

**STANDARD PROPOSAL FORM FOR "LIABILITY ONLY" POLICY**

(For Commercial Vehicles other than Motor Trade Internal Risks Policies)

**A. Questions that are necessarily to be listed for granting the cover as per the Motor Vehicles Act – 1988.**
**A (I) Personal Details of Proposer / Owner:**

<b>Personal Details</b>	1	Proposer's (Owner's) Full Name (In capital letters)	
	2	Address (where the vehicle is normally kept) (In capital letters, with pin code)	Telephone: _____ Pin: _____ Mobile No.: _____ Fax: _____ Mail Id: _____
	3	Occupation / Business	
	4	Type of Cover	Liability Only Policy
	5	Period of Insurance	From: _____ Hrs on __/__/____ To: _____ Hrs on __/__/____

**A (II) Vehicle Details**

<b>Vehicle Specifications</b>	6	Registration Number of the Vehicle		
	7	Date of Registration of the Vehicle		
	8	Registration Authority & Location		
	9	Year of Manufacture		
	10	Engine Number		
	11	Chassis Number		
	12	Make of the Vehicle		
	13	Model		
	14	Type of Body		
	15	Gross Vehicle Weight (GVW) & Cubic Capacity (CC)		
	16	Maximum licensed carrying capacity (No. of Passengers) in case of passenger carrying vehicles?		
	17	Whether the vehicle is driven by non-conventional source of power CNG/LPG/BI-Fuel If "YES", Please give details		
	18	Whether the use of vehicle is limited to own premises?	YES	NO
	19	Whether the commercial vehicle is also used for private purposes (excluding use for hire or reward)?	YES	NO
	20	Whether the vehicle is used for driving tuitions?	YES	NO
	21	Details of Hire Purchase / Hypothecation / Lease		
		a) Is the vehicle proposed for insurance is:		
		(i) Under Hire Purchase?		YES / NO
		(ii) Under Lease Agreement?		YES / NO
		(iii) Under Hypothecation?		YES / NO

		b) If "YES", give name and address of concerned party / parties:
		(Note: Copies of R.C. Book, Permit & Fitness Certificate should be submitted along with the proposal form)

### A (III) LIABILITY SECTION: COVERAGE

Third Party Risks: Death / Bodily Injury	22	<p>Coverage for liability against Third Party Risks (Death or Bodily Injury) required in respect of:</p> <p>(i) Owner Driver only YES / NO</p> <p>(ii) Any person other than Paid Driver YES / NO</p> <p>If, "YES", give details of such other persons:</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>(Note:</p> <p>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.</p> <p>2. As per Section 147 (2) (a) The liability is "as incurred" in the case of death / bodily injury of a third party)</p>
Third Party Risks: TPPD	23	<p>Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6,000/- only?</p> <p style="text-align: right;">YES / NO</p> <p>[For additional TPPD limits, please see Q. No. 25]</p>
Third Party Risks: Liability to 'Workmen' under W.C. Act-1923 (Compulsorily to be covered by M.V. Act-1988)	24	<p>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].</p> <p>1) Drivers (No. of persons: _____)</p> <p>2) Employees (Workmen) (No. of persons: _____)</p> <p>(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.)</p> <p>[For additional coverage, please refer to Q. No. 26]</p>

### B. Questions that provide additional covers as per IMT Endorsements

Additional TPPD	25	<p>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.</p> <p>Do you wish to cover the additional limit? YES / NO</p> <p>[Refer to Q. No. 23]</p>
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<b>Additional Liability to Workmen</b>	26	<p>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, also liability under the Fatal Accidents Act-1855 and the Common Law]</p> <p style="text-align: right;">YES / NO</p> <p>(Note: The additional liability under Common Law and Fatal Accidents Act in respect of employees <b>who are workmen</b> is covered under this endorsement)</p> <p>[Refer to Q. No. 24]</p>
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<b>Liability to Employees who are not Workmen</b>	27	<p>Do you wish to cover wider legal liability to employees who are NOT 'workmen'?</p> <p style="text-align: right;">YES / NO</p> <p>(Note: The liability under Common Law and Fatal Accidents Act-1855 in respect of employees <b>who are not workmen</b> can be covered under this endorsement).</p>												
<b>Personal Accident Cover For Owner Driver</b>	28	<p>Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination:</p> <p>(a) Name of the Nominee &amp; Date of Birth :  (b) Relationship :  (c) Name of the Appointee :  (If Nominee is a Minor)  (d) Relationship to the Nominee :</p> <p>(Note: 1. Personal Accident cover for Owner Driver is compulsory for Sum Insured of Rs. 1, 00, 000/- for Two Wheelers and Rs. 2, 00, 000/- for Private Cars.  2. Compulsory PA cover to 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.)</p>												
<b>NFPP</b>	29	<p>Do you wish to include Legal liability to Non fare paying Passengers? YES / NO</p> <p>If YES, give number of persons:</p>												
<b>PA Cover for Un-Named Occupants</b>	30	<p>Do you wish to include Personal Accident cover for Un-named Passengers/hirer/pillion passengers (Two Wheelers)?</p> <p style="text-align: right;">YES / NO</p> <p>If YES, give number of persons and Capital Sum Insured (CSI) Opted:</p> <p>No. of Persons: _____ C.S.I (Per Person): _____</p> <p>(Note: The maximum CSI available per person is Rs. 2 Lakhs in case of Private Cars and Rs. 1 Lakh in the case of Motorized Wheelers)</p>												
<b>Geographical extension</b>	31	<p>Whether extension of geographical area to the following countries required?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">(1) Bangladesh</td> <td style="width: 33%;">YES / NO</td> <td style="width: 33%;">(2) Bhutan</td> <td style="width: 33%;">YES / NO</td> </tr> <tr> <td>(3) Maldives</td> <td>YES / NO</td> <td>(4) Nepal</td> <td>YES / NO</td> </tr> <tr> <td>(5) Pakistan</td> <td>YES / NO</td> <td>(6) Sri Lanka</td> <td>YES / NO</td> </tr> </table> <p>(Note: Presently the territory covered is geographical area of India. Extension of geographical area cover can be availed by use of this endorsement)</p>	(1) Bangladesh	YES / NO	(2) Bhutan	YES / NO	(3) Maldives	YES / NO	(4) Nepal	YES / NO	(5) Pakistan	YES / NO	(6) Sri Lanka	YES / NO
(1) Bangladesh	YES / NO	(2) Bhutan	YES / NO											
(3) Maldives	YES / NO	(4) Nepal	YES / NO											
(5) Pakistan	YES / NO	(6) Sri Lanka	YES / NO											



