



Reliance Private Car Package Policy- Schedule

|   |   |
|---|---|
| <b>Policy Number:</b> 170822123110005997  | <b>Proposal/Covernote No:</b> R23122143347  |
| <b>Insured Name :</b> MR.SAGAR PRATAPSING PARDESHI  | <b>Period of Insurance:</b> From 00:01 Hrs on 31-Dec-2021 to 23:59 Hrs of 30-Dec-2022                               |
| <b>Communication Address &amp; Place of Supply :</b> G NO 2036 MAHARANA PRATAP CHOWK,A/P NAGARDEOLA TAL PACHORA,,JALGAON,,MAHARASHTRA,,INDIA,424104 | <b>Policy Issuing Branch :</b> C-9 & C-10, SECOND FLOOR, ABC COMPLEX, ADALAT ROAD , AURANGABAD,,MAHARASHTRA, 431001 |
| <b>Mobile No :</b> 9890668846   | <b>Tax Invoice No. &amp; Date :</b> R23122143347 & 23/12/2021   |
| <b>Email-ID :</b> spardeshi46@gmail.com   | <b>GSTIN/UIN &amp; Place of Supply:</b>   |
| <b>Insured's Blood group :</b>  |   |

| Insured Vehicle Details           |                                    |  |          |
|-----------------------------------|------------------------------------|--|----------|
| <b>Registration No.</b>           | MH19CU4779                         | <b>Mfg. Month &amp; Year</b>             | DEC-2017 |
| <b>Make / Model &amp; Variant</b> | Mahindra / Kuv100 Nxt / K8 D 6 Str | <b>CC / HP / Watt</b>                    | 1198     |
| <b>Engine No./Chassis No.</b>     | NAHZL70716 / MA1VB2NACH6M93267     | <b>Seating Capacity Including Driver</b> | 6        |
| <b>Geographical Extension</b>     | INDIA                              | <b>LCC Excluding Driver</b>              | 5        |
| <b>RTO Location</b>               | MAHARASHTRA - Jalgaon              | <b>Total Premium ₹</b>                   | 12184.00 |
| <b>Hypothecation/Lease</b>        | NA                                 |  |          |

| Insured Declared Value (IDV)                 |        |                             |           |
|--|--------|-----------------------------|-----------|
| <b>Vehicle IDV ₹</b>                         | 424131 | <b>CNG / LPG Kit ₹</b>      | 0.0       |
| <b>Electrical / Electronic Accessories ₹</b> | 0.0    | <b>Trailer / Side Car ₹</b> | 0.0       |
| <b>Non Electrical Accessories ₹</b>          | 0.0    | <b>Total IDV ₹</b>          | 424131.00 |

| Premium Summary                       |                  |   |                  |
|---------------------------------------|------------------|---|------------------|
| <b>Own Damage - Section I</b>         | <b>Amount(₹)</b> | <b>Liability - Section II</b>                       | <b>Amount(₹)</b> |
| Basic OD including Add-on             | 7241.19          | Basic Liability (TPPD 1)                            | 3221.00          |
| <b>Total Basic Own Damage Premium</b> | <b>7241.19</b>   | <b>Total Basic Liability Premium</b>                | <b>3221.00</b>   |
| <b>Less</b>                           |                  | <b>PA Benefits - Section III</b>                    |                  |
| Deduct 20 % for NCB                   | -812.04          | Compulsory PA cover to Owner Driver                 | 375.00           |
| <b>Sub Total of Deductions</b>        | <b>-812.04</b>   | PA for unnamed passenger (IMT-16) No of passengers: |                  |
| <b>Add on Cover/s Opted</b>           |                  | 5 CSI per person: 100000                            | 250.00           |
| Nil Depreciation                      |                  | <b>Total PA Premium</b>                             | <b>625.00</b>    |
| <b>TOTAL OWN DAMAGE PREMIUM</b>       | <b>6429.15</b>   | Legal Liability to paid driver                      | 50.00            |
|                                       |                  | <b>TOTAL LIABILITY PREMIUM</b>                      | <b>3896.00</b>   |
|                                       |                  | <b>TOTAL PACKAGE PREMIUM (Sec I + II + III)</b>     | <b>10325.00</b>  |
|                                       |                  | CGST (@9.00 %)                                      | 929.00           |
|                                       |                  | SGST (@9.00 %)                                      | 929.00           |
| <b>TOTAL PREMIUM PAYABLE (₹)</b>      |                  |   | <b>12184.00</b>  |

