HDFC ERGO General Insurance Company Limited



PROPOSAL FORM - HOME SHIELD INSURANCE

 Please answer all ques The Liability of the Cor 	stions in BLOCK let npany does not cor	tters nmence unti	I this pro	posal ha	as bee	n acce	epted	by the	Com	npany	and I	Premiu	m ha	s bee	en paid	d.																		
Branch Code:			Agent	Code:						_																								
										PRO	POS	SER'S	DET	AILS	;																			
Name (Mr./Mrs./Ms.):																											Т	Т	Т	Τ	П			Т
	,	st Name)			.,								(Middle	e Nam	e)										_					(Las	t Nan	ne)	
Are you holding any HI	JFC ERGO Gene	ral Insuranc	e Home	Policy	/. If ye	s, ple	ase n	nentio	n the	Polic	y No	o:	_	Щ		<u>_</u>	Щ	_			<u>_</u>	<u>_</u>	Щ		\perp	\perp				_				
Communication Address:					_	Щ	+		4	+	Ļ		+	_	Ш	4	+	Ļ			4	+	+	+	Ш	Н	4	+	+	Ļ	Ш	4	+	+
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PAN No:					7						Da	ate of	Birtl	h:	D	D	M	M	/ Y	ΤΥ	Y					Ger	nder:	Mal	e/F	ema	ale			
Occupation: Service		Busin	ess			Self-E	mnlo	ved			Othe	ers						_	_	_														
Educational Qualification				_ duate/					sion	allv Q						Are	you	a Ter	nant					0	r Ov	wner	Occ	upan	ıt					
*Please provide correct										•			ing a	and p	remiu		•			ent.				_ `					_					
							DET	TAILS	OF	RESII	DEN'	TIAL F	PRO	PERT	ГҮ (В	UILD	ING)																
Residential Structure:	Flat /Apartme		depende		•																													
Address of the property	y (*) proposed for	Insurance (if differe	nt from	n addre	ess fo	or con	nmuni	catio	n):			+			+		+		+	+		_	+		井	\perp	Н	+	屵	井	+		<u> </u>
				+	$\frac{1}{1}$	\pm	$^{++}$		\perp		\pm	+	\pm			+		$^{+}$	Н	\pm	+	$\frac{\square}{\square}$	\pm	$^{+}$	Н	\pm	\pm	H	\pm	H	H	$^{+}$	Н	÷
City:			TT		T	$\overline{}$	Τ	$\overline{\Box}$	T			Pinco	ode:	П	T	Ť	Т						Мо	bile N	No:	П	Τ	T	Ť	T	П	T	Τ	Ť
Year of Construction:	YYYY		Built up	area	of resid	dence	· (**)	in Sa	Ft ·																									
	Bricks Ceme	ent R	cc	Stone		Mu	` _	Cla		W	/ood	. Any o	other	item	(nlea	SP SI	necif	<i>(</i>)																
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	les Concret	te RC		Asbes	Stos		orrug	gated		Cen	nent		Wo	00 <u> </u>	' '	hatc	nea																	
Hypothecation Details:Name of Financial In	atitution/Pank					_		_																										
Name of Branch and						+							\pm			+		\pm	\Box	\pm	\pm	\Box		_		$\overline{}$	_		_	_		_		_
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Loan Account No.																																		
NOTE: (*) Insurance o	f Building will be as	oplicable if p	roperty	is owne	ed by th	ne Pro	pose	er																										
. ,	age/outhouse/se								ise in	dicate	eacc	ording	ıly.																					
Any basement (if case	of independent bu	uilding) (Yes	s/No)																										_					
Security arrangements For Independent F	lousa																																	
•	guard on dedicate	ed basis (Ye	es/No)																															
Burglary alarm/	, ,				10.0	5 / 0	, ,,,	,																										
 24 hour security For Flats/Apartme 	/ guard on dedicate e nts	ed basis AN	D burgia	iry Alari	m/CC	IV (Y	es/No	0)																										
 24 hours securi 	ty guards at all ent	, ,	,																															
	ents inter-connect guards at all entry	-		-	-							to entr	v/ex	it aate	e and	with 6	each	othe	r (Y	es/No	0)													
Documents which the														•					. (-,													
 Approved Plan of co 	onstruction/extens	sion, license	for cons	struction	n whic	h is s	anctio	oned b	oy sta	atutory	/ autl	hority (Yes	/No) _																				
 The Building Comp Sales Deed, Title D 														,	roner	hı (Ve	e/No																	
 The latest property 																		,												_				_
 DevelopmentAgree 	ement; In cases wh	nere the flat/	/apartme	ent prop	osed	to be i	insure	ed is ir	rede	evelop	oed E	Building	g, (Y	es/No	p)											_	_	_	_	_				
									0	ETAI	LS F	OR IN	ISUI	RANC	Œ																			
Building: a) Basis of Building Sui	m Incurad: Agraca	d Value/ Pai	netatom	ont/Ind	lomnit	v\/alı	10							b) Bu	ilding	, Cun	n Inci	ırod:																
c) Escalation option i)	_	a value/ INCII	nsialenn	env mo	iennini	y vait	ic.							d) Es																				
Contenta																																		
Contents: a) Basis of Contents Su	um Insured: Reins	statement/Ir	ndemnity	y Value																														
b) Contents Sum Insur	ed Limit: (in case S	SI of Building	g on Agre	ed Val	ue 10%																													
c) Extension for higher	Sum Insured for C	ontents (Ye	es/ No). l	ır yes, F	rlease	Spec	ity the	e High	er Su	ım Ins	surec	Limit																						—
Valuables & Jewellery																																		
a) Sum Insured if any, fb) Extension of Worldw			Jeweller	v Yes	s/ No									((up to	max	of 20	0% o	fabo	ve co	onter	nts su	ım in	sure	d)									
2, Extended of World	00 Tollage 101			, 100	., 140																													

