

Bajaj Allianz General Insurance Company Limited

Head Office & Regd. Office: GE Plaza, Airport Road, Yerawada, Pune 411 006

PROPOSAL FORM FOR COMMERCIAL VEHICLES PACKAGE POLICY AND LIABILITY ONLY POLICY**(other than Motor Trade Internal Risks Policy)***(The queries made/details stated below are the minimum requirements to be furnished by a proposer. The Insurer may seek any other information as desired for underwriting purpose.)*

Proposer's (Owner's) Full Name:

Address: Address where vehicle is normally kept and used:

Pin Code: Tel. No: Fax No: E-Mail Address: Occupation / Business: Type of Cover required : Liability Only Policy / Package Policy / Others (specify) Period of Insurance: From To 1. Registration No. and Date of Registration of the vehicle 2. Registering Authority & Location 3. Year of Manufacture 4. Engine No. 5. Chassis No. 6. Make of Vehicle 7. Type of (a) Body (b) Model 8. Gross Vehicle Weight(GVW)/Cubic Capacity(C.C.) 9. Max. licensed carrying capacity (No.of Passengers) in case of Passenger carrying vehicles? 10. Whether extension of geographical area to the following countries required? Yes /No

Bangladesh, Bhutan, Maldives, Nepal, Pakistan and Sri Lanka.

If 'Yes' state the name of the countries. 1) 2) 3) 11. Whether the vehicle is driven by non-conventional source of power? Yes /No

If yes, please give details.

12. Whether the vehicle is used for driving tuitions? Yes /No

13. Whether the use of the vehicle is limited to own premises? Yes /No
14. Whether the commercial vehicle is also used for Private purposes (excluding use for hire or reward)? Yes /No
15. Whether vehicle belongs to foreign embassy/ consulate? Yes /No
16. Whether vehicle is designed for use of Blind/ handicapped/mentally challenged persons and duly endorsed as such by RTA? Yes /No
17. Whether vehicle is fitted with fibre glass tank? Yes /No
18. Are you entitled to No Claim Bonus? If yes, please submit proof thereof. Yes /No
19. Is the vehicle fitted with the any Anti-theft Device approved by the AARI, Pune? Yes /No
If yes, attach Certificate of Installation in the vehicle issued by Automobile Association of India.

20. Liability to Third Parties
The policy provides Third Party Property Damage (TPPD) of Rs. 1 lakh (Two wheelers) and Rs.7.5 lakhs (other class of vehicles).
Do you wish to restrict the above limits to the statutory TPPD Liability limit of Rs.6000/- only? Yes /No

21. 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

22. 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 Rs. 1 Lakh in the case of Motorised two wheelers and Rs.2 lakhs for other classes of vehicles.

Name	CSI opted (Rs.)
1. _____	_____
2. _____	_____
3. _____	_____

23. Do you wish to include P.A. Cover for unnamed persons/hirer/pillion riders(two wheelers)? Yes /No

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

Number of persons	CSI opted (Rs.)
_____	_____

24. Insured's Declared Value

Insured's Declared Value of vehicle	Non - electrical accessories fitted to the vehicle	Electrical & 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.

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 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 exceeds 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%

Note. 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.

25. Previous History

a. Date of Purchase of the vehicle by the proposer _____

b. Whether the vehicle was New or Second Hand at the time of Purchase _____

c. Is the vehicle in good condition ? Yes /No

If "No" please give full details _____

d. Name and address of the previous insurer _____

e. Previous Policy Number _____

Period of Insurance from ____/____/____ to ____/____/____

f. Type of cover Liability Only Cover / Package Cover /Others(specify) _____

g. Claims lodged during the preceding 3 years	Year	Number	Amount (Rs.)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

h. Has any insurance company ever :

a) declined the proposal Yes /No

b) cancelled & refused to renew Yes /No

(if yes, reasons therefor) _____

c) imposed special condition or excess Yes /No

(if yes, reasons and details thereof) _____

26. Details of Hire Purchase / Hypothecation / Lease

a) Is the vehicle proposed for insurance :-

Under Hire Purchase

Yes / No

Under Lease Agreement

Yes / No

Under Hypothecation Agreement

Yes / No

b) If yes, give name and address of concerned parties _____

27. Details of Driver :

(a) Age _____ 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/convicted for causing any accident or loss? If yes, please give details as under including the pending prosecution, if any :-

Driver's Name	Date of Accident	Circumstances of Accident/ Claim	Loss/Cost Rs.
_____	_____	_____	_____

28. Any other relevant information :

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 " _____
_____ 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