no.:																	Em	nai	l ld:												
Percent of Claim																															
Payable: Permanent Address:																															
Bank details of nominee:	Bank	Nan	ne: [В	rand	ch N	lar	ne:												
	Name		Acc	our	nt [
	Bank . Numb	Acc	ount			T	T	T								IF:	SC (Со	de:	Ē		Τ		T				_ 			
*Where Nominee is a r			ase c	ive	the	det	ails	of	Ap	poi	inte	ee/	- Aut	hor	ized	J						-	-	-		1	-				
*Name:									İ	İ						İ															
*Relationship with Nominee:						Ī	Ī	Ī	Ī			*Da	ite (of B	irth	of /	٩рр	oir	nte	<u>:</u> [D	D	M	M	Y	Υ	Y	Υ			
Mobile no.:							Ī										Е	m	ail l	d:											
						-														_											— ,

Percent of Claim Payable: Permanent Address:	
Bank details of	Bank Name: Branch Name:
appointee:	Name of Account
	holder: Bank Account IESC Code:
	Number:
Nominee 2	
*Name:	
*Relationship with Nominee:	*Date of Birth of Nominee:
*Mobile no.:	Email Id:
Percent of Claim Payable:	
Permanent Address:	
Bank details of nominee:	Bank Name: Branch Name:
	Name of Account holder:
	Bank Account IESC Code:
*Where Nominee is a	Number:
*Name:	
*Relationship with	*Date of Birth of Appointee: DDMMYYYY
Nominee: Mobile no.:	Email Id:
Percent of Claim	
Payable:	
Permanent Address: Bank details of	
appointee:	Bank Name: Branch Name: Branch Name:
	Name of Account
	holder:
	Bank Account IFSC Code:
Note (*) marked fields	Bank Account Number: IFSC Code:
	Bank Account Number: are mandatory
Note (*) marked fields A (II) VEHICLE DETAI 7. Registration Numb	Bank Account Number: are mandatory LS
A (II) VEHICLE DETAI	Bank Account Number: are mandatory LS er of the Vehicle:
A (II) VEHICLE DETAI	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: D D M M Y Y Y Y
A (II) VEHICLE DETAIL 7. Registration Numb 8. Date of Registration	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location:
A (II) VEHICLE DETAIL 7. Registration Numb 8. Date of Registration 9. Registration Author	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location:
A (II) VEHICLE DETAIL 7. Registration Numb 8. Date of Registration 9. Registration Author 10. Year of Manufactur	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location:
A (II) VEHICLE DETAIL 7. Registration Number 8. Date of Registration 9. Registration Author 10. Year of Manufactur 11. Engine Number:	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location: e: D D M M Y Y Y Y
A (II) VEHICLE DETAINMENT OF THE PROPERTY OF T	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location: e: D D M M Y Y Y Y
A (II) VEHICLE DETAINMENT A (III) VEHICLE DETAINMENT AND THE PROPERTY OF THE P	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location: e: D D M M Y Y Y Y
A (II) VEHICLE DETAINMENT OF THE PROPERTY OF T	Bank Account Number: are mandatory LS er of the Vehicle:
A (II) VEHICLE DETAINMENT OF THE PROOF OF TH	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location: e: D D M M Y Y Y Y Che Vehicle: D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y Y D D M M
A (II) VEHICLE DETAINMENT OF THE PROPERTY OF T	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location: e: D D M M Y Y Y Y rity & Location: e: D D M M Y Y Y Y ethe Vehicle: ncluding driver: le is driven by non- conventional source of power CNG/LPG/BI-Fuel
A (II) VEHICLE DETAINATION 7. Registration Numbers 8. Date of Registration 9. Registration Author 10. Year of Manufactur 11. Engine Number: 12. Chassis Number: 13. Make of the Vehicle 14. Model: 15. Type of Body: 16. Cubic Capacity of 17. Seating Capacity in 18. Whether the vehicle If "YES", Please given	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location: e: D D M M Y Y Y Y rity & Location: e: D D M M Y Y Y Y ethe Vehicle: ncluding driver: le is driven by non- conventional source of power CNG/LPG/BI-Fuel
A (II) VEHICLE DETAINATION 7. Registration Numbers 8. Date of Registration 9. Registration Author 10. Year of Manufactur 11. Engine Number: 12. Chassis Number: 13. Make of the Vehicle 14. Model: 15. Type of Body: 16. Cubic Capacity of 17. Seating Capacity of 18. Whether the vehicle 19. Whether the use of	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: D D M M Y Y Y Y Y
