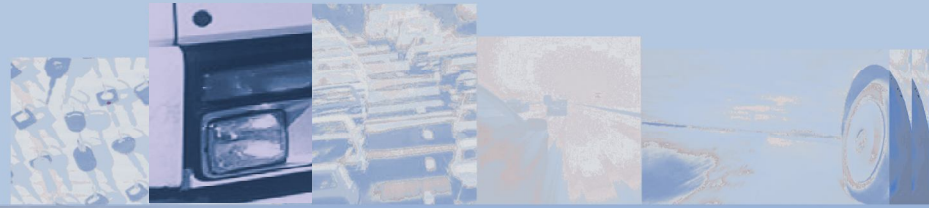




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AutoSecure
INSURANCE PLAN

PROPOSAL FORM FOR COMMERCIAL VEHICLE INSURANCE

Note (1) Please complete all sections in capitals and tick boxes wherever applicable. Incomplete applications will not be entertained. (2) Failure to disclose facts material to the assessment of the risk or providing misleading information may render the contract void. (3) Please attach separate sheet if space is insufficient. (4) Geographical area of operation: India. (5) Proposed vehicle will have to be produced for inspection by our representative and all vehicle documents will have to be produced in original for our verification prior to granting of insurance cover.

Cover Desired:	<input type="checkbox"/> Package	<input type="checkbox"/> Package (Fire & Theft)	<input type="checkbox"/> Package (Fire Only)	<input type="checkbox"/> Package (Theft Only)	<input type="checkbox"/> Liability	Proposal for:	<input type="checkbox"/> New Policy	<input type="checkbox"/> Endorsement
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Information for fields marked in boldon grey background with asterisk is mandatory

Proposer's Details :

(Please leave space between the names)

1. Name (Registered Owner of the Motor Vehicle)*: Mr. Mrs. Ms. M/s. Dr.

2. Date of Birth*: Sex: M F

Marital Status: Married Single 3. Occupation Business Service Professional Others : _____
(please specify)

4. Address (for Communication)*:

City: State: Pin Code:

Tel : (O) (R) M E-mail:

5. Registration Address*:

City: State: Pin Code:

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

Registration Mark & No.*	Engine No.*	Chassis No.	Make	Model	Cubic Capacity
Gross Vehicle Weight (GVW)	Licensed Carrying Capacity (Including Driver)	Type of body	Date of Registration	Year of Mfg.	RTO where vehicle is registered

Luggage / Caravan Trailer Registration No. :

A. Vehicle purchased : Brand New Used **B. * Date of purchase :** **C. Vehicle Type :** Indigenous Imported

D. Purpose for which vehicle will be used : Goods carrying (Private Carrier) Goods carrying (Public Carrier) Within own Premises
 Private & Commercial purposes (not for hire) Passenger Carrying

E. Type of road where vehicle would normally ply : Hilly Roads National State Highways City - Town Road District Road Other

F. Nature of goods normally carried : Hazardous Non-Hazardous

G. If hazardous, give details of hazardous substance :

H. Anti-theft device in vehicle : Electrical Manual Electrical & Manual None

I. Is the vehicle fitted with Anti-theft Device approved by the ARAI, Pune? Yes No
If yes, attach Certificate of installation in the vehicle issued by Automobile Association of India.

J. Fuel Type : Diesel CNG / LPG Petrol

K. Whether vehicle is fitted with fibre glass tank ? Yes No

L. Type of Permit : National State Local Zonal Hilly Areas

M. If National permit, specify States where vehicle would be plying

N. Permit number Valid up to Has the permit lapsed in the past. If yes, how many times

O. Fitness Certificate number Valid up to Has the Fitness lapsed in the past, If yes, how many times

P. Vehicle will be used within own premises (Only if not licensed for general road use by RTO)

7. Previous insurance particulars* :

A. Name & Address of the Policy Issuing Office	Policy Number	Date of Expiry	Type of Cover	Claims lodged during the preceding 5 years		
				Year	No.	Amount

B. Are you entitled to a NO CLAIM BONUS from your previous insurer - YES / NO if YES ____ % please attach renewal notice from previous Insurer.

