HDFC ERGO General Insurance

COMPULSORY PERSONAL ACCIDENT (OWNER-DRIVER) UNDER MOTOR INSURANCE POLICIES - PROPOSAL FORM



1

(Please fill in CAPITALS only)

COSTOMER INFORMATION
For Individual Customers only Name of Insured*
(First Name) (Middle Name) (Last Name)
Married D lde of Birth D D M M Y Y Y
Father's Name
Name of the Insured (Full Registered Name)*
Contact Person PAN PAN
Corr. Add : Building Name / Block No.*
Street Name* Locality* Locality*
City* Pin Code* State* Image: City and the state Image: City an
Tel.* Mobile*
STD Code Email *
elA Aadhar Card
PAYMENT DETAILS
Cheque / Instrument No. Date of Instrument D M M Y Y Bank Name
Branch Name / Location: Amount: 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 Branch MICR Code (9 digit MICR code number of the bank and IFSC Code (11 character code
branch appearing on the cheque issued by the bank)
I wish: Any refund due on the premium payment / any payment/claims will be directly credited to my aforesaid Bank Account.*
*As per the IRDAI, its mandatory that all payments made to the insured only through electronic mode.
/ehicle Manufacturer
Vehicle Manufacturer Vehicle Model Vehicle Model Registration Location Vehicle Model Year of Manufacture
/ehicle Manufacturer Vehicle Model Vehicle Model Registration Location Year of Manufacture YYYYY Engine No. Chassis No. Image: Chassis No.
Vehicle Manufacturer Vehicle Model Vehicle
/ehicle Manufacturer Vehicle Model Vehicle
/ehicle Manufacturer Registration Location Engine No. Colour of the Vehicle
/ehicle Manufacturer Vehicle Model Vehicle
/ehicle Manufacturer Registration Location Engine No. Colour of the Vehicle
Vehicle Manufacturer Vehicle Model Vehicle
Vehicle Manufacturer Registration Location Engine No. Colour of the Vehicle
Alchicle Manufacturer Registration Location Engine No. Colour of the Vehicle
Vehicle Manufacturer Registration Location Engine No. Colour of the Vehicle
Advice Manufacturer Registration Location Engine No. Colour of the Vehicle Colour of the Vehicle D M Y Y Petrol D M Y Y 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
Alchicle Manufacturer Registration Location Engine No. Colour of the Vehicle
Vehicle Manufacturer Registration Location Ingine No. Colour of the Vehicle Chassis No. Chassis No. Chassis No. Cubic Capacity(CC) Cubic Capacity(CC) 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: Personal Accident Cover for all vehicle types of Sum Insured of ₹15 Lakhs? Yes
Vehicle Manufacturer Vehicle Manufacturer Registration Location Engine No. Chassis No. Chassis No. Chassis No. Chassis No. Puel Type Petrol Diesel CNS LPG Hybrid Cubic Capacity D M Y Y Seating Capacity D M Y Y Relationship c. Name of Appointee (if nominee is a minor) d. Relationship to the Nominee Note: Personal Accident Cover for all vehicle types of Sum Insured of ₹15 Lakht 1.Do you have a Personal Accident cover with a minimum sum insured of ₹15 Lakht Yes No
Pehicle Manufacturer Vehicle Model Registration Location Year of Manufacture Pigers nol Pierrol Colour of the Vehicle Pierrol Colour of the Vehicle Pierrol Deseling Capacity Cubic Capacity(CC) Colour of the Vehicle Pierrol Deseling Capacity Pierrol Diesel CNG Pierrol Diesel Colour of the Vehicle Pierrol Diesel CNG Pierrol Diesel Colour of the Vehicle Pierrol Diesel CNG Pierrol Diesel Colour of the Vehicle Pierrol Diesel CNG Pierrol Diesel Colour of the Vehicle Pierrol Diesel CNG Pierrol Diesel Colour of the Vehicle Pierrol Diesel CNG Pierrol Diesel Colour of the Vehicle Pierrol Diesel CNG Pierrol Diesel Colour of the Vehicle Pierrol Note: Personal Accident Cover or all vehicle types of Sum Insured of ₹15 Lakh 1.Do you have a Personal Accident cover with a minimum sum insured of ₹15 Lakh? 1.Do you have a Personal Accident cover with a minimum sum insured of ₹15 Lakh? 1.Do you have a Personal Accident cover with a minimum sum insured of ₹15 Lakh? 1.Do you have a Personal Accident cover with a minimum sum insured of ₹15 Lakh? Yes No
Vehicle Manufacturer
Vehicle Manufacturer Vehicle Model Registration Location Year of Manufacture Signia No. Chassis No. Colour of the Vehicle Chassis No. Seating Capacity Cubic Capacity(CC) Seating Capacity Cubic Capacity(CC) Seating Capacity Cubic Capacity(CC) Petrol Diesel CNG LPG Hybrid Seating Capacity COVERAGE INFORMATION Petrol Nominee and Age . Name of Nominee is a minor) d. Relationship c. Name of Appointee (if nominee is a minor) d. Relationship to the Nominee Note: Personal Accident Cover for all vehicle types of Sum Insured of ₹15 Lakh? Yes No If yes, then please provide policy number and insurer's name 2.0 you have more than one vehicle registered in your name? Yes No If yes, please provide vehicle registeration no of each vehicle So you have a Personal Accident cover for Owner Driver under any other motor policy for the vehicle registered in your name? Yes No If yes, please provide vehicle registeration no of each vehicle So you have a Personal Accident cover of Owner Driver under any other motor policy for the vehicle registered in your name? Yes No If yes, please provide vehicle registeration no of each vehicle So you have a Personal Accident cover of Owner Driver under any other motor policy for the vehicle registered in your name? Yes No No
Vehicle Manufacturer Vehicle Manufacturer Vehicle Model Verice Manufacturer Verice Manufacture Veri
Vehicle Manufacturer Vehicle Model Vericle Manufacturer Year of Manufacturer Year of Manufacture YYYYY Chassis No. Chassis No. Calour of the Vehicle Chassis No. CovERAGE INFORMATION CovErAGE INFORMATION Please give details of nomination: CovErAGE INFORMATION a. Name of Nominee and Age CovErAGE INFORMATION c. Name of Appointee (if nominee is a minor) CovErAGE INFORMATION d. Relationship to the Nominee Chassis No. Note: Personal Accident Cover for all vehicle types of Sium Insured of R15 Lakh? Yes 10 by ou have a Personal Accident cover for Nome Driver under any other motor policy for the vehicle registered in your name? Yes 20 by ou have a Personal Accident cover for Owner Driver under any other motor policy for the vehicle registere
Arelide Manufacturer Registration Location Engine No. Chassis No. Courd of the Vehicle Calcur of the Norninee is a minor) Calcur of the Norninee Note: Personal Accident Cover for all vehicle types of Sum Insured of ₹15 Lakh 1. Do you have a Personal Accident Cover for all insurer's name Calcur of the vehicle registration no of each vehicle 2. Do you have a Personal Accident cover of Owner Driver under any other motor policy for the vehicle registred in your name? Yes No wish to opt for Sum Insured > Rs15 Lakh (Rs 16 Lakh - Rs 5 Crore) Yes No
Vehicle Manufacturer Vehicle Model Registration Location Year of Manufacture Engine No. Chassis No. Colour of the Vehicle Chassis No. Colour Capacity(CCC) Chassis No. Relationstrip Chassis No. . Anne of Nominee and Age Chassis No. . Anne of Appointee (if nominee is a minor) Chassis No. . Anne of Appointee (if nominee is a minor) Chassis No. . Anne of Appointee and insurer's name Colour of the Vehicle registered in your name? 2.Do you have a Personal Accident cover for Num Univer of Policy for the vehicle registered in your name? Yes No If yes, the please provide policy number and insurer's name . Appearse a Provide vehicle registration no of each vehicle . Do yue have a Personal Accident cover for Nume
Arelide Manufacturer Registration Location Engine No. Chassis No. Courd of the Vehicle Calcur of the Norninee is a minor) Calcur of the Norninee Note: Personal Accident Cover for all vehicle types of Sum Insured of ₹15 Lakh 1. Do you have a Personal Accident Cover for all insurer's name Calcur of the vehicle registration no of each vehicle 2. Do you have a Personal Accident cover of Owner Driver under any other motor policy for the vehicle registred in your name? Yes No wish to opt for Sum Insured > Rs15 Lakh (Rs 16 Lakh - Rs 5 Crore) Yes No

