HDFC ERGO General Insurance Company Limited

MOTOR INSURANCE - PRIVATE CAR PACKAGE POLICY - PROPOSAL FORM

(Please fill in CAPITALS only)

CUSTOMER INFORMATION

For Individual Customers only

Name of Insured* (First Name) (Middle Name) (Last Name)

Date of Birth D D M M Y Y Y Y

For Corporate Customers only

Name of the Insured (Full Registered Name)*

Contact Person PAN

Corr. Add : Building Name / Block No.*

Street Name* Locality*

City* Pin Code* State*

Tel.* STD Code Mobile*

Email *

eIA Aadhar Card

☐ I would like to apply for eIA with Karvy ☐ CAMS ☐ NSDL ☐ CDSL GSTN No.

PAYMENT DETAILS

Cheque / Instrument No. Date of Instrument D D M M Y Y Y Y Bank Name _____

Branch Name / Location: _____ Amount:

SOURCES OF FUND

Salary ☐ Business ☐ Other ☐ (Please Specify) _____

BANK ACCOUNT DETAILS

Name of the Bank Account Holder

Bank Account No. Account: Savings ☐ Current ☐

Name of Bank Branch

MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)

IFSC Code (11 character code appearing on your cheque leaf)

☐ I hereby agree to receive all monies due from the Insurance Company towards any refund of premium, claims, etc. into my bank account as specified in the instrument tendered towards insurance premium and such electronic transfer will constitue full and final discharge of the aforesaid obligation by the Insurance Company, unless specifically intimated by me in writing to the Insurance Company about the change in bank account.

RISK INFORMATION

Vehicle Manufacturer* Vehicle Model*

Registration Location* Year of Manufacture* Y Y Y Y

Engine No.* Chassis No.*

Colour of the Vehicle Fuel Type* ☐ Petrol ☐ Diesel ☐ CNG ☐ LPG

Seating Capacity* Cubic Capacity(CC)*

Occupation : (For Individual Customers Only)

☐ Chartered Accountant ☐ Defense & Paramilitary Services ☐ Teacher in Govt. Recognized Insitutes ☐ Central / State Govt. Employee ☐ Govt. recognized Medical Professionals

Age of Insured

Insured Declared Value of the Vehicle*	Non-Electrical Accessories fitted to the Vehicle	Electrical & Electronic Accessories fitted to the Vehicle	Side Car (Two-Wheeler) Trailer (Pvt. Cars)	Value of CNG / LPG Kit	Total Value*
₹	₹	₹	₹	₹	₹

Type of Cover required ☐ Package Policy

ADDITIONAL INFORMATION

Registration No.* Date of Registration* D D M M Y Y Y Y

Previous Insurer*

Previous Policy No.*

Previous Period of Insurance* From D D M M Y Y Y Y to D D M M Y Y Y Y

Current Period of Insurance* From D D M M Y Y Y Y to D D M M Y Y Y Y

Claims lodged during the preceding year Number* Amount (₹) (approximate)

Are you entitled to No Claim Bonus* ☐ Yes (%_____) ☐ No (If yes, please submit/attach proof thereof. Please read the declaration below.)

Whether the use of the vehicle is limited to own premises? Y N

Whether the vehicle is designed for the use of Blind/ Handicapped/ Mentally - challenged persons and duly endorsed by RTA? Y N

Is the vehicle proposed for insurance under: ☐ Hire-Purchase ☐ Lease Agreement ☐ Hypothecation Agreement

If Yes, give the name of the concerned parties

COVERAGE INFORMATION

Personal Accident Cover for Owner Driver is compulsory in the Package policies. Please give details of nomination:

(a) Name of Nominee and Age (b) Relationship

(c) Name of Appointee (if nominee is a Minor)

(d) Relationship to the Nominee

Note: 1. Personal Accident Cover for owner driver is compulsory for Sum Insured of ₹ 15 Lakhs