A (II) VEHICLE DETAINANCE 7. Registration Number 8. Date of Registration 9. Registration Author 10. Year of Manufactur 11. Engine Number: 12. Chassis Number: 13. Make of the Vehicle 14. Model: 15. Type of Body: 16. Cubic Capacity of 17. Seating Capacity of 18. Whether the vehicle 19. Whether the use of 20. Whether the vehicle 21. Whether the vehicle 21. Whether the vehicle	Bank Account Number: are mandatory LS er of the Vehicle:
A (II) VEHICLE DETAINANCE 7. Registration Number 8. Date of Registration 9. Registration Author 10. Year of Manufactur 11. Engine Number: 12. Chassis Number: 13. Make of the Vehicle 14. Model: 15. Type of Body: 16. Cubic Capacity of 17. Seating Capacity of 18. Whether the vehicle 19. Whether the use of 20. Whether the vehicle 21. Whether the vehicle 22. Details of Hire Pure	Bank Account Number: are mandatory LS er of the Vehicle: n of the Vehicle: rity & Location: e: b

(iii) Under Hypothecation? FYES No	(ii) Under Lease Agreement? YES NO
Note: Copies of R.C. Book, Permit & Fitness Certificate should be submitted along with the proposal form) A (INL LABILITY SECTION: COVERAGE THIRD PARTY RISKS: DEATH / BODILY INJURY 23. Coverage for liability against Third Party Risks (Death or Bodily Injury) required in respect of: (i) Owner Driver only (ii) Any person other than Paid Driver (ii) Owner Driver only (iii) Any person other than Paid Driver (iv) Sigve details of such other persons: 1. 2. 3. (Note: 1. Section 146 of Motor Vehicles Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section 146 seempts the paid driver. 2. As per Section 147 (22 la) The liability is "as incurred" in the case of death / bodily injury of a third party? THIRD PARTY RISKS: TPP Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO THIRD PARTY RISKS: LIABILITY TO "WORKMEN' UNDER W.C. ACT-1923 (COMPULSORILY TO BE COVERED BY M.Y. ACT-1981 24. Legal liability to persons employed in connection with operation of the vehicle who are "workmen!" (The liability of the Employer under the Workmen's Compensation Act-1923 is COMPULSORILY TO BE COVERED BY M.Y. ACT-1981 25. Legal Riability to persons employed in connection with operation of the vehicle who are "workmen!" (The liability of the Employer under the Workmen's Compensation Act-1923 in Property Damage (Inland) (Note) (Persons) (Note	(iii) Under Hypothecation? YES NO
A (IMI LABILITY SECTION: COVERAGE THIRD PARTY RISKS: DEATH / BODILY INJURY 23. Coverage for liability against Third Party Risks (Death or Bodily Injury) required in respect of: (i) Owner Driver only (ii) Any person other than Paid Driver (iii) Any person other than Paid Driver (ives) give details of such other persons: 1		
THIRD PARTY RISKS: DEATH / BODILY INJURY 23. Coverage for liability against Third Party Risks (Death or Bodily Injury) required in respect of: (ii) Owner Driver only (iii) Any person other than Paid Driver (iv) Cyres'; give details of such other persons: 1. 2. 3. (Note: 1. Section 146 of Motor Vehicles Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other persons authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section 146 exempts the pald driver. 2. As per Section 147 (2) (a) The liability is "as incurred" in the case of death / bodily injury of a third party) THIRD PARTY RISKS: TPPD Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO For additional TPPD limits, please see Q. No. 23) THIRD PARTY RISKS: LIABILITY TO 'WORKMEN' UNDER W.C. ACT-1923 (COMPULSORILY TO BE COVERED BY M.Y. ACT-1988 (a. Legal liability to persons employed in connection with operation of the vehicle who are "workmen". [The liability of the Employer under the Workmen's Compensation Act - 1923 is covered under the Motor Vehicles Act - 1988]. 1) Drivers 2) Employees (Workmen) (No. of persons: No		