Subject to I.M.T.Endt.Nos.IMT 15,16,28,22

GSTIN :27AABCR6747B1ZG,HSN :997134,  
Description of services :Motor vehicle Insurance Service

"As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year"

| PA-Nominee Details | Name         | Age | Relation |
|--------------------|--------------|-----|----------|
| 1                  | MRS PARDESHI | 35  | Spouse   |

Consolidated Stamp duty Paid vide Letter of Authorisation "NO.LOA/CSD/151/2021/(Validity Period Dt.15/10/2021 to 30/03/2022)/4163" date 12th Oct 2021 at General Stamp Office, Mumbai.\*\* Not Applicable for the State of Jammu & Kashmir

17BRG276 / Jainuine Insurance Brokers Pvt Ltd 9850049400 insurance@kailashjain.in

| Intermediary Code/Name | Intermediary Contact No. | Intermediary E-mail ID | POS UID Aadhaar No. / PAN No. |
|------------------------|--------------------------|------------------------|-------------------------------|
| Special Conditions :   | NA                       |                        |                               |

|   |   |  |
|---|---|--|
| <b>Limits of liability</b>                          | : | Under Section III of the policy - PA cover for owner driver CSI ₹ 1500000.0/-a) Under Section II (1)(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988.(b) Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or in the custody of control of the insured up to the limits specified- (TPPD 1 Sum Insured - ₹ 7,50,000/-, TPPD 2 Sum Insured-₹ 6,000/-). |
| <b>Limitations as to use</b>                        | : | The Policy covers use for any purpose other than: (a) Hire or Reward, (b) Carriage of goods (other than samples or personal luggage), (c) Organized racing, (d) Pace making, (e) Speed testing, (f) Reliability trials, (g) Any purpose in connection with Motor Trade.  |
| <b>Persons/Classes of persons entitled to drive</b> | : | Any person including insured:<br>Provided that a person driving holds a valid driving license at the time of the accident and is not disqualified from holding of such a license. Provided that the person holding a valid learner's license may drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.  |
| <b>Deductible under Section-I</b>                   | : | (i) Compulsory deductible ₹ 1000.0/-(ii) Additional compulsory deductible ₹ 0 (iii) Voluntary deductible ₹/0.0/-   |

\*No Claim Bonus is subject to no claim on the previous policy. Benefits under the policy stands forfeited if claim is/was made in previous policy.

"It is hereby declared and agreed that any damages pre-existing, any losses occurred & any Liability having been incurred, prior to the commencement of cover under this policy are excluded from the scope of this policy."

"This policy provides you with benefit of "Anywhere Assist"."

The policy wording with detailed terms, conditions and exclusions are available on our website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in).

I/We hereby certify that the Policy to which the certificate relates as well as this certificate of insurance are issued in accordance with the provision of Chapter X and Chapter XI of M.V. Act, 1988.

**Note:** In the event of dishonor of cheque, this policy document automatically stands cancelled from inception irrespective of whether a separate communication is sent or not. No Claim Bonus will be allowed, provided the policy is renewed within 90 days of the expiry of the previous policy.

\*\*\* Compulsory PA cover to Owner driver is opted for 1 year/s term with effective from 31/12/2021 to 30-12-2022.

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Call centre/Policy issuing Branch (Applicable for policies booked without Registration No of vehicles).

**IMPORTANT NOTICE:** The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. For legal interpretation, English version will hold good.

In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change.