Sr. No.	Brief Description of It	em	Sum Insured (in ₹)		Invoice Copy attached (Y/N)	Details of Artist
a. **Cove	s Report is mandatory for this coverage wish to Cover the risk of Terrorism (Yes/No)** :is available for 1 year only silding occupied (Yes / No)	e.	b. Long Term Extensi	on (Yes/ No)		c. If Yes, Number of Years
II) Have yo	ou suffered any loss of or damage to the St rovide following details	tructure/Contents/Jewe	ellery & Valuables/ Works of Art,	Paintings, Curios	in the past? (irrespective of whether	insured or not) Yes/No
	Date of Occurrence	L	oss Details		Amount of Loss	Insurance details if any
			GEN	ERAL		
Note: In cas	the commencement date from which the e of building presently under construction y other insurance effected by you, or oth	n, the date of possessi	sired on will be the policy start date.	Buildings under o	construction are not covered.	ails.
tem Insured			Name of Insurance			
Policy Numb	er:		Period o	f insurance:		
	that this proposal form is for purchase o				nsurance against Burglary and Thef	ft of contents.
Extensions	/ Add on Covers: Please fill the rele	evant details agains	t each Add-on you want to	opt for:		
Sr. No.		Add on Cove	r		Sum Insured (in ₹)	Indemnity Period (whenever applicable)
1	Rent for alternative accommodation	1				
2	Hotel stay					
3	Loss of rent					
4	Expenses of shifting to alternate ac	commodation				
5	Emergency Purchases					
6	Keys and locks replacement cover					
7	Public liability cover					
8	Brokerage for Alternate accommod	ation				
9	Pedal cycle					
10	Portable electronic equipment cove	er				
	i) Extension of Worldwide Coverag	е			Yes/No	
11	Voluntary Higher Excess for Buildin	ng on Agreed Value B	asis*:			
	Please select from below:					
	10% of Building Sum Insured					
	15% of Building Sum Insured					
	20% of Building Sum Insured					
	25% of Building Sum Insured *Not applicable for Contents					
	Not applicable for Contents					
			Details of Portable Elect	ronic Equipme	nt (if opted)	
Brief Des	cription of item with make /model		Value		Year of Mfg.	Sr. No / Unique Identification No.
			BANK ACCO	UNT DETAILS		
Name of the	Bank Account Holder:					
Bank Accour	t No:		Name of Bank:			
Branch:	<u> </u>		Account: Savings	Current		
	U digit MICR code number of the bank a	and hranch annearing	on the cheque issued by the ba	ank):		

"I/We hereby declare and warrant that I am/We are the legal owner/owners/tenant (strike out whichever is not applicable) of the property proposed to be insured, being the subject matter of the insurance. In the event the Building is proposed to be insured under the Policy, I/We declare and warrant that I am / We are the legal owner/owners of the Building proposed to be insured and that I / We have all obtained and I am / We are in the possession of all the necessary approvals and permissions provided by the requisite authorities with respect to the Building. I/ We hereby declare that the Building proposed to be insured is legally constructed after obtaining all the necessary permissions and approvals and that construction of the Building has been completed in all respects and is currently being occupied by me i us or in the event the Building is occupied by my/our tenant, the same is in my/our legal dominion or actual or juridical possession". I/We agree that this declaration and the answers given above shall be the basis of the contract between me/us and the Company and shall be deemed to be incorporated in such contract. And that if any untrue statement be contained therein the said contract shall be absolutely null and void. I/We undertake to exercise all reasonable and ordinary precaution for the safety of the building/ contents(strike out whichever is not applicable) and I/We agree to accept the policy in the form issued by the Company subject to the terms exceptions and conditions prescribed therein or endorsed on the policy. I/we authorize HDFC ERGO General Insurance and associate partners to contact me via email, phone, SMS 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. Date: Signature of Proposer If the space above is insufficient for any answer please continue on separate sheet and attach hereto. The Proposer understands that if a proposal has been completed for this insurance, then the statements and all particulars provided in such proposal, and any attachments thereto, are material to the insurance company's decision to provide this insurance. The applicant further understands that the insurance company will, in its sole discretion, issue this Policy in reliance upon the truth of such statements and particulars. PROHIBITION OF REBATES (Section 41 of Insurance Act 1938) 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 rebate except such rebate as may be allowed In accordance with the published prospectus or tables of the insurer. Any person making default in complying with the provisions of this Section shall be punishable with fine which may extend to ₹10 lakhs. Note: The liability of the Company does not commence until the acceptance of the proposal has been formally intimated by the Company and full premium has been realized by the Company. To be completed by anyone who assists the applicant in completing this proposal: I certify that I have explained the contents of this proposal to the applicant and that the applicant and that the applicant fully understands the contents of the proposal. I recorded the applicant's replies to the questions contained in this proposal as per the information provided by the applicant. I read these replies aloud to the applicant, who fully understands them and confirms that they are accurate. Name: Address: Signature Date: ACKNOWLEDGEMENT (Please retain this counterfoil for your records.) (On behalf of HDFC ERGO General Insurance Company Limited) Received from Mr./Mrs./Ms. or M/s.: Cheque No. dated drawn on Bank for a sum of Rs. towards premium for

subject to realization of cheque.

Note: The Liability of the Company does not commence until this proposal has been accepted by the Company and Premium has been paid

Home Insurance from the desired Commencement date

Agent's Name/Address & Signature of/on behalf of Agent