RELIANCE General Insurance

reliancegeneral.co.in
1800 3009

Proposal Form for Commercial Vehicles Package Policy (Other than Motor Trade Internal Risks Policy)

(The queries made/details stated below are the minimum requirement to be furnished by a proposer. The Insurer may seek any other information as desired for under for underwriting purpose.)
*(Applicable to all classes of vehicles with suitable amendments in 'Limitations as to Use')

☐ PCV ☐ GCV ☐ MISC D ☐ Trailer

For Office Use Only

Policy Number ____ Date d d m m y y y y

Savvion Reference No ____ Inspection Lead No. ____

Intermediary Details (To be filled in BLOCK LETTERS)

Intermediary Name ____ Code ____

Branch Name ____ Code ____

Sales Manager Name ____ Code ____

Details (To be filled in BLOCK LETTERS)

1. This Proposal is for ☐ A new Policy ☐ Renewal of Policy ☐ Endorsement ☐ Others (Please specify) ____

2a. Proposer's Full Name ☐ Mr. ☐ Mrs. ____

2b. Address

	Address for Communication	Address where Vehicle is Normally Kept and Used
Flat/Building/Door/Block No.		
Road/Street/Sector		
Nearest Landmark		
Area		
City		
Pin Code		
State		
Country		

Phone ____ Mobile ____

Emergency Contact No. ____ Blood Group ____

Email ____ Fax ____

3. Period of Insurance From d d m m y y y y To d d m m y y y y

4. Source of Funds ☐ Business ☐ Profession ☐ Salary ☐ Agricultural Income ☐ Savings ☐ Others

5. Monthly Income ☐ Upto ₹ 20,000 ☐ ₹ 20,001 to ₹ 50,000 ☐ ₹ 50,001 to ₹ 1,00,000 ☐ ₹ 1,00,0001 and above

6. UID Aadhaar No. ____ 7. PAN No. ____

Details of the Vehicle

8. Registration Number ____ 9. Date of Registration d d m m y y y y

10. Registering Authority & Location ____

11. Year & Month of Manufacture ____ 12. Cubic Capacity ____

13. Engine Number ____

14. Chassis Number ____

15. Make of Vehicle ____

16. Type of Body/Model ____ 17. Vehicle sub-class ____

18. Gross Vehicle Weight (GVW)/Cubic Capacity (C.C.) ____

19. Goods type (Applicable only if GVW+7500kgs) ☐ Hazardous Goods ☐ Non-Hazardous Goods

20. Is the Vehicle made in India? ☐ Yes ☐ No

21. Max. Licensed carrying capacity (No. of Passengers) in case of Passenger carrying vehicles ____________

22. Vehicle Category ☐ Bus ☐ Taxi

Vehicle usage type (Applicable if bus) : ☐ Contract Carriage ☐ Stage Carriage ☐ Private Usage

Vehicle usage sub type (Applicable if Contract Carriage): ☐ School Bus ☐ Employee pickup Bus ☐ Others

23. Seating capacity (Including Driver) ____________

Details of the Vehicle Type and Use

24. Whether the Vehicle is driven by Non-conventional source of power? ☐ Yes ☐ No If yes ☐ Bi Fuel ☐ CNG ☐ LPG

Insured's Declared Value (IDV) of vehicle Chassis Body	Non - electrical accessories fitted to the vehicle (₹)	Electronic accessories fitted to the vehicle (₹)	Side car (two-wheeler) Trailer (Pvt. Cars) (₹)	Value of CNG/ LPG Kit Bi Fuel (₹)	Total Value (₹)

25. Details of Driver : (a) Age of Owner Driver ____________ Others ____________

(b) Does the driver suffer from defective vision or hearing or any physical infirmity. ☐ Yes ☐ No

If "Yes" please give details.

____

(c) Has the driver ever been involved for causing any accident or loss? ☐ Yes ☐ No

If "Yes" please give details as under including the pending prosecution, if any:-

____

____

(d) D.O.B d d | m m | y y y y

26. Add On Covers (Subject to availability and eligibility)

(a) Easy Monthly Instalment (EMI) Protection Cover: (RGI-MO-A00-00-17-V01-14-15) ☐ Yes ☐ No

If Yes, please choose any one option;

☐ Plan I - 1 EMI, EMI Amount: ₹____________ ☐ Plan II - 2 EMIs, EMI Amount: ₹____________

☐ Plan III - 3 EMIs, EMI Amount: ₹____________

(b) Additional Towing Charges ☐ Yes ☐ No

27. Is the vehicle fitted with any Anti-theft device approved by the ARAI? ☐ Yes ☐ No

If yes, please attach certificate of Installation in the vehicle, issued by Automobile Association of India.