2. Compulsory Personal Accident 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

1. Do you have a Personal Accident cover with a minimum sum insured of Rs 15 Lakhs? ☐ Yes ☐ No

   If yes, then please provide policy number_____

2. Do you have a Personal Accident policy with a sum insured of Rs < Rs 15 lakhs? ☐ Yes ☐ No

   If yes, then please provide policy number _____ and sum insured _____

HDFC ERGO General Insurance Company Limited. IRDAI Reg. No.146. CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165-166 Backbay Reclamation, H. T. Parekh Marg, Churchgate, Mumbai – 400 020. Customer Experience Management, Customer Happiness Center: D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai - 400 078. For Claim/Policy related queries call us at +91 22 6234 6234/+91 120 6234 6234 or Visit Help Section on www.hdfcergo.com for policy copy/tax certificate/make changes/register & track claim. Trade Logo displayed above belongs to HDFC Bank Ltd and ERGO International AG and used by the Company under license. UIN: Zero Depreciation Claim – IRDAN125A0021V01201415 | Loss of Use - Down Time Protection - IRDAN125A0012V01201213 | Emergency assistance Cover – IRDAN125A0016V01201314 | No Claim Bonus Protection – IRDA/F&U/HDFC/Motor Add-ons/09-10/2 | Return To Invoice – IRDAN125A0013V01201213 | Cost Of Consumable Items – IRDAN125A0003V01201213 | Engine & Gear Box Protector – IRDAN125A0004V01201213 | Motor Insurance - Pricing Revision - Private Cars -IRDAN125RP0001V02201415.

Do you wish to include the following Personal Accident coverage:

Unnamed Passengers :	No. of Persons :	CSI opted for: ₹
Paid Driver :	No. of Paid Drivers :	CSI opted for: ₹

Maximum CSI (Capital Sum Insured) per person is ₹2 Lakhs

In case of named persons, give name and CSI opted for:

Name	CSI opted for: ₹	Nominee	Relationship

The policy provides Third Party Property Damage (TPPD) of ₹7.5 Lakhs (private cars)
Do you wish to opt for statutory TPPD liability coverage of ₹6000/- only? ☐ Yes ☐ No

Legal Liability	No. of Persons
Driver / Conductor / Cleaner	
Other Employee	

Please select the higher deductible if you wish to opt for over and above the compulsory deductible (₹1000 - for vehicles not exceeding 1500 cc, ₹2000 for vehicles exceeding 1500 cc)

☐ ₹2500 ☐ ₹5000 ☐ ₹7500 ☐ ₹15000

MOTOR ADD-ON COVERS

Do you wish to opt for any of the below add on covers:

☐ Silver Plan (Zero Depreciation) ☐ Gold Plan (Zero Depreciation & Loss of Use) ☐ Platinum Plan (Zero Depreciation, Engine & Gear Box and NCB Protection)
☐ Titanium Plan (Zero Depreciation Claim, Engine & Gear Box, NCB Protection, Cost of Consumables) ☐ Diamond Plan (Zero Deprecation & Cost of consumables) ☐ Emergency Assistance
☐ Emergency Assistance Wider ☐ Return to Invoice ☐ Zero Depreciation ☐ Engine & Gear Box ☐ NCB Protection ☐ Loss of Use ☐ Cost of Consumables

DECLARATION ON BEHALF OF ALL PERSONS TO BE INSURED

I/We hereby understand, declare, consent and authorize the Company to use personal health details and financial information, as provided to the Company for underwriting the risk.

TERMS AND CONDITIONS

TERMS AND CONDITIONS: I/We hereby declare that the statement made by me/us in the 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 contract between me/us and HDFC ERGO 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. 1) 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. 2) I/We further understand and agree that HDFC ERGO 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, HDFC ERGO 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 form the date of commencement of the policy shall stand automatically forfeited. Further, any survey arranged/allowed by HDFC ERGO General Insurance of the motor vehicle, pending confirmation of this declaration from my/our previous insurers, shall be without prejudice to any of the rights and remedies available to HDFC ERGO General Insurance as contained herein and relevant laws and regulation. 3) I/We acknowledge and agree that, pending receipt of confirmation of this declaration from my/our previous insurers, the "cash-less repair facility" provided by HDFC ERGO General Insurance shall stand suspended. 4) I/We also shall endeavour to procure the renewal notice & pass on the same to HDFC ERGO General Insurance immediately upon the receipt of such renewal notice. 5) I/we authorize HDFC ERGO General Insurance and associate partners to contact me via email, phone, SMS.