**Grievance Clause :-** For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 1800 3009 or may write an email at [rgicl.services@relianceada.com](mailto:rgicl.services@relianceada.com). In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at [rgicl.grievances@relianceada.com](mailto:rgicl.grievances@relianceada.com). In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at [rgicl.headgrievances@relianceada.com](mailto:rgicl.headgrievances@relianceada.com). In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website [www.irda.gov.in](http://www.irda.gov.in) or on company website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in) or on [www.gbic.co.in](http://www.gbic.co.in). The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located. Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: [bimalokpal.mumbai@gbic.co.in](mailto:bimalokpal.mumbai@gbic.co.in) | Shri. A. K. Sahoo Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune - 411 030. Tel.: 020-41312555 Email: [bimalokpal.pune@gbic.co.in](mailto:bimalokpal.pune@gbic.co.in)

Note: This policy has been issued based on the information provided by you and the policy is not valid if any of the information provided is incorrect. In case you find any variations against your proposal or any discrepancy in the policy, kindly contact us immediately. Subject otherwise to the terms, conditions and exclusions of the Reliance Motor Private Car Package Policy.

In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Proposal/Covernote No. as mentioned in the policy.

This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017.

In the unfortunate event of a claim, please call quoting your Policy No. on 022 48903009(Paid) and register your claim immediately within 7days from the date of loss. You can also reach us at [rgicl.services@relianceada.com](mailto:rgicl.services@relianceada.com).

In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal.

For Reliance General Insurance Co. Ltd.

Authorised Signatory

IRDAN103RP0010V02100001/A0006V01201314

### Risk Assumption Letter

Dear Mr. **SAGAR PRATAPSING PARDESHI**

Thank you for choosing Reliance General Insurance. Please find enclosed policy no.: 170822123110005997 which has been issued based on the details declared by the applicant.

| Insured Vehicle Details               |   |   |             |
|---------------------------------------|---|---|-------------|
| Registration No.                      | MH19CU4779                                  | Mfg. Month & Year   | DEC-2017    |
| Make / Model & Variant                | Mahindra/Kuv100 Nxt / K8 D 6 Str            | Date of Registration  | 09-Jan-2018 |
| Engine No./Chassis No.                | NAHZL70716/MA1VB2NACH6M93267                | Seating Capacity Including Driver                                   | 6           |
| Type of Body                          | NA  | CC / HP / Watt  | 1198        |
| RTO Location                          | MAHARASHTRA - Jalgaon                       | LCC Excluding Driver  | 5           |
| Insured Declared Value (IDV)          |   |   |             |
| Vehicle IDV ₹                         | 424131                                      | CNG / LPG Kit ₹   | 0.0         |
| Electrical / Electronic Accessories ₹ | 0.0   | Trailer / Side ₹  | 0.0         |
| Non Electrical Accessories ₹          | 0.0   | Total IDV ₹   | 424131.00   |
| Previous Policy Details               |   |   |             |
| Previous Year Policy No.              | Period of Insurance                         | Previous Policy-Claim Status  |             |
| 3001/213093273/00/000                 | From : 31-12-2020 To : 30-Dec-2021 midnight | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |             |

#### YOU HAVE OPTED FOR THE FOLLOWING COVERS

##### Standard Cover Vehicle Own Damage + Third Party Coverage

- Electrical/electronic accessories
- Non-electrical accessories
- Bi-fuel kits comprising LPG/CNG systems

