

## Private Car / Two Wheeler Package Policy

## Proposal Form



Note: (1) Policy wordings are ava the assessment of the risk																										o di	sclo	se f	acts	ma	teria	l to
	For Ve	hicle u	used f	or S	ocial,	, Don	nesti	c, P	leası	ıre a	and F	Profe	ssio	nal Pı	urp	ose (	only	(No	t fo	r Hi	re d	or R	ewa	rd)								
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Proposal for: New P	olicy E	Endors	semer	nt																												
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Proposer's Details: (Plea	se leave sp	ace be	etwee	n the	e nan	ne)																										
1. Name (Registered Owne	of the Mo	tor Ve	hicle)	*																												
Mr. / Mrs. / Ms. / M/s. / [	r.																															
2. Date of Birth*:	D	D N	/I M	Υ	Υ	Υ	Υ							Mar	ital	Stat	us:	N	larri	ed			Sing	gle [			Se	ex:	М		F	=
3. Educational Qualification	:												-																			
4. Occupation :	Busin	ess			Sei	rvice			Р	rofe	essio	nal				Othe	ers:												(Ple	ease	Spe	cify)
5. Address (for Communication)*:																																
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11.	Insured's Dec	Sidica value (IDV) .																		ount	(113.	′		
	Vehicle Value	e																						
	Side Car Valu	ue (applicable for Two Wheelers	s only)																					
	Non-Electrica	al Accessories (Other than facto	ory fitted)																					
	Details:																							
	Electrical Acc	cessories (Other than factory fitt	tted)																					
		Stereo		AC				0	thers															
	Make	lake																						
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	Year																							
	IDV (Rs.)																							
	CNG/LPG kit	(Not provided by manufacturers	rs)																					
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	Total IDV.																							
12.	Previous Ins	urance Particulars*: (Attach Exp	oiring Policy C	Copy wit	n Sche	edule	or Co	ver not	e as Pr	oof of	Insur	rance	e)											
	le the provie	ous insurance in your name?		Yes			No																	
	Type of Cov			Act Poli	СУ		Pac	kage					_			Г	D	D	M	M	V	V	V	V
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13.	Has any Insu	urance Company ever*:																						
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15.	Note: Cover  Main Driver  Paid Driver  Any Other  Financier's E  Name  Extra Benefi  Un-Na  CSI Re  Wider  Person	Details:  Details:  Details:  Details:  Details:  Legal Liability to Paid Driver and Accident Cover for Owner Details are also as a second content of the co	elease tick ✓) nt Cover for s	Name Age: Education Marital :	Years Years Onal O	ss Qualifiting Management of Appping A	e of Ris Driving	M N No.	or issuence*  ender:  Hire F	Mal	ee ee	Driv	Fema	sub:	ence	**: Y	ear	paym	nent	of pr	Y	Y	Y	Y
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18.	Restriction of Cover/Discou	nts/Concessions (Ple	ase tick 🗸)				
	Name of Automobile Asso	ciation:					
	Membership No.:				E	Expiry Date:	D D M M Y Y Y
19. E	Third Party Property I Voluntary Deductible In case of Private Car Rs. 1000/- to Rs 2000/ Rs 10000/- to Rs 12000 In case of Two Wheel Rs 500/- to Rs 999/- Rs 3000/- to 3499/- Vehicle is Specially d Vehicle will be used v Vehicle is fitted with a Vehicle will be used f Vintage Car certified I	Rs 12500/- to Rs lers, Options available a Rs 1000/- to Rs 1 Rs 3500/- to Rs 3 esigned for use of Blind within own premises (O Anti Theft device appro a Fibre Glass Fuel Tank. for Driving Tuitions. by Vintage and Classic	e Compulsory de (In multiple of Rs 5000/- Rs 5 20000/- are: 499/- Rs 150 999/- Rs 400 d/Handicapped/M nly if not licensed ved by ARAI (Att  Car Club of India	eductible 500): 5000/- to Rs 7000/- Rs 500/- to Rs 1999/- Rs 20 500/- to Rs 4499/- Rs 45 51entally Challenged Person 6 for general road use by R 6 ach installation certificate is	7500/- to Rs 9500/- 100/- to Rs 2499/- 100/- to Rs 5000/- and endorsed in Re TO)	Rs 2500/- to	Rs 2999/- icate. (Attach RC copy)
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Ξ	Repair of Glass, Fibre, Loss of Personal Belon Emergency Transport & Key Replacement Depreciation Reimburs Daily Allowance	Plastic & Rubber Parts gings Rs. & Hotel Expenses Rs. Rs. 2 sement applicable for used cars	10,000 Rs. 10,000 Rs. 25,000 Rs.	d no claim in previous 2 yes 50,000 Any other 50,000 Any other 65,000 Return to Invoice	ears)	Engine Witl Witl Tyre Se	h deductible hout deductible
Prem Bank Insure	es of funds (please ✓ wher ium paid by Cash / Cheque Name ed's PAN card Number :	9 No.		A	mount (Rs.)		er authorized photo identification card.
AMI	Guidelines						
I/we of the insur	hereby confirm that all prese offence listed in Prevention	on of Money Laundering cancel the insurance co	Act, 2002. I unde ontract in case I a	erstand that the Company h	nas the right to call fo	or documents to	proceeds of crime related to any o establish sources of funds. The er any of the statutes, directly or
	tionality:	Indian	Non-Ind	ian If Non-India	an, please specify the	e Country:	
		ernments ership		mental Organizations Organization	Society Coopera	ntives	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:	Signature of the Registered owner of the Vehicle*
INSURANCE ACT 1 No person shall allow or offer to allow, either directly or indirectly, as an of risk relating to lives or property in India, any rebate of the whole or pa any person taking out or renewing or continuing an policy accept any	1938 Section 41 Prohibition of Rebates inducement to any person to take out renew or continue an insurance in respect of any kind part of the commission payable or any rebate of the premium shown on the policy, nor shall any rebate, except such rebate as may be allowed in accordance with the published I IN COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH
	Fleet/Corporate/Branch Approval No.:  Recommendation Approval :  Approving Authority Name, Signature & Date :  e & Stamp of ion Agency
For PRODUCER'S USE ONLY Producer Code Producer Name Covernote No.  Cancelled Covernote if any Cash/Cheque No. Cheque Date Fleet/Corporate/ Branch Approval No. PREMIUM (Rs.) Business of: Rural Social Others  Producer's Sign*	DOCUMENTS ATTACHED*  Covernote Copy  Receipt Copy  Expiring Policy with Schedule/Covernote  Renewal Notice  Sale proof (RC Copy/Form - 29 & 30)  NCB Reserving (Original)  Payment instrument  Inspection Report  Anti theft device AAI Certificate  Cancelled Covernote if any  Others  Branch:  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)

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully, before concluding a sale.