23. Coverage for liability against Third Party Risks (Death or Bodily Injury) required in respect of: (i) Owner Driver only (ii) Any person other than Paid Driver (iii) Any person other than Paid Driver (iii) Any person other than Paid Driver (ives) NO (ives) 1. Section 146 of Motor Vehicles Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section 146 exempts the paid driver. 2. As per Section 147 (2) fair The liability is "as incurred" in the case of death / bodily injury of a third party THIRD PART RISKS: TPD Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO (For additional TPPD limits, please see Q. No. 25) THIRD PARTY RISKS: LIABILITY TO "WORKMEN UNDER W.C. ACT-1923 (COMPULSORILY TO BE COVERED BY M.V. ACT-1988). 1) Drivers 2) Employees (Workmen) (No. of persons:) 2) Employees (Workmen) (No. of persons:) 3) Employees (Workmen) (No. of persons:) 4) Employees (Workmen) (No. of persons:) 5) Employees (Workmen) (No. of persons:) 6) Employees (Workmen) (No. of persons:) 7) The Policy provides additional Third Party Property Damage liability to employees who are workmen within the meaning of the Workmen's Compensation Act-1923.) (For additional coverage, please refer to Q. No. 26) 8) QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PERIMT ENDORSEMENTS ADDITIONAL LIABILITY TO WORKMEN 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO (Refer to Q. No. 23) ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? (This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1853 and the Common Law and F		
(ii) Any person other than Pald Driver		
If, "YES'; give details of such other persons: 1		(i) Owner Driver only YES NO
(Note: 1. Section 146 of Motor Vehicles Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive a whicle in public place has insurance against third party risks. The explanation to Section 147 (2) (a) The liability is "as incurred" in the case of death / bodily injury of a third party PID party PID party PID party RISKS: TPPD Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO PO you wish to the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO PO you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO PO you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO PO you wish to cover the Workmen's Compensation Act – 1923 is covered under the Motor Vehicles Act – 1988]. 1) Drivers (No. of persons:) 2) Employees (Workmen) (No. of persons:) 2) Employees (Workmen) (No. of persons:) 2) Employees (Workmen) (No. of persons:) 2) Employees (Workmen) (No. of persons:) 3) Endower Scompensation Act-1923.) [For additional coverage, please refer to Q. No. 26] B. OUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1.00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO (Refer to Q. No. 23) ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement). [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO		(ii) Any person other than Paid Driver YES NO
2	lf, "Y	ES", give details of such other persons:
Note: 1. Section 146 of Motor Vehicles Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section 146 exempts the paid driver. 2. As per Section 147 (2) (a) The liability is "as incurred" in the case of death / bodily injury of a third party) THIRD PARTY RISKS: TPPD Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES		
[Note: 1. Section 146 of Motor Vehicles Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section 147 (2) (a) The liability is "as incurred" in the case of death / bodily injury of a third party? THIRD PARTY RISKS: TPPD Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO For additional TPPD limits, please see Q. No. 25] THIRD PARTY RISKS: LIABILITY TO 'WORKMEN' UNDER W.C. ACT-1923 (COMPULSORILY TO BE COVERED BY M.V. ACT-1988). 23. Legal liability to persons employed in connection with operation of the vehicle who are "workmen". TTP liability of the Employer under the Workmen's Compensation Act-1923 is covered under the Motor Vehicles Act-1988). 1) Drivers 2) Employees (Workmen) (No. of persons:		
person authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section 144 (2) (a) The liability is "as incurred" in the case of death / bodily injury of a third party! THIRD PARTY RISKS: TPPD Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES	/NI - 4	
exempts the paid driver: 2. As per Section 147 (2) (a) The liability is "as incurred" in the case of death / bodily injury of a third party) THIRD PARTY RISKS: TPPD Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES		
Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only? YES NO		