##### Add-on Covers

- Nil Depreciation Cover** No deduction for depreciation on vehicle parts other than tyres and tubes with respect of approved partial loss claims.
- Motor Secure Plus** No deduction for depreciation, consumable on vehicle parts and covers the engine, loss of key, loss of personal belongings in respect to approved partial loss claims.
- Motor Secure Premium** No deduction for depreciation, consumable on vehicle parts and covers the engine, tyre, loss of key, loss of personal belongings in respect to approved partial loss claims
- NCB Retention Cover** No-Claim Bonus % is retained even after a claim, which would have become 0% without this cover.
- Total Cover** Provides cover for registration charges, road tax and insurance premium (Total Cover Sum Insured -₹ 0.0/-)
- EMI Protect** Pays for car EMIs for the time period during which the car is in one of our network garages for repair.
- Daily Allowance Benefit** Provides allowance as per plan opted, if vehicle is in garage for more than minimum days & for initial two eligible own damage claim., and in case of theft where vehicle is not found for more than 90 days.
- Daily Allowance Benefit Plus** Provides allowance as per plan opted, if vehicle is in garage for more than minimum days & for eligible own damage claim., and in case of theft where vehicle is not found for more than 90 days.
- Return to Invoice** Covers difference between IDV & purchase price of the vehicle in the event of theft, total loss/ CTL including first time registration charges, road tax & applicable insurance cost.
- Tyre Protector** Covers repair or replacement expenses arising out of accidental loss or damage to tyre & tubes.
- Rim Protector** Covers repair or replacement expenses arising out of accidental loss or damage to Rims.
- Loss of Personal Belongings** Covers loss of personal belongings of insured or his family while such items are in vehicle at the time loss or damage to the vehicle
- Hospital Cash Cover** Provides hospital confinement allowance for accident or injuries sustained while driving insured vehicle.
- Consumable Expenses** Covers expenses incurred towards consumable items due to damage to vehicle caused by perils covered. For e.g. nut & bolt, screw, washers, grease etc
- Engine Protector** Provides coverage to internal parts of engine, gear box, transmission assembly & differential assembly due to ingress of water or leakage of lubricating oil.
- Key Protect Cover** Provides replacement cost of keys in the event the keys are lost. It also covers replacement cost of locks if the vehicle is broken into.
- Emergency Hotel Accommodation** Provide allowance towards the Hotel accommodation insured vehicle met with accident/ stolen 200 kms away from the location provided in policy copy.
- Additional Limit of TPPD** Indemnify the Insured for an additional TPPD amount opted for damage to property other than the property belonging to the Insured or held in trust or in custody of Insured.

(Note- Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate."

This policy provides you with benefit of "Anywhere Assist". For more details visit [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in)  
Please take a moment to carefully check your policy details mentioned above and in the policy schedule. Kindly confirm that the same are in order. In case of discrepancies, please let us know immediately. You can write to us at [rgicl.services@relianceada.com](mailto:rgicl.services@relianceada.com) or call us on **022 48903009(Paid)** for necessary changes/rectification. In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal. Non disclosure and/or misrepresentation of claims in the previous policy period can lead to cancellation of your policy or rejection of your claims.

For Reliance General Insurance Co. Ltd.



Authorised Signatory

IRDAN103RP0010V02100001/A0006V01201314

## Know your Policy

Remember to carefully go through the Risk Assumption Letter and confirm your personal as well as your vehicle details.

In case of any discrepancy in the policy details, kindly revert within 15 days from the policy start date on **022 48903009 (Paid)** or visit any of our branches. Kindly refer to the Key Feature Document and Policy Wording at [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in) to understand your policy better and learn more about the policy coverages, add-on covers and Policy Exclusion. This document is a statement of the specific provisions that form the Terms and Conditions of this Policy.

## What documents do you require for making any change to your Policy

### 1. Changes in vehicle make & model/cubic capacity/seating capacity/engine & chassis no./year of manufacture/registration no./ location/address

**Documents required:** Letter for change, policy copy and registration certificate copy along with additional premium cheque, if applicable.

### 2. Changes in electrical and non electrical accessories/CNG/LPG kit

**Documents required:** Letter for addition, policy copy, invoice copy of accessories, endorsed registration certificate copy (for CNG/LPG kit) and cheque for additional premium.

### 3. Changes in financier details (Hypothecation/Lease/Hire purchase)

**Documents required:** Letter for change, policy copy, endorsed registration certificate copy and no objection certificate from financier (not mandatory for deletion, if registration certificate copy is endorsed).

## How to register a Claim - Cashless



Report vehicle at Network Garage



Claim registration by Network Garage



Survey, Document verification, Loss Assessment & Re-inspection



Cashless Amount Confirmation



Vehicle Delivery

## How to register a Claim - Reimbursement



Registration of Claim



Report Vehicle at Garage



Survey, Document verification, Loss Assessment and Re-inspection



Vehicle Delivery



Submission of Original Repair Bills + Payment Receipt



Claim Settlement to Customer

## What documents do you require to register a Claim

1. Claim form duly filled and signed (company stamp in case of company registered vehicles)
2. Registration copy
3. Driving License of the driver at the time of loss
4. Policy copy

Note: 1. As soon as a claim occurs, please intimate immediately at our call centre **022 48903009 (Paid)**. Delay in intimation would result in the violation of policy condition.