Declaration on behalf of all Persons to be Insured: I/We hereby understand, declare, consent and authorize the Company to use personal health details and financial information, as provided to the Company for underwriting the risk. I/We hereby also understand, declare, consent and authorize the Company that the Company shall have right to retain the aforementioned information and disseminate the same to its service provider(s) for providing services related to insurance. I hereby declare that I do hold Personal Accident cover of Capital Sum Insured ₹15 lakhs or above

For Pvt Car proposal form: I / We declare and confirm having a valid PUC. **For Commercial proposal form:** I / We declare and confirm having a valid PUC and Vehicle Fitness certificate.

VERNACULAR DECLARATION: The content of this form and its particulars have been explained by me in vernacular to the proposer who has understood and confirmed the same. Declaration in case the proposal is filled other than the proposer/ the proposer sign in vernacular language/ proper is illiterate (to be certified by someone other than agent/ employee of the company)

Name of the Translator

Place Date D D M M Y Y Y Y

Signature of theTranslator

Name of the Proposer

Place Date D D M M Y Y Y Y

Signature/ Thumb impresser of Proposer

FRAUD WARNING: This policy shall be voidable at the option of the Company in the event of mis-representation, mis-description or non-disclosure of any material particulars by the Applicant. Any person who, knowingly and with intent to defraud the insurance company or any other person, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, Information concerning any fact material there to, commits a fraudulent insurance act, which will render the policy voidable at the sole discretion of the insurance company and result in a denial of insurance benefits.
Note: The liability of the company does not commence until the acceptance of the proposal has been formally intimated by the insured and full premium has been realized by the company.

ANTI - MONEY LAUNDERING: The Company believes in adherence to Anti Money Laundering (AML) guidelines/rules as it aids in ensuring that financial institution like ours are not used as vehicle for money laundering. The policyholder/ nominee are thus bound to provide such information as may be required by the Company for ensuring the adherence of AML guidelines/rules.

SHARING OF INFORMATION CLAUSE: The information sought from the insured Is strictly for the purpose of policy issuance and policy servicing. This information sought and the details of policy are kept confidential and will not be shared with any external party in any circumstances whatsoever. However, in instances when such information/ details is sought by any governmental bodies / regulatory authorities or when the Company is directed to share such information in accordance with any law/regulations or direction from any such governmental bodies/regulatory authorities, the Company will be bound to abide to such directions.

DATA PROTECTION: I/We hereby understand, declare, consent and authorize the Company that vehicle details and financial information, as provided to the company may be utilized for processing the claim made under the Policy. I/We hereby also understand, declare and consent that the Company shall have right to retain and disseminate the same to any service provider for providing services related to insurance.

Prohibition of Rebates (Section 41 of Insurance Act, 1938 as amended):

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 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: provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ₹10 Lakhs.

MODE OF PAYMENT: Cheque and Demand Draft. Payment by cash will not be accepted. This policy shall be voidable at the option of the Company in the event of mis-representation, mis-description or non-disclosure of any material particulars by the proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other person, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact materials 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.

1. Persons or classes of persons entitled to drive: Any person including the Insured: Provided that the person driving holds an effective driving licence at the time of the accident and is not disqualified from holding or obtaining such a licence; Provided also that the person holding an effective learner's licence may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.
2. Any limitations as to use of motor vehicle: The insurance covers use of the vehicle for any purpose other than: (a) Hire or reward; (b) Driving tuition; (c) Organised racing; (d) Pace making; (e) Speed testing; (f) Reliability trials; (g) Any purpose in connection with Motor Trade. In addition to this, the insurance does not cover (1) Carriage of goods (other than samples or personal luggage), in case of Private Car (2) Use whilst drawing a greater number of trailers in all than is permitted by law, in case of Agricultural Tractors; (3) Use whilst drawing a trailer except the towing (other than for reward) of any disabled mechanically propelled vehicle, in case of Goods Carrying Tractors.

☐ **I agree to receive a one pager policy document.**
☐ **I hereby declare that I do not hold an effective driving license.**
☐ **I have read and understood and agree with the terms and conditions mentioned overleaf of this Proposal Form.**
☐ **I hereby declare that I do have Alternate PA / Stand alone CPA policy with minimum sum insured of Rs 15 lakhs**

Place

Date D D M M Y Y Y Y

Signature of Proposer

FOR OFFICE USE

Channel Partner Code Branch Location

Signature of Channel Partner

*Mandatory Information