8. Is the vehicle specially designed for the use by a handicapped person and / or owned by an institution exclusively engaged in service of the blind, handicapped and mentally retarded children or adults? Yes No

Application No :

9. 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 (Other)	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.

Risk Exclusion / Inclusion

10. Indicate the relevant additional risks you wish to cover :

Extension of cover to Nepal / Bhutan / Lahore / Bangladesh / Sri Lanka / Maldives

(Specify) _____

Loss of accessories by Burglary, Housebreaking & Theft (Scooter only)

11. Indicate your preference for additional legal liabilities you wish to cover / restrict :

Limit Third Party Property Damage to Rs. 6000/-

Paid Driver / Conductor / Cleaner employed in operation of vehicle. No. Of persons

Employees travelling in / driving the vehicle other than paid driver. No. Of persons

Non-fare paying passenger No. Of persons

12. Indicate your preference for Personal Accident Benefit (Max. Capital Sum Insured (CSI) per person Rs. 2,00,000/- only, in multiple of Rs. 10,000/-) to paid driver, cleaners and conductors) : No. _____ CSI Per person _____.

13. Owner Driver Personal Accident Cover (if owner has a valid driving licence and has not opted this cover on any vehicle owned by him) - Not for firms.

Insurance Details

14. Period of Insurance Desired from* : _____ to midnight of _____

Note : The cover will start not earlier than the date and time of payment of premium, acceptance of risk and / or issuance of the covernote.

15. Has any Insurance company ever*:

Declined your proposal

Cancelled or refused to renew

Required an increase in premium

Imposed special conditions or excess

16. Is the vehicle proposed for insurance under: Name of Financier : _____

Hire purchase Agreement

Hypothecation Agreement

Lease Agreement

Address _____

City _____ Pin Code _____

Application No : _____

Driver Details*

17. Indicate the driver who normally drives the vehicle : Self Paid driver Any other

Please provide details :

- A. Driving License Number _____ Issue Date : _____
 B. Place of Issue : _____ C. Driving experience : _____ years
 C. Number of accidents, if any, in the past : _____

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

- D. Has he / she ever been convicted Yes No
 E. Does the driver suffer from defective vision or hearing or any physical infirmity. Yes / No

If "Yes" please give details.
 Additional details to be filled in case the main driver is any person other than self
 Please provide details :

- A) Name
 b) Date of Birth / Age in years : _____ / ____c) Sex : Male Female
 d) Martial Status : Married Single
 e) Driver's educational Qualification : Below 10th Std. 10th Std. Pass 12th Std. Pass Graduate / Post graduate

18. Please attach the following documents (Please produce the originals for verification alongwith this proposal form) :

- Copy of Registration Certificate ● Copy of valid Permit ● Copy of Fitness Certificate
- Copy of current Tax token ● Copy of expiring insurance policy ● Copy of Renewal Notice / NCB Certificate
- Copy of Driving Licence of current driver & alternate driver, if declared above

19. Any other material facts relevant for this insurance : _____

Declaration

"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 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/regulation 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.

* Declaration for No Claim Bonus (If NCB confirmation is not submitted but NCB claimed)
 (Strike off if 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 - 1 of the Policy will stand forfeited.

* Premium paid by Cash / Cheque No. _____ Date _____ Bank _____ Branch _____

* Amount (Rs.) _____

Signature of the Registered Owner of the vehicle*

Signature and Seal of the Financier

Date : _____ Place : _____

FOR PRODUCER'S USE ONLY

FOR OFFICE USE ONLY

Producer Code : _____
 Producer Name : _____
 Cover Note No. _____
 Date _____ Premium Rs. _____
 Cheque No. _____ Bank: _____
 Date _____
 Vehicle rated under Zone-A Zone-B Zone-C
 Business of Rural / Scocial Sector
 Producer's Signature : _____

Vehicle Inspection Report
 The vehicle proposed for insurance has been physically inspected on _____ / _____ / _____
 at _____. The details of the inspection are :
 1. Colour _____ 2. Odometer / Kilometer reading _____
 3. Detail the visible damages, if any _____
 4. Period of break in insurance : Less than 30 days / > 30 days and < 1 year / > 1 year.
 5. Recommendations : _____
 6. Corporate Approval No. _____
 Signature
 Name / Designation

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 prospectus or table 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.