2. Any additional document, if required, will be informed.

## How to renew your policy conveniently



Visit [reliancegeneral.co.in](http://reliancegeneral.co.in) and renew online



Call 1800 3009 and renew



Submit a cheque/DD along with signed Renewal Notice to branch/agent and renew

## Payment Modes

- Internet banking
- Cheque/DD
- Credit/Debit Card

RELIANCE GENERAL INSURANCE | Live Smart **Live Smart**

**Name :** SAGAR PRATAPSING  
**Policy no. :** 170822123110005997  
**Policy Period :** 31-Dec-2021 to 30-Dec-2022  
**Chasis No. :** MA1VB2NACH6M93267  
**Vehicle No. :** MH19CU4779  
**Emergency Contact no. :**  
**Blood Group. :**



Scan QR code for more details

**For breakdown and claims Call 022 48903009**

- All insurance contracts are based on the information provided by the insured in the proposal form.
- Intimate claim immediately at our Paid No. 022 48903009 and provide:
  1. Policy No. as mentioned on the card.
  2. Place, Date & Time of Loss.
  3. Name of the Driver Driving the vehicle at the time of Loss.
  4. The damages suffered by the vehicle.
  5. Injuries to passengers/driver/third parties if any.
  6. Place when the vehicle is currently available for inspection.

**IRDAI Registration No. 103**

Reliance General Insurance Company Limited.  
Corporate Office: Reliance General Insurance Company Limited, 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai - 400 063.  
Corporate Identity No. U66603MH2000PLC128300.  
RGI/MCOM/MOT-02/MOTOR CARD/Ver. 1.0/200115.  
Trade Logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License.

## Reliance Private Car Package Policy - Proposal Form

Is the Vehicle Made in India?  Yes  No Type of Vehicle :  Two wheeler  Four wheeler  Three Wheeler

### For Office Use Only

Policy Number 170822123110005997 Date  
 Savion Reference No. Inspection Lead No.

### Intermediary Details (To be filled in BLOCK LETTERS)

Intermediary Name JAINUINE INSURANCE BROKERS Code 17BRG276  
 Branch Name Aurangabad Code 1708  
 Sales Manager Name Bhushan Wagh Code 70783662

### Details (To be filled in BLOCK LETTERS)

- This Proposal is for  A new Policy  Renewal of Policy  Endorsement  Others (Please specify)
- Proposer's Full Name  Mr.  Mrs.  Ms. SAGAR PRATAPSING PARDESHI
- Address Address for Communication Address where Vehicle is Normally Kept and Used  
 Flat/Building/Door/Block No. G No 2036 Maharana Pratap Chowk,  
 Road/Street/Sector A/p Nagardeola Tal Pachora  
 Nearest Landmark  
 Area  
 City  
 Pin Code 424104  
 State MAHARASHTRA,  
 Country India  
 Phone Mobile 9890668846  
 Emergency Contact No. Blood Group  
 Email spardeshi46@gmail.com Fax
- Source of Funds  Business  Profession  Salary  Agricultural Income  Savings  Others
- Monthly Income  Upto ₹ 20,000  ₹ 20,001 to ₹ 50,000  ₹ 50,001 to ₹ 1,00,000  ₹ 1,00,001 and above
- UID Aadhaar No. 6. PAN
- Type of Cover Package Policy
- Do you have a GST Registration Number  Yes  No  
 If Yes, please specify \_\_\_\_\_
- Related Party  Yes  No

**Details of the Vehicle**

- 10. Registration Number: MH19CU4779
- 11. Date of Registration: 09-Jan-2018
- 12. Registering Authority & Location: MAHARASHTRA - Jalgaon
- 13. Year & Month of Manufacture: DEC-2017
- 14. Cubic Capacity: 1198
- 15. Engine Number: NAHZZL70716
- 16. Chassis Number: MA1VB2NACH6M93267
- 17. Make of Vehicle: MAHINDRA
- 18. Type of Body : NA
- 19. Seating capacity including Driver: 6

