

Note: In the event of more than one Sign Board , you may submit detailed information in the tabular format as an annexure to this Form.

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 Work of Art 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, 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.

Place:

D	D	M	M	Y	Y	Y	Y
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Signature and Name of the Proposer

Amount (Rs.) _____ GST No. _____
Premium including tax (Rs.) _____ (Rupees in words) _____

Cheque <input type="checkbox"/> NEFT <input type="checkbox"/>		
Instrument No. <input type="text"/>	Instrument Date: <input type="text"/>	Bank Account No. <input type="text"/>
Branch Name & Address: <input type="text"/>		
<input type="text"/>		
IFSC Code <input type="text"/>	MICR Code <input type="text"/>	

Bank details for refund of premium in case of cancellation to be considered as above Yes No

If NO, please provide additional bank details in below provided space:

Bank Account No.

Branch Name & Address:

IFSC Code MICR Code

SOURCES OF FUND

Salary Business Other (Please Specify)

Note:

1. Please provide a cancelled copy of cheque of your bank account.

2.The Company will not be responsible in case of non-credit or delay in processing of payout due to incomplete/incorrect information provided by the customer. Please ensure that you provide accurate details to 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.

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 or 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 tables of the Insurer.

(2) Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to Ten lakh Rupees.

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.

FRAUD WARNING

This policy shall be voidable at the option of the HDFC ERGO 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 any other person, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, Information concerning any fact material thereto, 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.

Name

Date

Signature of the Insured

Capacity of Signatory