Universal Sompo General Insurance Co. Ltd.

(A joint venture between Allahabad Bank, Indian Overseas Bank, Karnataka Bank Limited, Dabur Investments Corp. and Sompo Japan Insurance Inc.)

Regd. Office: 201-208, Crystal Plaza, Opp. Infinity Mall, Link Road, Andheri (West), Mumbai - 400 058.

MOTOR INSURANCE PROPOSAL FORM

IMD Name ____________________ IMD code ____________________

Sub IMD Name ____________________ Sub IMD code ____________________

Vehicle Type ☐ Two Wheeler ☐ Private Car ☐ Goods Carrier ☐ Passenger Carrier ☐ Miscellaneous

Type of Cover required ☐ Liability Only ☐ Package Policy ☐ Others (Specify) ____________________

A. INSURED

Owner's (Proposer's) Full Name ____________________

Occupation / Business ____________________ Date of Birth __/__/____

Period of Insurance From __/__/____ To __/__/____

(i) ADDRESS FOR COMMUNICATION	Is the vehicle usually parked at address (i), If not please mention the usual address below
Address Line 1 ____________	Address Line 1 ____________
Address Line 2 ____________	Address Line 2 ____________
City ____________	City ____________
State ____________	State ____________
Pin Code ____________	Pin Code ____________
Phone No. ____________	PAN Card No. ____________ (Copy to be attached)
Mobile No. ____________	
E-mail ____________	

B. VEHICLE DETAILS

Registration No. ____________	Date of Registration __/__/____
Engine No. ____________	Year of Manufacture ____________
Chassis No. ____________	Colour of the Vehicle ____________
Make of Vehicle ____________	Cubic Capacity/Gross Vehicle Weight ____________
Model of Vehicle ____________	Seating capacity including Driver ____________
Type of Body ____________	Registering Authority and Location ____________
Odometer Reading ____________	Annual average kilometers ____________

Whether the vehicle is driven by non-conventional source of power? ☐ Yes ☐ No
If "Yes", specify ____________________

Whether the vehicle is fitted with fiber glass tank? ☐ Yes ☐ No

Is the vehicle fitted with any Anti-theft device approved by the AARI? ☐ Yes ☐ No
If "Yes", attach Certificate of Installation in the vehicle issued by AARI.

Is the vehicle in good and working condition? ☐ Yes ☐ No
If "No", specify ____________________

C. VEHICLE USAGE DETAILS

Vehicle is used for driving tuitions ?	☐ Yes ☐ No
Extension of geographical area is required? If "Yes", select the country below? ☐ Bangladesh ☐ Bhutan ☐ Maldives ☐ Nepal ☐ Pakistan ☐ Sri Lanka	☐ Yes ☐ No
Use of vehicle is limited to own premises?	☐ Yes ☐ No
Vehicle belongs to Foreign Embassy / Consulate?	☐ Yes ☐ No
Vehicle is designed for use of Blind/ Handicapped/ Mentally challenged persons and duly endorsed as such by RTA?	☐ Yes ☐ No
The vehicle is parked in Own / Society premises at night?	☐ Yes ☐ No
IN CASE OF PRIVATE CARS / TWO WHEELERS ONLY	
Vehicle is used for Commercial purposes?	☐ Yes ☐ No
The car is certified as Vintage car by Vintage and Classic Car Club of India?	☐ Yes ☐ No
The vehicle be used exclusively for Private, Social, Domestic, Pleasure and Professional purposes?	☐ Yes ☐ No
The vehicle be used exclusively for carriage of goods other than samples or personal luggage?	☐ Yes ☐ No
IN CASE OF COMMERCIAL VEHICLES ONLY	
The use of the vehicle is limited to confined site?	☐ Yes ☐ No
The commercial vehicle is also used for Private purposes (Excluding use for hire or reward)	☐ Yes ☐ No

D. COVERAGE DETAILS

Insured's Declared Value *Note1

Insured's Declared Value of vehicle	Non - Electrical accessories fitted to the vehicle	Electrical and Electronic accessories fitted to the vehicle	Side Car (two wheeler)/ Trailer (Pvt. cars)	Value of CNG / LPG Kit	Total Value
Rs.	Rs.	Rs.	Rs.	Rs.	Rs.

Do you wish to restrict the limits of Third Party Property Damage (TPPD) Liability to statutory limit of Rs. 6000 only.
The policy provides TPPD of Rs. 1.0 lakh for Two wheelers and Rs. 7.5 lakhs for other vehicles. If you opt out you shall be entitled for a discount of Rs. 50 for Two Wheelers and Rs. 100 for other vehicles. ☐ Yes ☐ No

Do you wish to cover Legal Liability to? ☐ Yes ☐ No
A) Driver
B) Other Employees (No. of persons _ ____)
C) Unnamed Passengers (No. of persons _ ____)
D) Conductor and Cleaner (No. of persons _ ____) (only in case of Commercial Vehicle)
E) Non Fare Paying Passenger (No. of persons _ ____) (only in case of Commercial Vehicle)

Do you wish to include Personal Accident (P.A.) Cover for Named persons /Paid drivers, Cleaners and Conductors ? If "Yes", specify Name and Capital Sum Insured (CSI) opted for. The maximum CSI available per person is Rs. 1 lakh for two wheelers and Rs. 2 Lakhs for other vehicles. ☐ Yes ☐ No