For additional TPPD limits, please see Q. No. 25 THIRD PARTY RISKS: LIABILITY TO 'WORKMEN' UNDER W.C. ACT-1923 (COMPULSORILY TO BE COVERED BY M.V. ACT-1988) 24. Legal liability to persons employed in connection with operation of the vehicle who are "workmen". [The liability of the Employer under the Workmen's Compensation Act – 1923 is covered under the Motor Vehicles Act – 1988]. 3) Drivers	THII	RD PARTY RISKS: TPPD
THIRD PARTY RISKS: LIABILITY TO 'WORKMEN' UNDER W.C. ACT-1923 (COMPULSORILY TO BE COVERED BY M.V. ACT-1988) 24. Legal liability to persons employed in connection with operation of the vehicle who are "workmen". [The liability of the Employeey under the Workmen's Compensation Act-1923 is covered under the Motor Vehicles Act-1988]. 1) Drivers (No. of persons:) 2) Employees (Workmen) (No. of persons:) (Note: The Motor Vehicles Act-1988 under Sec. 147 (1) (ii) (i) covers liability to employees who are workmen within the meaning of the Workmen's Compensation Act-1923.) [For additional coverage, please refer to Q. No. 26] B. QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7, 50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO [Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO [NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO [NO (Note: Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
24. Legal liability to persons employed in connection with operation of the vehicle who are "workmen". [The liability of the Employer under the Workmen's Compensation Act – 1923 is covered under the Motor Vehicles Act – 1988]. 1) Drivers (No. of persons:) (No. of persons:) (No. of persons:) (No. of persons:) (No. of persons:) (No. of persons:) (No. of persons:) (No. of persons:) (No. of persons:		
Employer under the Workmen's Compensation Act – 1923 is covered under the Motor Vehicles Act – 1988]. 1) Drivers (No. of persons:) 2) Employees (Workmen) (No. of persons:) (Note: The Motor Vehicles Act-1988 under Sec. 147 (1) (ii) (i) covers liability to employees who are workmen within the meaning of the Workmen's Compensation Act-1923.) [For additional coverage, please refer to Q. No. 26] B. QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7, 50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO [Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law] YES NO [Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement). [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO [Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
(No. of persons:) (Note: The Motor Vehicles Act-1988 under Sec. 147 (1) (ii) (i) covers liability to employees who are workmen within the meaning of the Workmen's Compensation Act-1923.) [For additional coverage, please refer to Q. No. 26] B. QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7, 50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	۲٠.	
(Note: The Motor Vehicles Act-1988 under Sec. 147 (1) (ii) (i) covers liability to employees who are workmen within the meaning of the Workmen's Compensation Act-1923.) [For additional coverage, please refer to Q. No. 26] B. QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO [Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		1) Drivers (No. of persons:)
B. QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		2) Employees (Workmen) (No. of persons:)
B. QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	(Not	e: The Motor Vehicles Act-1988 under Sec. 147 (1) (ii) (i) covers liability to employees who are workmen within the meaning o
B. QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7, 50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
ADDITIONAL TPPD 25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law] YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
25. The Policy provides additional Third Party Property Damage liability limits of Rs. 1,00,000/- for Two Wheelers and Rs. 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	В. 0	QUESTIONS THAT PROVIDE ADDITIONAL COVERS AS PER IMT ENDORSEMENTS
Rs. 7, 50,000/- for other classes of vehicles. Do you wish to cover the additional limit? YES NO [Refer to Q. No. 23] ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	ADE	OITIONAL TPPD
ADDITIONAL LIABILITY TO WORKMEN 26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law] (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	25.	