**Details of the Vehicle Type and Use**

20. a. Whether the Vehicle is driven by Non-conventional source of power?  Yes  No If yes  Bi Fuel  CNG  LPG

| Policy Year | Insured's Declared Value (IDV) of vehicle Chassis Body | Non - electrical accessories fitted to the vehicle (₹) | Electronic accessories fitted to the vehicle (₹) | Side car (two Wheeler) Trailer (Pvt. Cars) (₹) | Value of CNG/ LPG Kit Bi Fuel (₹) | Total Value (₹) |
|-------------|--|--|--|--|-----------------------------------|-----------------|
| 1st Year    | 424131   | 0.0  | 0.0  | 0.0  | 0.0                               | 424131.00       |
| 2nd Year    |  |  |  |  |                                   |                 |
| 3rd Year    |  |  |  |  |                                   |                 |

b. Do you have a valid PUC?  Yes  No

(Note- Warranted that the Assured named herein/owner of the vehicle insured holds a valid Pollution Under Control (PUC) Certificate on the date of commencement of the Policy and renews and maintains valid and effective PUC Certificate during the duration of the Policy period. If the PUC is not found valid on the date of loss, the company shall repudiate the OD claim made under the Policy)

- 21. Age of Owner Driver \_\_\_\_\_ 22. D.O.B \_\_\_\_\_
- 23. Add On Covers (Subject to availability and eligibility)
  - a. Nil Depreciation Cover  Yes  No
  - b. NCB Retention Cover (Applicable only for Annual Policy)
  - c. Easy Monthly Instalment (EMI) Protection Cover:  Yes  No  
 If Yes, please choose any one option:
    - Plan I - 1 EMI, EMI Amount: ₹ \_\_\_\_\_
    - Plan II - 2 EMIs, EMI Amount: ₹ \_\_\_\_\_
    - Plan III - 3 EMIs, EMI Amount: ₹ \_\_\_\_\_
  - d. Motor Secure Plus (Available for Private Cars Only)
  - e. Motor Secure Premium (Available for Private Cars Only)
  - f. Total Cover
  - g. Daily allowance benefits   
 Per Day Allowance: 0.0 Coverage Days: 0
  - h. Return to Invoice (Applicable only for Annual Policy)
  - i. Tyre Protector (Applicable only for annual Policy)   
 Specification of Tyres and Tubes:
  - j. Rim Protector (Applicable only for annual Policy)   
 Specification of Rims:
  - k. Hospital Cash Cover (Applicable only for annual Policy)   
 (Sum Insured: ₹ 0.0)  
 (No of Days: 0)  
 Convalescence benefit of SI:
  - l. Consumable
  - m. Engine Protect:
  - n. Key Protect Cover (Sum Insured: ₹ 0.0)
  - o. Daily Allowance Benefit Plus:   
 Per Day allowance amount opted: ₹ 0.0  
 Coverage days Opted: 0
  - p. Loss of Personal belongings (Applicable only for annual Policy)   
 (Sum Insured: ₹ 0.0)
  - q. Emergency Hotel Accomodation



- Benefit Amount : ₹0.0
- r. Voluntary Deductible:  
 Voluntary Deductible amount opted: ₹
- s. Additional limit of TPPD  
 Additional amount opted: ₹0.0
- t. Any Other Details:
24. Whether the Car is Certified as Vintage Car by Vintage and Classic Car Club of India?  Yes  No
25. Whether the Vehicle is fitted with Fibre glass tank?  Yes  No
26. Is the vehicle fitted with any Anti-theft device approved by the ARAI?  
 If Yes, please attach certificate of Installation in the vehicle, issued by Automobile Association of India.  Yes  No
27. Are you a member of Automobile Association of India ? If yes, please submit membership copy.  Yes  No
28. Whether the Vehicle is used for Driving Tuitions?  Yes  No
29. Whether use of Vehicle is limited to Own Premises? ( Only if not Licensed for General Road use by RTO).  Yes  No
30. Whether the Vehicle belongs to the Embassy/Consulate of a Foreign Country?  
 If so, is the duty element included in the IDV?  Yes  No
31. Whether the Vehicle is design for use of Blind/Handicapped/Mentally Challenged Person? (Attach RC Copy)  Yes  No
32. Date of purchase of the Vehicle by the Proposer 09-Jan-2018
33. Whether the Vehicle at the time of purchase was  New  Second Hand