HDFC ERGO General Insurance Company Limited. IRDAI Reg. No.146. CIN: U66030MH2007PLC177117. Registered & Corporate Office: 6th Floor, Leela Business Park, Andheri-Kurla Road, Andheri (East), Mumbai – 400 059. 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 Contact us- 022 6158 2020/ 022 6234 6234 or Visit Help Section on www.hdfcergo.com for policy copy/tax certificate/make changes/register & track claim or simply text "Hi" on what's app number 8169 500 500 for instant policy servicing. Compulsory Personal Accident (Owner-Driver) under Motor Insurance Policies - IRDAN125RP0010V01201819.

a) What is the age of the vehicle registered in your name?
b) Which is the RTO location where the vehicle is registered?
c) Do you have more than one vehicle registered in your name? Yes No
If yes, please provide vehicle registration no of each vehicle

d) How many of the vehicles registered in your name are insured with HDFC ERGO?

Please provide their policy number _

INSURED DECLARATION

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 HDFC ERGO General Insurance Company Limited

/We also declare that any additions or alterations are carried out after the submission of this proposal form then the same would be conveyed to the Insurance Company 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 hereby grant consent to Agent/Broker/Corporate Agent or any other licensed intermediary to share my KYC (Know your Customer) and customer due diligence information with HDFC ERGO General Insurance Company Limited for the purpose of my insurance proposal.

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.

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):

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. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ₹10 Lakhs.

Place	
Date D D M M Y Y Y Y	Signature of Proposer
	FOR OFFICE USE
Channel Partner Code	Branch Location

*Mandatory Information

Signature of Channel Partner