26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law] YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
26. Do you wish to cover wider legal liability to employees who are 'workmen'? [This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law] YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	ADE	DITIONAL LIABILITY TO WORKMEN
[This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under the Fatal Accidents Act-1855 and the Common Law] YES NO (Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
(Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement) [Refer to Q. No. 24] LIABILITY TO EMPLOYEES WHO ARE NOT WORKMEN 27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		[This information is sought to cover in addition to liability under the Workmen's Compensation Act-1923, liability under
27. Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO (Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	(Not	e: The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered
(Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees who are not workmen can be covered under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	LIAI	BILITY TO EMPLOYEES WHO ARE NOT WORKMEN
under this endorsement). PERSONAL ACCIDENT COVER FOR OWNER DRIVER 28. Do you hold a valid driving license? Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	27.	Do you wish to cover wider legal liability to employees who are NOT 'workmen'? YES NO
28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
28. Do you hold a valid driving license? YES NO Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:	PER	SONAL ACCIDENT COVER FOR OWNER DRIVER
Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination: (a) Name of the Nominee & Date of Birth:		
(a) Name of the Nominee & Date of Birth :		
(b) Relationship :		
		(b) Relationship :

	(c) Name of the Appointee (If Nominee is a Minor)	:		
	(d) Relationship to the Nominee	:		
owr	te: 1. Personal Accident cover for owner ner driver cannot be granted where a veh ner-driver does not hold an effective driv	nicle is owned by a company, a		
29.	Do you wish to include Personal Accide	ent cover for named persons?	YES NO	
If YE	ES, give name and Capital Sum Insured (C	CSI) opted for:		
	Name	CSI Opted (Rs.)	Nominee	Relationship
1)				
2)				
3)				
	te: The maximum CSI available per pers eelers)	son is Rs. 2 Lakhs in case of	Private Cars and Rs. 1 Lakh	n in the case of Motorized Two
30.	Do you wish to include Personal Accide YES NO			ers (Two Wheelers)?
	If YES, give number of persons and Car	•		
	No. of Persons:	C.S.I (Per Person):		
(No	te: The maximum CSI available per perso	on is Rs. 2 Lakhs in case of Priv	ate Cars and Rs. 1 Lakh in th	ne case of Motorized Wheelers)
GE	OGRAPHICAL EXTENSION			
31.	Whether extension of geographical are	ea to the following countries r	required?	_
	(1) Bangladesh YES NO	(2) Bhutar	YES NO	
	(3) Maldives YES NO	(4) Nepal	YES NO	
	(5) Pakistan YES NO	(6) Sri Lan	ka YES NO	
	te: Presently the territory covered is geo endorsement)	graphical area of India. Exten	sion of geographical area c	over can be availed by use of
C.	QUESTIONS THAT ARE ELICITED FOR	INFORMATION AND DATA C	OLLECTION PURPOSES	
32.	Previous History:			
	a. Date of purchase of the vehicle by t	he proposer:	_/_/	
	b. Whether the vehicle was new or sec	cond hand at the time of purc	hase? New/Second Hand	
	c. Will the vehicle by used exclusively t	for		
	(i) Private, Social, Domestic, Pleasure	& Professional Purpose? Y	ES NO	
	(ii) Carriage of goods other than samp	les or personal luggage? Y	ES NO	
d.	Is the vehicle in good condition?	Υ	ES NO	
	If NO, please give details:			
e.	Name and Address of the previous insu	urance company:		
f.	Previous policy number:	g. Pr	evious policy type:	
h	Period of Insurance : From:	To:		
i.	Claims logged during the preceding 3 y	years:		
Ye		No. Of Claims	Claim Amo	unt (Rs.)