28. Are you a member of Automobile Association of India? If yes, please submit membership copy. ☐ Yes ☐ No

29. Whether the Vehicle is used for Driving Tuitions? ☐ Yes ☐ No

30. Whether use of Vehicle is limited to Own Premises? ☐ Yes ☐ No

31. Whether the commercial vehicle is also used for Private purposes (excluding use for hire or reward)? ☐ Yes ☐ No

32. Are you entitled to No Claim Bonus? ☐ Yes ☐ No

If Yes, please submit proof thereof

33. Whether the Vehicle is fitted with Fibre Glass Tank? ☐ Yes ☐ No

34. Whether the Vehicle belongs to the Embassy/Consulate of a Foreign Country? ☐ Yes ☐ No

If so, is the duty element included in the IDV?

35. Whether the Vehicle is design for use of Blind/Handicapped/Mentally Challenged Person? ☐ Yes ☐ No

36. Date of purchase of the Vehicle by the Proposer d d | m m | y y y y

37. Whether the Vehicle at the time of purchase was ☐ New ☐ Second Hand

Risk Inclusions

38. Liability to third parties: The policy provides Third Party Property Damage (TPPD) of ₹ 1 lakh (Two wheelers) and ₹ 7.5 lakhs (other class of vehicles)

Do you wish to restrict the above limits to the statutory TPPD Liability limit of ₹ 6000/- only? ☐ Yes ☐ No

Do you wish to cover legal liability to?

(a) Driver/Conductor /Cleaner (No. of persons) ☐ Yes ☐ No

(b) Other employees (No. of Persons) ☐ Yes ☐ No

(c) Non-fare paying passenger (No. of persons) ☐ Yes ☐ No

39. Do you wish to include personal Accident (P.A.) Cover for paid drivers, cleaners and conductors? ☐ Yes ☐ No

If Yes, give name and Capital Sum Insured (CSI) opted for. The maximum CSI available per person is ₹ 1 Lakh in the case of Motorised two-wheelers and ₹ 2 lakhs for other classes of vehicles.

40. Personal Accident Cover for Owner Driver. Please give details of nomination

Name	Name of Nominee	Age of Nominee	Name of Appointee (if Nominee is Minor)	Relationship	Address

(Note: 1. Personal Accident cover for owner driver is compulsory for Sum Insured of ₹ 1,00,000/- for Two Wheelers and ₹ 2,00,000/- for other class of vehicles

2. Compulsory PA cover for owner driver cannot be granted where a vehicle is owned by a company, a partnership firm or a similar body corporate or where the owner-driver does not hold an effective driving license)

41. Do you wish to include Personal Accident cover Named Persons? ☐ Yes ☐ No

Name	CSI Opted	Name of Nominee	Age of Nominee	Name of Appointee (if Nominee is Minor)	Relationship	Address

42. Extension of Geographical Area:

Whether extension of Geographical Area to the following countries required?

☐ 1. Bangladesh ☐ 2. Bhutan ☐ 3. Maldives ☐ 4. Nepal ☐ 5. Pakistan ☐ 6. Sri Lanka

Details of Hire Purchase / Hypothecation / Lease

43. Please state if the vehicle is under ☐ Hire purchase ☐ Lease Agreement ☐ Hypothecation Agreement

If so, give name and address of concerned parties.

44. Full Name M/s

45. Address

Insured's Declared Value of vehicle		Non - electrical accessories fitted to the vehicle (₹)	Electronic accessories fitted to the vehicle (₹)	Side car (two-wheeler) Trailer (Pvt. Cars) (₹)	Value of CNG/ LPG Kit Bi Fuel (₹)	Total Value (₹)
Chassis	Body					

Note

The Insured's Declared Value (IDV) of the vehicle will be deemed to be the 'SUM INSURED' for the purpose of this tariff and it will be fixed at the commencement of each policy period for each insured vehicle.