**PROHIBITION OF REBATES (Insurance Act – 1938, Section 41)**

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 in the policy, nor shall any person taking out of renewing or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the prospects or tables of the Insurer.

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

**ADDITIONAL INFORMATION (OFFICE USE ONLY)**

<b>Proposal Type</b>	1	NEW POLICY ROLL-OVER RENEWAL ENDORSEMENTS	
	<b>Personal Details</b>	2	Mother's maiden name Marital Status: Sex: PAN No: Educational Qualification:
3		Communication Address (In capital letters, with pin code)	Telephone: Pin: Mobile No.: Fax: Mail Id:
4		Preferred Mode of Contact:	
<b>Vehicle Specifications &amp; usage</b>		5	Vehicle Type
	6	Vehicle Colour	
	7	City where the vehicle will primarily be used:	
	8	Fuel Type:	Petrol / Diesel / CNG / LPG / Electric / Hybrid / Other
	9	Vehicle category & Use	Imported vehicle Conveyance of passenger for Hire/reward Courier & express delivery Camper van/Motor homes Racing, Rallies, Speed Trials Amusement centre Tourist or charter operator Fast food/ Restaurant – Delivery service Special Purpose vehicle Airfield/Airside operation Vehicle specifically designed or adapted for military and law enforcement use Collection / Disposal/ Discharge Industrial Trade waste Logging or Timber Haulage Carriage of Live Stock Underground Mining Transporting refrigerated stocks Route or line bus As a road-train, b-double or b-triple operations Bus used/leased to Municipal or State Govt authority Others
	10	Whether any modification or conversion has been done in the vehicle from the maker's standard specification?  If YES, please give details of such modifications/conversions _____	YES / NO
	11	Whether any Trailer attached? If YES, please give following details	YES / NO

	No. of Trailers Trailer Serial/Chassis No. Trailer Registration No.	
12	Is the vehicle in good state of repair? If NO, please furnish details	YES / NO
13	What will be the Average Daily use of the vehicle?  Less than 500 Kms / Between 501 & 2500 Kms / Between 2501 to 5000 Kms / Above 5000 Kms	
14	Where will the vehicle be generally driven on?  Express way / National Highway / State Highway / City Roads / Town/Village Roads / Private Road	
15	Do you want to cover legal liability to passengers? (Applicable to ambulance/hearses only)  If YES, give number of passengers _____	YES / NO
16	What is the vehicle Permit type?  Contract carriage Stage carriage Local State Zonal National Hilly Areas	
17	Whether the use of the vehicle will be restricted to own premises?	YES / NO
18	What will be the vehicle used for?  Goods Carrying (Public Carrier) Goods Carrying (Private Carrier) Passenger Carrying (Capacity equal to or less than 9) Passenger Carrying (Capacity exceeding 9) Misc & special vehicle Others (Please specify)	
19	What types of Goods will the vehicle carry?  Hazardous Goods  Non-Hazardous Goods	
20	Proposed usage of vehicle? (Applicable only to passenger carrying vehicles carrying capacity not exceeding 9)  Driven by the owners only Driven by the owners only along with drivers Driven by other drivers For rent to tourists For rent to individuals for personal use Radio Taxi's Business purpose by hotels Business purpose by Corporate Official purpose by foreign embassy / consulate	
21	Will the vehicle be used for driving tuitions?	YES / NO
22	Where the vehicle be generally parked  During the Day –  Roadside Public parking Roadside Outside Parking Open parking lot Covered parking lot Locked covered garage	

		Within enclosed compound of residence/office/factory During the Night - Roadside Public parking Roadside Outside Parking Open parking lot Covered parking lot Locked covered garage Within enclosed compound of residence/office/factory									
<b>Driver Details</b>	23	The vehicle will be driven by									
		Sr. No	Name	Relationship with Proposer	Date of Birth / Age	Driving Experience	License No.	Gender	Claim Year	Amt	Claim Type
		1									
		2									
		3									
		4									
		5									

Place:

Date:

\_\_\_\_\_  
Signature of the Proposer/s