33.	Details of the Driver:														
	a. Age & Date of Birth o	of the Owner:	Age: \	Yrs [OOB:/	/	-								
	b. Age & Date of Birth o	of the Driver:	Age: Y	rs D	OB:/	_/									
	c. Does the driver suffe	er from defective	vision or hearin	ng or ar	ny physic	cal infirm	nity?	YES		NO					
d.	Has the driver ever beer	n involved / convi	icted for causin	g any a	ccident	of loss?		YES		_ NO					
	If YES, give details as und	der including the	e pending prose	cution	s:					_					
	Driver's Name :														
	Date of Accident:														
	Loss / Cost (Rs.):											-			
	Circumstances of Accide	ent / Loss:										-			
AD	DITIONAL INFORMATIO	N (OFFICE USE	ONLY)												
PRC	POSAL TYPE														
1.	New Policy:				Roll-Ov	er:							\prod		
	Renewal:				Endorse	ements:									
PER	SONAL DETAILS														
2. M	lother's maiden Name:														
3. A	ddress: of Proposer's:														
		City:					State:								
		PINcode:					Gende	r: M		F	Ot	her			
		Phone:]	Mobile	No.:				$oxed{oxed}$		\perp	
		Aadhaar No.:						PAN:				\perp		\perp	
Mar	ital Status:	Single Ma	rried D	Divorce	d L	Widowe	ed								
	cational Qualification:					$\perp \perp$				4	\coprod	\downarrow	Щ	\dashv	
	referred Mode of Contact:					\bot				\dashv	Ш			\perp	
	ehicle Type:	2 Wheeler	3 Wheeler	4 W	heeler	Mo	re thar	า 4 Wh	eeler						
	ehicle Colour:						٦								
	City where the vehicle will					+	<u> </u>	[_			
	Fuel Type:			NG	LP	ш		ectric [Hybi				ther	
	ehicle category & Use: Co		eed Trials		sement o	ourier &	_				ampe	_	./IMIC	tor	
	omes Racing ast food/ Restaurant – De		Special Pu		_	Zentre [Airfiel	ourist o			. –	.01 L			
	ehicle specifically designe	_	·	•			_	thers		Jerati	JII _				
	Whether any modification	•	•				_		Ll ard si	pecifi	catio	n? YF	-s		\circ
	If YES, please give de						ianoi o	0 001.101	a. a. o ₁	p = 0					
11.	Whether the vehicle is ce					club of Ir	ndia?			YES		NO			
	Is the vehicle in good sta	_	, ,	YES	NO										
	If NO, please furnish deta			L											
13.	What will be the Average		vehicle?												
	Less than 500 Kms	-	01 & 2500 Kms		Betwee	en 2501 t	to 5000) Kms		Ab	ove 5	000	Kms	;	I
14.	Where will the vehicle be		-					- [ш	
			State Highway [Ci	ty Roads	; П	own	Vil	lage l	Roads	;	Priv	ate	Road	ı 🗀
15.	Will the vehicle be let out	t on occasional H	lire? YES	N	0	_	_	_							
			L												

16. V	Vhere the vehi	cle will be	generally parked	I						
Durin	g the Day –	Roadsid	e Public parking							
		Roadside	e Outside Parking	9						
		Open pa	rking lot							
		Covered	parking lot							
		Locked	covered garage							
			nclosed compou	nd of residen	ce/office/fact	ory 🗌				
Durin	g the Night -	Roadside	e Public parking							
	5		e Outside Parking	3						
		Open pa	rking lot							
		Covered	parking lot							
			covered garage							
			nclosed compou	nd of residen	ce/office/fact	orv 🗍				
DRIV	ER DETAILS		,							
17. Tł	ne vehicle will l	oe driven l	ру							
Sr. No.	Name		Relationship with Proposer	Date of Birth / Age	Driving Experience	License No.	Gender	Claim Year	Amt	Claim Type
1.					<u> </u>					1
2.										
3.										
4.										
5.										
DEC	LARATION BY	PROPOS	ER							
			statements made this declaration s						knowledge	e and belief
If anv	additions or a	Iterations	are carried out ir	n the risk pro	posed after th	e submission	of this pro	posal form. th	nen the sa	me should
-	nveyed to the				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		J. J	p		
Date:	D D M M	Y Y Y	Y Place:							
Date.							Signati	ure of the Pro	poser	
FLF	CTRONIC INS	IRANCE	ACCOUNT DETA	II S SECTIOI	N					
			eler Policy and re							
	hysical Forma				s & when appl	icable				
	•		sitory (For those			icabic				
	NSDL Databa	se Manag	jement Ltd.	Centric Known	o Insurance l	Repository Li urance Repos	mited (Fo	rmerly ted).		
H	Karvy Insuranc	e Reposit	ory Ltd.			ository Servic				
\Box	have an e-Ins	urance Ac	count & the No. i	s						
			Your Customer R		ber) is				(If ava	ilable).
