

AutoSecure

Private Car / Two Wheeler Package Policy

Proposal Form



WITH YOU ALWAYS

Application No.: _____

Note:

(1) Policy wordings are available on request. (2) Please complete all sections in capitals and tick the boxes wherever applicable. (3) Failure to disclose facts material to the assessment of the risk or providing misleading Information may render the contract void. (4) Geographical area of operation : INDIA.

For Vehicle used for Social, Domestic, Pleasure and Professional Purpose only (**Not for Hire or Reward**)

Cover Desired: Package Package (Fire & Theft) Package (Fire only) Package (Theft Only)

Proposal for: New Policy Endorsement

Information for fields marked in bold on grey background with asterisk is mandatory

Proposer's Details: (Please leave space between the name)

1. Name (Registered Owner of the Motor Vehicle)*

Mr. / Mrs. / Ms. / M/s. / Dr.

2. Date of Birth*:

Marital Status: Married Single Sex: M F

3. Educational Qualification:

4. Occupation :

Business Service Professional Others: (Please Specify)

5. Address (for Communication)*:

City
 State Pin Code
 Tel.: (O) (R)
 Mobile: E-mail

6. Registration Address*:

City
 State Pin Code
 City where vehicle will be primarily used:

Vehicle Details : (Including Trailer, if any, as per the Registration Certificate)

Make*	Model*	Date of Registration*	Year of Manufacture*	RTO where vehicle is/will be Registered*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Registration No. *	Engine No. *	Chassis No. *	Cubic Capacity*	Seating Capacity* (incl. Driver)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Last 12 Characters only

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7. Vehicle Purchased is :

Brand New Used

8. Vehicle Type :

Indigenous Imported

9. Fuel Type :

Petrol Diesel CNG/LPG Others

10. Type of Road where vehicle would normally ply :

Hilly National / State highways City / Town Roads District Road Others

IMPORTANT NOTE: Insured's Declared Value (IDV) and Schedule of Depreciation for Arriving at IDV	Age of the Vehicle	% of Depreciation
The Insured's Declared Value (IDV) of the vehicle will be deemed to be the Sum insured for the purpose of the policy 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 time of commencement of insurance / renewal and adjusted for depreciation (as per the schedule specified). The IDV of the said 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 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. IDV of vehicle beyond 5 years of age and of obsolete models of the vehicles (i.e. models which the manufacturers have discontinued to manufacture) is to be determined on the basis of an understanding between the Insurer and Insured.	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%

11. Insured's Declared Value (IDV)*:	Amount (Rs.)																				
Vehicle Value	<input type="text"/>																				
Side Car Value (applicable for Two Wheelers only)	<input type="text"/>																				
Non-Electrical Accessories (Other than factory fitted)	<input type="text"/>																				
Details:																					
Electrical Accessories (Other than factory fitted)																					
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Year	<input type="text"/>	<input type="text"/>	<input type="text"/>																		
IDV (Rs.)	<input type="text"/>	<input type="text"/>	<input type="text"/>																		
CNG/LPG kit (Not provided by manufacturers)	<input type="text"/>																				
Total IDV.	<input type="text"/>																				

12. Previous Insurance Particulars* (Attach Expiring Policy Copy with Schedule or Cover note as Proof of Insurance)																			
Is the previous insurance in your name?	Yes <input type="checkbox"/> No <input type="checkbox"/>																		
Type of Cover:	Act Policy <input type="checkbox"/> Package <input type="checkbox"/>																		
Expiring Policy / Cover Note No.:	Expiry Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																		
NCB in your expiring policy	<input type="text"/> <input type="text"/> %																		
Previous Insurer:	Branch: <input type="text"/>																		
Address	<input type="text"/>																		
	<input type="text"/>																		
Was any claim reported during the expiring policy period?	Yes <input type="checkbox"/> No <input type="checkbox"/>																		
Claim reported in Last 5 Years:																			
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Amount	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>														
Are you entitled for NCB on renewal? (Refer NCB Declaration)	Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="text"/> <input type="text"/> %																		

13. Has any Insurance Company ever*:	
Declined your Proposal	<input type="checkbox"/> Required an increase in Premium / loading % <input type="checkbox"/>
Cancelled or Refused Renewal	<input type="checkbox"/> Imposed Special Conditions or Excess <input type="checkbox"/>

14. Period of Insurance:	
Desired from*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
To midnight of*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Note: Cover will commence not earlier than the Date & Time of Acceptance of Risk and / or issuance of Cover Note subsequent to payment of premium

15. Main Driver Details:	
Self <input type="checkbox"/>	Driving Experience* Years <input type="text"/>
Paid Driver <input type="checkbox"/>	Name <input type="text"/>
Any Other <input type="checkbox"/>	Age: Years <input type="text"/> <input type="text"/> Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
	Educational Qualification <input type="text"/>
	Marital Status: Married <input type="checkbox"/> Single <input type="checkbox"/> Driver Experience*: Years <input type="text"/>