**Risk Inclusions**

34. Please select the higher deductible if you wish to opt for over and above the compulsory deductible Private Car :
35. Liability to third parties : The policy provides Third Party Property Damage (TPPD) of ₹ 1 lakh (Two wheelers) and ₹ 7.5 lakhs (Private car)  
 Do you wish to restrict the above limits to the statutory TPPD Liability limit of ₹ 6000/- only ?  Yes  No

Legal Liability  No of Person

Driver:

**36. Personal Accident Cover for Owner Driver. Please give details of nomination**

| Name | Name of Nominee | Age of Nominee | Name of Appointee (if Nominee is Minor) | Relationship | Address |
|------|-----------------|----------------|---|--------------|---------|
|      | MRS PARDESHI    | 35             |   | Spouse       |         |

(Note: 1. Personal Accident cover for owner driver is compulsory for Sum Insured of ₹15,00,000/- for Two Wheeler, Private Car, GCV, PCV and Misc-D

2. Compulsory PA cover for 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)

37. Extension of Geographical Area:  
 Whether extension of Geographical Area to the following countries required?  
 1. Bangladesh  2. Bhutan  3. Maldives  4. Nepal  5. Pakistan  6. Sri Lanka

**Details of Hire Purchase / Hypothecation / Lease**

38. Please state if the vehicle is under  Hire purchase  Lease Agreement  Hypothecation Agreement  
 If so, give name and address of concerned parties.
39. Full Name M/s
40. Address

**Details of Previous Insurance**

41. Full Name of the previous insurer
42. Address
43. Policy Number 3001/213093273/00/000 Previous policy Expiry 30-Dec-2021
44. Type of cover:  Package Policy  Liability Only  Other (To be describe)
45. NO CLAIM BONUS allowed under previous policy (%)
46. Claims taken in previous policy  Yes  No  
 If yes, No. of Claims Claims Amount ₹

47. Are you entitled to No Claim Bonus  Yes  No  
 If yes, please submit/attached proof thereof

|                       |                     |                     |                                       |                             |
|-----------------------|---------------------|---------------------|---------------------------------------|-----------------------------|
| Previous Insurer Name | Previous Policy No. | Period of Insurance | Previous Policy Claim (Only for SAOD) |                             |
|                       |                     | to                  | <input type="checkbox"/> Yes          | <input type="checkbox"/> No |

**Payment Details**

Cheque / DD Cheque / DD No.  
 Cheque/DD Date  Cash  Credit Card  Others

**Proposer's Bank Details**

48. Name of the Bank Account Holder  
 49. Bank Account No.: 50. Account:  Saving  Current  
 51. Name of the Bank  
 52. Branch  
 53. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)  
 54. IFSC Code (11 character code appearing on your cheque leaf)

I understand that any refund due on the premium payment / any payment / claims to be directly credited to my aforesaid Bank Account.\*  
 \*As per IRDAI, its mandatory that all payments made to the insured are only through electronic mode.

**AML Guidelines**

"I/ We hereby confirm that all premiums have been/ will be paid from bonafide sources and no premium have been/ will be paid out of the 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 the documents to establish source of funds. The insurance company has the right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statues, directly/ indirectly governing the prevention of Money Laundering in India.

Nationality:  Indian  Non- Indian, If Non Indian please specify the country  
 Type of Organization :  Corporations  Government  Non Government Organizations  Society  Trust  
 Partnership  International Organization  Cooperatives  Section 25 companies

**Declaration by Proposer**

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 have read and understood the brochure, prospectus, sales literature & Policy wordings and confirm to abide by the same. • 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 of nondisclosure 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 fo 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. • I/We here by state that the above mentioned address shall be taken as address on record for the purpose of GST. • I/We hereby confirm that the contents of the proposal form and connected documents have been fully explained to me/us and I/We have fully understood the significance of the proposed contract.

This proposal form was completed by

You can support our Go Green Initiative by saying "No" to Policy kit, Renewal Notice and Other Communications hard copy. We will be sending you a digitally signed soft copy on your registered Email ID & Mobile number.

Hard copy required  Yes  No

Name :  
 Date :

Place :  
 Date :

Signature

Signature of Proposer & Company Seal

**Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.**

- 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 prospectuses or tables of the insurer.
- Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

**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 of IRDAI Agent/Broker  Mr.  Mrs.

Place :

Date :

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

Signature of IRDAI Agent/Broker