1					L	reby grant e	xplicit con	sent to SRI	 General	Insurance
Comp	oany for the re	etrieval ar	nd downloading o	of my CKYC						
			ne purpose of en	_					_	
			will handle my CK oked in writing by					•		•
			arily provide my c		aa ana anaen		is and COM	a.c.o. is regal c	ang the us	age of filly
								Date: D D	MMY	YYY
	individit our website vanue shigeneral in to view the list of VVC OVD (Officially Valid Decomposite)									

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

AML GUIDELINES (Premium Payment shall be made by the Policyholder of the Policy)	
We hereby confirm that all premiums have been/ will be paid from bona fide sources and no premiums have been/will be paid or 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 surance Contract in case I am/ have been found guilty by any competent court of law under any statues, directly or indirect to overning the Prevention of Money Laundering in India.	ne ne
lationality: Indian Non-Indian Non-resident Indian(NRI) Others	
Non-Indian please specify the nationality and country address	_
ype of Organisation: (Only applicable if policy issued on Group Basis) Corporation Government Non-Governmental Organisation Society Trust Partnership International Organisation Cooperative Section 25 Companies	
hereby declare that the current address is different from the avalilable in the Central identities Data Repository. Yes	
No. Customer can submit CKYC form for updation.	
My CKYC No. (Central Know Your Customer Registry Number) is (If available).	
Recent photograph of proposer: (Photograph is required. if customer does not have CKYCID) Signature of Proposer:	
PREMIUM PAYMENT AND BANK ACCOUNT DETAILS*:	
Premium Amount: Cheque Cheque Dournal Date: D D M M Y Y Y Premium payment Cheque EFT DD Debit Card/Credit Card	Υ
Bank Account IFSC Code:	
Bank Account Branch	
Number*: Name*: Name*: Card Expiry Date: DDMMYYYY	Υ
BIGI does not accept Cash for Premium Payments against the Policy.	
INSURED BANK DETAILS*	
n case of cancellation of policy, if premium were paid through credit card the refund amount would be credited to yo lesignated bank account. Please provide the following bank details and a copy of Cancelled Cheque: (Cancelled Cheque should b of the same bank account in which the refund/claim needs to be credited directly)	
Branch: Branch:	
Name as in Bank Account No.*:	
FSC Code: 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.

AGENT DECLARATION	
I,	ned in this Proposal Form to the Proposer including oposal Form to questions contained herein or any in the Company and the Proposer, if this Proposal is the explained that if any untrue statement(s)/addendum(s), affidavits, statements, submissions, affits which may be payable and further more if there your pursuant to this Proposal may be treated by the
Licence No	
Date: D D M M Y Y Y Y	
Place:	Signature of Agent
DECLARATION BY INSURED:	
I/we hereby declare that the value of insurable assets is less than ₹ 5 made by me/us in this Proposal Form are true to the best of my/our known 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 subbe conveyed to the Insurers immediately. The details filled in the proposal form would be used for new as well as for rene	wledge and belief and I/we hereby agree that this omission of this proposal form then the same should
Date: D D M M Y Y Y Place:	Signature of the Proposer
DECLARATION (If signed in vernacular language / If you have affixed thumb in	mpression above)
	sed by someone other than the Advisor/Employee of osal Form have been clearly explained to me/us and I/osal Form have been recorded as per the information
(Relationship with the Proposer/Primary Insured) and inhabitant of (city) and residing at	
certify that I have read out and explained the contents of the Proposal Form Insurance Policy from SBI General Insurance Company Ltd., to the Proposer/Pr same. I/we declare that whatever I/We have stated herein above is true and contents.	n and all other documents incidental to availing the imary Insured and he/she/they have understood the
Signature of the Witness Insured Signature	/Thumb impression of the Proposer/Primary Insured
Date: D D M M Y Y Y Y Place:	
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 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 Insure.
- (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.



AML Declaration as per AML Master Guideline 2022:

- 1. KYC Details for Individual Members 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."
 - To be included as declaration by proposer /insured Section in all Proposal forms.
- 2. Please note, in absence of PAN, kindly provide Form 60/61 (irrespective of premium amount).

Applicable to non Individual customers.

3. 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.
 - 1."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 ten percent of capital or profits of the partnership or who exercises control through other means.
 - Explanation For the purpose of this clause, "Control" shall include the right to control the management or policy decision
- 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.