

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 _____

Intermediary Details (To be filled in BLOCK CAPITALS)

Intermediary Name _____ Code _____

Branch Name _____ Code _____

Sales Manager Name _____ Code _____

1. Name of the proposer _____

2a. Address of the proposer

Flat Building _____ Road/Street/Sector _____

Area _____

Taluka/Village/District/City _____ Pin Code _____ State _____

Country _____ Tel No. (Off) _____

Fax No. _____ E-Mail Id _____

2b. Address where vehicle's Registered & Based

Flat Building _____ Road/Street/Sector _____

Area _____

Taluka/Village/District/City _____ Pin Code _____ State _____

Country _____ Tel No. (Resi.) _____

Mobile No. _____ E-Mail Id _____

3. Occupation / Business _____

4. Period of Insurance From _____ To _____

5. Details of the vehicle

Registration Number _____ Date of Registration _____

Registering Authority and Location _____ Year & Month of Manufacture _____

Engine No. _____ Chassis No. _____

Make Of Vehicle _____

6. Type Of a) Body: _____ b) Model: _____

7. Gross Vehicle Weight (GVW)/Cubic Capacity (C.C.) _____

8. Is the Vehicle made in India? Yes No

9. Max. Licensed carrying capacity (No. of Passengers) in case of Passenger carrying vehicles _____

10. Seating capacity (Including Driver) _____

11. Whether extension of geographical area to the following countries required? Yes No

Bangladesh Bhutan Maldives Nepal Pakistan Sri Lanka

12. Whether the vehicle is driven by non-conventional source of power Yes No

If yes, Please give detail? _____ Bi Fuel/LPG/CNG

13. Whether the vehicle is used for driving tuition? Yes No

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

21. Liability to Third Parties
The policy provide 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

22. 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

23. 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.

24. Personal Accident Cover for Owner Driver, please give the details of nomination? Yes No

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 Rs. 2,00,000/- for Commercial Vehicles

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

25. 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

26. Insured's Declared Value

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

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. The Insurance cover shall not start earlier than the time and date of acceptance of the Proposal by the Company and/or issue of a Cover Note.

Inspection Report of the vehicle

27. This vehicle has been physically inspected by _____
(Employee/Authorised Agency) at _____ on _____ at _____ am/pm.

Detailed report attached herewith. (Inspection Reference No. _____)

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

1. _____ 2. _____ 3. _____

29. 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:

New / Second hand

c. Will this vehicle be used exclusively for

i. Private, Social, Domestic, Pleasure & Professional Purpose? Yes No

ii. Carriage of goods other than samples or personal luggage? Yes No

d. Is the vehicle is in good condition ? Yes No

If No, please give details: _____

e. Name and Address of the previous insurance company: _____

f. Previous policy number: _____

Period of Insurance:

From _____ To _____

g. Claims lodged during the preceding 3 years:

Year	No of Claims	Claims Amount(Rs.)

h. Has any insurance company ever :

a) Declined the proposal Yes No

b) Cancelled and refused to renew Yes No

(if yes, reasons therefore) _____

c) Imposed special condition or excess Yes No (if yes, reasons and details thereof) _____

30. Details of : Hire purchase Lease Agreement Hypothecation Agreement

If, so, give name and address of concerned parties

Name _____

Address _____

Flat Building _____ Road/Street/Sector _____

Area _____

Taluka/Village/District/City _____ Pin Code _____ State _____

Country _____ Telephone. _____

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.

31. 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 for causing any accident or loss? Yes No

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

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

32. 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 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/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 or 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 for 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.

Place: _____ Date: _____ Signature of proposer _____

For use by the Agent

Name _____

Code _____ Cover Note no. _____

Time Of issue _____ Date of Issue _____

Date of Commt. _____ Date of Expiry _____

Premium Amount _____

Cash/Cheque No. _____ Date _____ Bank _____

Car Rated under Zone A Zone B

IMPORTANT NOTICE

- In the event of a claim, please immediately call our 24 hour call centre only. Improper intimation or delay in intimating claim to call centre can lead to delay in settlement/denial of claim.
- For preferred cashless garage list, please logon to our website or speak to customer care executive. RGICL cannot provide cashless claim settlement at garages other than those in our network list*.
- Please intimate us your mobile number and we shall keep you updated of the status of the claim by way of SMS periodically. You can download our claim form and claim procedure. Also view claim status on our website.

Insurance is the subject matter of solicitation.

* conditions apply.

Annexure-E

Undertaking – cum – Declaration Letter

Date:

To,
Reliance General Insurance Company Limited

Sub: Declaration of No Claim Bonus (NCB) Entitlement (Vehicle no _____)

We wish to renew our Motor Vehicle Insurance from Reliance General Insurance Company Limited (here in after referred as RGICL) and are unable to furnish a Renewal Notice from my existing insurer as proof of my NCB entitlement.

Under the circumstances, we are furnishing relevant information of our expiring insurance policy, which we certify to be correct:

A. Name of Registered Owner of vehicle:	_____
B. Expiring Policy No. / Cover Note No:	_____
C. Name & Address of Insurance Company:	_____
D. Type of cover: Package Policy / Liability Only / Other (to be described)	_____
E. Policy Period: From _____ To _____	
F. NCB % availed on the expiring policy, if any	_____

We declare that the rate of NCB stated by us (at item F above) is correct and that no claim has arisen in the expiring policy period (copy of the policy enclosed). We further undertake that if this declaration is found to be incorrect, all benefits under the policy will stand forfeited.

Further we understand and agree that RGICL will seek confirmation of above stated details from our previous insurers. We agree that pending receipt of necessary confirmation by RGICL coverage under the Policy will be available to us. However RGICL will be liable to release the payment towards any claims under the Policy only after a confirmation in this regard is received. In the event, this declaration is found to be incorrect, then all coverage available under Section 1 of the Policy from the date of commencement of the Policy shall stand automatically forfeited.

We also shall endeavor to procure the Renewal Notice and pass on the same to RGICL immediately upon the receipt of such Renewal Notice

(Signature of Registered Owner of vehicle proposed for Insurance)

Place: _____
Date: _____

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 & Signature of the IRDA Agent/Broker

Place: _____

Date: _____

(In case of Direct Business, Name & signature of CSO/SM to be taken)