

Title Insurance - Proposal Form

- Please answer all questions in full and if not applicable insert "N/A".
- This Proposal forms part of the Policy Documents and helps us to assess your insurance requirements. Each question contributes to our decision to offer you insurance and the type of insurance we can provide to you, including the pricing. We rely on the information and documents you give us to provide you with insurance cover. Therefore, all questions must be answered truthfully and in full. The information you give to us will be treated in complete confidence.
- If you have insufficient space to complete any of your answers, please attach a separate signed and dated sheet and identify the question number concerned.
- The liability of the Company does not commence until the acceptance of the proposal has been formally intimated to the insured and full premium has been realized by the Company

PROPERTY ADDRESS	
STATE	
DEVELOPED VALUE	
PLANNING PERMISSION / BUILDING PERMIT DETAILS	
INSURED DETAILS	
LAW FIRM DETAILS	• Copy of Report on Title to be attached
LENDER DETAILS	
DETAILS OF KNOWN DEFECTS IN TITLE	
CONFIRMATION OF NO THIRD PARTY CHALLENGES OR CONTENTIOUS ISSUES RELATING TO TITLE OR PLANNING	
CONFIRMATION THAT NO APPROACHES MADE TO ANY THIRD PARTIES WHICH ARE LIKELY TO CHALLENGE THE TITLE TO THE PROPERTY	
ANY OTHER RELEVANT INFORMATION	
PROJECT START DATE	
COMMENCEMENT DATE OF POLICY	
EXPIRY DATE OF POLICY	

PREMIUM DETAILS

Mode of Premium Received

Cash : _____ Cheque, Incase premium paid through Cheque, provide Instrument Number: _____

Demand Draft, Incase premium paid through DD, provide Instrument Number : _____

Net Banking: _____ Amount: _____ Rupees (INR): _____

DETAILS OF BANK ACCOUNT

Name of Bank Account Holder		
Bank Account No.		
Name of Bank:		Branch:
MCR Code:		IFSC Code:
Account:	Saving	
	Current	Current

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, it's mandatory that all payments made to the insured only through electronic mode.

Aadhar card details of Authorised Signatory: _____

PAN card details of Insured: _____

SOURCE OF FUND

☐ Salary ☐ Business ☐ Other

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

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.

ANTI REBATING WARNING

Section 41 of the Insurance Act 1938

- (i) 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.
- (ii) Any person making default in complying with the provisions of this Section shall be punishable with fine which may extend to Ten Lakhs rupees

FRAUD WARNING

This policy shall be voidable at the option of the HDFC ERGO in the event of mis-representation, mis-description or nondisclosure 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.

DECLARATION

We declare that the information given is, to the best of our knowledge and belief, correct and that we are not aware of any circumstances that we have not disclosed to you which might influence your assessment of and willingness to accept the risk.

We agree that, if you issue a policy to us, this proposal shall form the basis of, and be incorporated in, such policy.

We agree that the HDFC ERGO General Insurance Company Ltd. shall have the right to retain and disseminate the information provided by me/us to any of its service provider, Promoters or Group Companies.

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:

Place: _____

Authorized stamp and signature

Name of authorized signatory in block letters