16. Financier's Details:	
Name	<input type="text"/>
Hypothecation <input type="checkbox"/>	Hire Purchase <input type="checkbox"/> Lease <input type="checkbox"/>
Contract/Loan Application No.	<input type="text"/>

17. Extra Benefits for an additional premium (Please tick ✓)																	
<input type="checkbox"/>	Un-Named Persons Personal Accident Cover for seating capacity, including driver (Max, Rs. 200, 000/- each in Multiples of Rs. 10,000/-) CSI Rs. <input type="text"/>																
<input type="checkbox"/>	Wider Legal Liability to Paid Driver																
<input type="checkbox"/>	Personal Accident Cover for Owner Driver is compulsory*. Please give details of nomination:																
a.	Name of the Nominee & Age : <input type="text"/>																
b.	Relationship : <input type="text"/>																
c.	Name of the Appointee (if Nominee is a Minor) : <input type="text"/>																
d.	Relationship to the Nominee : <input type="text"/>																
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 driver's licence.																
<input type="checkbox"/>	Do you wish to include Personal Accident cover for named persons? if YES, give name and Capital Sum Insured (CSI) opted for :																
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3)	<input type="text"/>	<input type="text"/>	<input type="text"/>														

(Note: The maximum CSI available per person is Rs.2 Lacs in case of Private Car and Rs. 1 Lac in the case of Motorized Two Wheelers)

- Liability to Employees travelling/driving the vehicle (other than paid driver) Nos.
- Liability to Soldier/Sailor/Airman employed as driver in private capacity. (Applicable for Private Car only)
- Loss of accessories by Burglary, House breaking and Theft. (Applicable for Two Wheelers only)

18. Restriction of Cover/Discounts/Concessions (Please tick ✓)

Name of Automobile Association: _____

Membership No.:

Expiry Date:

- Third Party Property Damage Cover restricted to Rs. 6,000/- only
- Voluntary Deductible chosen over and above Compulsory deductible
- In case of Private Car, Options available are (In multiple of Rs 500):
 - Rs. 1000/- to Rs 2000/- Rs 2500/- to Rs 5000/- Rs 5000/- to Rs 7000/- Rs 7500/- to Rs 9500/-
 - Rs 10000/- to Rs 12000/- Rs 12500/- to Rs 20000/-
- In case of Two Wheelers, Options available are:
 - Rs 500/- to Rs 999/- Rs 1000/- to Rs 1499/- Rs 1500/- to Rs 1999/- Rs 2000/- to Rs 2499/- Rs 2500/- to Rs 2999/-
 - Rs 3000/- to 3499/- Rs 3500/- to Rs 3999/- Rs 4000/- to Rs 4499/- Rs 4500/- to Rs 5000/-
- Vehicle is Specially designed for use of Blind/Handicapped/Mentally Challenged Person and endorsed in Registration Certificate. (Attach RC copy)
- Vehicle will be used within own premises (Only if not licensed for general road use by RTO)
- Vehicle is fitted with Anti Theft device approved by ARAI (Attach installation certificate issued by any Automobile Association)
- Vehicle is fitted with a Fibre Glass Fuel Tank.
- Vehicle will be used for Driving Tuitions.
- Vintage Car certified by Vintage and Classic Car Club of India.

19. Extended Covers:

- Imported vehicle without payment of customs duty
- Extension to Countries (Bangladesh/Nepal/Bhutan/Pakistan/Maldives/Sri Lanka)
- Vehicle driven by non-conventional source of power. Details. _____

20. Add on Covers - Private Car (You may opt for these covers either from bundled options or individual covers)

<input type="checkbox"/> Gold:	<input type="checkbox"/> Pearl:	<input type="checkbox"/> Pearl Plus:	<input type="checkbox"/> Titanium:	<input type="checkbox"/> Platinum:
<ul style="list-style-type: none"> • Repair of Glass, Fibre, Plastic & Rubber Parts • Loss of Personal Belongings • Emergency Transport & Hotel Expenses • Key Replacement 	<ul style="list-style-type: none"> • Repair of Glass, Fibre, Plastic & Rubber Parts • Loss of Personal Belongings • Emergency Transport & Hotel Expenses • Key Replacement • Depreciation Reimbursement 	<ul style="list-style-type: none"> • Repair of Glass, Fibre, Plastic & Rubber Parts • Loss of Personal Belongings • Emergency Transport & Hotel Expenses • Key Replacement • Depreciation Reimbursement • Engine Secure <ul style="list-style-type: none"> - With deductible <input type="checkbox"/> - Without deductible <input type="checkbox"/> • Consumable Expenses 	<ul style="list-style-type: none"> • Repair of Glass, Fibre, Plastic & Rubber Parts • Loss of Personal Belongings • Emergency Transport & Hotel Expenses • Key Replacement • Depreciation Reimbursement • Daily Allowance 	<ul style="list-style-type: none"> • Repair of Glass, Fibre, Plastic & Rubber Parts • Loss of Personal Belongings • Emergency Transport & Hotel Expenses • Key Replacement • Depreciation Reimbursement • Daily Allowance • Return to Invoice (Not applicable for used cars)