S. No.	Name	CSI
1.		
2.		
3.		

Do you wish to include P.A. Cover for Unnamed Persons/Hirer/Pillion rider (in case of two wheelers)? If "Yes", specify the number of persons as per seating capacity and Capital Sum Insured (CSI) opted. ☐ Yes ☐ No

No. of Persons	CSI (Each)

IN CASE OF PRIVATE CARS / TWO WHEELERS ONLY

Do you wish to opt for higher deductible over and above the compulsory deductible of Rs.500/Rs.1000/- for Private Cars and Rs.50 for Two Wheelers If "Yes", select the amount below ☐ Yes ☐ No

For Private Car ☐ Rs.2500 ☐ Rs.5000 ☐ Rs.7500 ☐ Rs.15000

For Two Wheeler ☐ Rs.500 ☐ Rs.750 ☐ Rs.1000 ☐ Rs.1500 ☐ Rs.3000

E. DISCOUNT DETAILS

Are you a member of Automobile Association of India? If yes, please state ☐ Yes ☐ No

A) Name of Association ______________________

B) Membership No ______________________

C) Date of Expiry __/__/____

Are you entitled to "No Claim Bonus" ? If "Yes", please submit proof there of (Renewal Notice / Copy of Expiring Policy) ☐ Yes ☐ No

F. DRIVER DETAILS

Owner Driver	Other Driver
Age of Owner Driver ______________________	Name of driver who usually drives the vehicle ______________________
Driving licence no. ______________________	Age of the other driver ______________________
Expiry date ______________________	
Does the driver suffer from defective vision or hearing or any physical infirmity? ☐ Yes ☐ No	Does the above named driver suffer from defective vision or hearing or any physical infirmity? ☐ Yes ☐ No

Has either of the drivers ever been involved / convicted for causing any accident or loss? If yes, specify details as under including the pending prosecution, if any? ☐ Yes ☐ No

Driver Name	Date of Accident	Circumstances of Accident	Loss / Costs Rs.

G. PREVIOUS HISTORY

Date of purchase of the vehicle by proposer __/__/____

Vehicle at the time of purchase ☐ New ☐ Second Hand

Name of the previous Insurer ______________________

Address Line 1 ______________________

Address Line 2 ______________________

City ______________________ Pin code ______________________

State ______________________ Phone No. ______________________

Previous Policy No. ______________________

Period of Insurance From __/__/____ To __/__/____

Type of Cover ☐ Liability Only ☐ Package Policy ☐ Others (Specify) ______________________

Claims lodged during the preceding 3 years

Claim Year	Claim Number	Insurer	Amount Rs.

Has any insurance company ever declined the proposal? ☐ Yes ☐ No
If "Yes", specify reason ______________________

Has any insurance company ever cancelled & refused to renew? ☐ Yes ☐ No
If "Yes", specify reason ______________________

Has any insurance company ever imposed special condition or excess? ☐ Yes ☐ No
If "Yes", specify reason ______________________

H. VEHICLE FINANCE DETAILS

Is the vehicle proposed for insurance Under Hire Purchase? If "Yes", specify name and address below. ☐ Yes ☐ No

____

Is the vehicle proposed for insurance Under Lease Agreement? If "Yes", specify name and address below. ☐ Yes ☐ No

____

Is the vehicle proposed for insurance under Hypothecation Agreement? If "Yes", specify name and address below ☐ Yes ☐ No

Name of Financier / Lessor / HPA ______________________________

Address Line 1 ______________________________

Address Line 2 ______________________________

City ______________ Pin code ______________

State ______________ Phone No. ______________

Account No. ______________________________

I. OTHER DETAILS

Is there any other relevant information? If "Yes", specify ☐ Yes ☐ No

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Note 1:

The Insured's Declared Value (IDV) of the vehicle will be deemed to be the 'SUM INSURED' for the purpose of the insurance 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 and model as the vehicle proposed for insurance at the commencement of insurance /renewal, and adjusted for depreciation (as per schedule specified below). The IDV of the side car(s) and / or accessories, if any, fitted to the vehicle but not included in the manufacturer's listed selling price of the vehicle is /are also likewise to be fixed.

The schedule of age-wise depreciation as shown below is applicable for the purpose of Total Loss/ Constructive Total Loss (TL/ CTL) claims only. A vehicle will be considered to be a CTL where the aggregate cost of retrieval and / or repair of the vehicle subject to terms and conditions of the policy exceed 75% of the IDV.

SCHEDULE OF DEPRECIATION FOR ARRIVING AT IDV

AGE OF THE VEHICLE	% OF DEPRECIATION FOR FIXING IDV
Not exceeding 6 months	5%
Exceeding 6 months but not exceeding 1 year	15%
Exceeding 1 year but not exceeding 2 years	20%
Exceeding 2 years but not exceeding 3 years	30%
Exceeding 3 years but not exceeding 4 years	40%
Exceeding 4 years but not exceeding 5 years	50%

IDV of obsolete models of vehicles (i.e. models which the manufacturers have discontinued to manufacture) and vehicles beyond 5 years of age will be determined on the basis of an understanding between the insurer and the insured.

Declaration by Insured

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

I/We also hereby 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.

Place

Date **Signature of Proposer**

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 or 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 prospectus or tables of the Insurer.

Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to five hundred rupees.

Insurance is a subject matter of solicitation