The IDV of the vehicle is to be fixed on the basis of manufacturers' listed selling price of the brand & model as the vehicle proposed for insurance at the commencement of insurance / renewal, and adjusted for depreciation as per policy wordings.

Details of Previous Insurance

46. Full Name of previous insurer

47. Address

48. Policy Number Previous policy Expiry d d m m y y y y

49. Type of cover: ☐ Package Policy ☐ Liability Only ☐ Other (To be describe) ____

50. NO CLAIM BONUS allowed under previous policy (%) ____

51. Claims taken in previous policy ☐ Yes ☐ No

If yes, No. of Claims Claims Amount ₹

52. Are you entitled to No Claim Bonus ☐ Yes ☐ No

If yes, please submit/attached proof thereof

Payment Details

☐ Cheque / DD Cheque / DD No.

Cheque/DD Date d d m m y y y y ☐ Cash ☐ Credit Card ☐ Others ____

Proposer's Bank Details

53. Name of the Bank Account Holder

54. Bank Account No.: 55. Account: ☐ Saving ☐ Current

56. Name of the Bank

57. Branch

58. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)

59. IFSC Code (11 character code appearing on your cheque leaf)

I Wish: ☐ Any refund due on the premium payment / any payment / claims to be directly credited to my aforesaid Bank Account.*

*As per IRDAI, its mandatory that all payments made to the insured are only through electronic mode.

Declaration by Proposer

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 RELIANCE General Insurance Company Limited. I/We also declare that, if any additions or alterations are carried out after the submission of this proposal form, then the same would be conveyed to the insurers immediately. I/We hereby declare that the contents of the form and documents have been fully explained to me/us and that I/We have fully understood the significance of the proposed contract. I/We agree to accept a policy subject to the condition prescribed by the company. • I have read and understood the brochure, prospectus, sales literature & Policy wordings and confirm to abide by the same. • I/We declare that the rate of NCB stated above by me/us is correct and that no claim has arisen in the expiring policy (copy of the policy enclosed). • I/We further undertake that, if this declaration is found to be incorrect, all benefits under the policy in respect of section I of the policy will stand forfeited. • I/We further understand and agree that RELIANCE General Insurance will seek confirmation of above stated details from my/our previous insurers. Pending receipt of necessary confirmation, I/We agree that, though coverage under the policy will be available to me/us, RELIANCE General Insurance will be liable to release the payment towards any claims under section I of the policy only after a confirmation in this regard is received. In the event this declaration is found to be incorrect, any and all coverage available under section I of the policy from the date of commencement of the policy shall stand automatically forfeited. Further, any survey arranged/allowed by RELIANCE General Insurance of the motor vehicle, pending confirmation of the declaration from my/our previous insurers, shall be without prejudice to any of the rights and remedies available to RELIANCE General Insurance as contained herein and under the relevant laws and regulations. • I/We acknowledge and agree that, Pending receipt of confirmation of the declaration from my/our previous insurers, the "cash-less repair facility" provided by RELIANCE General Insurance shall stand suspended. • I/We also shall endeavour to procure the renewal notice and pass on the same to RELIANCE General Insurance immediately upon the receipt of such renewal notice. Mode of Payment: Secure your payment by cheque/DD favouring Reliance General Insurance CO.Ltd. This policy shall be voidable at the option of the Company in the event of mis-representation, mis-description of non-disclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other persons, files a proposal fo insurance containing any false information, or conceals for the purpose of misleading, information, information concerning any fact material thereto, commits a fraudulent act which will render the policy voidable at the company's sole discretion and result in a denial of insurance benefits.

This proposal form was completed by

Name ______________________ Place : ______________________

Date : d d | m m | y y y y Date : d d | m m | y y y y

Signature Signature of Proposer & Company Seal

Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing 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 liable for a penalty which may extend to ten lakh rupees.

Supporting Confirmation of Agent/Broker/SM/CSO

I confirm the above signature to be of the registered owner of the vehicle proposed for insurance

Name of IRDA Agent/Broker ☐ Mr. ☐ Mrs.

Place : ______________________

Date : d d | m m | y y y y

(In case of Direct Business, Name & Signature of CSO / SM to be taken) Signature of IRDA Agent/Broker