Individual Covers

- No Claim Bonus Protection (Eligibility: Minimum 25% Bonus and no claim in previous 2 years)
- Repair of Glass, Fibre, Plastic & Rubber Parts
- Loss of Personal Belongings Rs. 10,000 Rs. 50,000 Any other _____
- Emergency Transport & Hotel Expenses Rs. 10,000 Rs. 50,000 Any other _____
- Key Replacement Rs. 25,000 Rs. 65,000
- Depreciation Reimbursement
- Daily Allowance
- Return to Invoice (Not applicable for used cars)
- Consumable Expenses
- Engine Secure
 - With deductible
 - Without deductible
- Tyre Secure
- Depreciation Basis
- Full Replacement Basis

21. Add on covers (Two wheeler)

- Depreciation Allowance
- Return to Invoice

22. Any other Material Facts relevant for this Insurance

Sources of funds (please ✓ where applicable) : Salary Business Other (Please Specify) _____

Premium paid by Cash / Cheque No. _____ Amount (Rs.) _____

Bank Name _____ Branch _____

Insured's PAN card Number : in the absence of PAN Card, please give details of any other authorized photo identification card.

Card Type _____ Number :

AML Guidelines

I/we hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002. I understand that the Company has the right to call for documents to establish sources of funds. The insurance company has right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

• Nationality : Indian Non-Indian If Non-Indian, please specify the Country : _____

• Type of Organization

Corporations Governments Non Governmental Organizations Society
 Trust Partnership International Organization Cooperatives Section 25 Company

Declarations

"I/We desire to insure with Tata AIG General Insurance Company Limited in respect of the vehicle described in this proposal form and confirm that the statements contained in this application are my/our true and accurate representations. I/We undertake that if any of the statements are found to be false or incorrect, the benefits under this policy would stand forfeited. I/We agree that this application and declaration shall be promissory and shall be the basis of the contract between me/us and Tata AIG General Insurance Company Limited. I/We confirm that I/We have read and understood the coverages, the terms and conditions and agree to accept the company's policy of insurance along with the said conditions prescribed by the Company. I/We also declare and undertake that if any additions or alterations are carried out by me/us in this proposal form or if there is any change in the information as submitted by me/us after the submission of this proposal form then the same would be conveyed to Tata AIG General Insurance Company Limited immediately failing which it is agreed and understood by me/us that the benefits under the policy would stand forfeited. I/We agree to the Company taking appropriate measures to capture the voice log for all such telephonic transactions carried out by me/us as required by the procedures/regulations internal or external to the Company and shall not hold the Company responsible or liable for relying/using such recorded telephonic conversation. I/We agree that the insurance would be effective only on acceptance of this application by the Company and the payment of the requisite premium by me/us in advance. In the event of non-realization of the cheque or non-receipt of the amount of premium by the Company the policy shall be deemed cancelled 'ab-initio' and the Company shall not be responsible for any liabilities of whatsoever nature under this Policy".

No Claim Bonus* (if NCB confirmation is not submitted but NCB claimed.) (Strike off what ever is not applicable)

I/We declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring Policy Period (Copy of Policy enclosed). I/We further undertake that if this declaration is found incorrect all benefits under the Policy in respect of Section I of the Policy will stand forfeited.

Place: _____

Date

D	D	M	M	Y	Y	Y	Y
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Signature of the Registered owner of the Vehicle*

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 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 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.

FOR OFFICE / PRODUCER'S USE ONLY: Vehicle Inspection No.: _____ Date: _____ Time: _____ Name of Inspecting Agency: _____ _____ Signature & Stamp of Inspection Agency	Fleet/Corporate/Branch Approval No.: _____ Recommendation Approval : _____ Approving Authority Name, Signature & Date : _____ _____
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<p style="text-align: center;">For PRODUCER'S USE ONLY</p> Producer Code <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; 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Producer's Sign* _____	Operation Executive Sign & Date _____																																																																																																																								

RATING CHART*	PRIVATE CAR
On Vehicle IDV CNG/LPG Kit IDV @ 4% (If Externally Fitted) Electrical Accessory @ 4% Loading/Discounts if any (-) Voluntary Ex. (-) Anti Theft Device @ 2.5% Max 500/- (-) AAI Discount @ 5% Max 200/- (-) NCB@ %	TP Premium (As applicable) CNG/LPG (Rs. 60/-) Owner Driver PA (Rs. 100/-) Paid Driver (Rs. 50/-) PA to Passengers (Rs.5/- per10,000) Total Liability Premium (B) Total Premium (A+B) Service Tax (As applicable) (C)
Total OD Premium (A)	Total Amount (A to C)

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