HDFC ERGO General Insurance Company Limited

MOTOR INSURANCE (COMMERCIAL VEHICLES-OTHER THAN MOTOR TRADE INTERNAL RISKS) - PROPOSAL FORM



1

(Please fill in CAPITALS only) LG Code		Branch Code	
	CUSTOMER INFORM		
For Individual Customers only Name of Insured*			
Date of Birth D D M Y Y Y (First N)	lame)	(Middle Name)	(Last Name)
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.*		Mobile*	
	thar Card		PAN
	PAYMENT DETA	IS	
Cheque / Instrument No.			
Branch Name / Location:	Amount:	M Y Y Y Bank Name	
	SOURCES OF FL	IND	
Salary Business Other (Please Specify)			
	BANK ACCOUNT DE	TAILS	
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)	
*As per the IRDAI, its mandatory that all payments made to the in-	RISK INFORMAT	ION	
Vehicle Manufacturer*		Model*	
Registration Location*		Manufacture*	
Engine No.*	Chassi		
Type of Body*	Chassi	f Model*	
Vehicle with load body Chassis with cabin	Chassis with FES Fuel Ty		Diesel CNG LPG
Gross Vehicle Weight (GVW)*		of the vehicle	
Max licensed Capacity (incl Driver)*		Capacity (CC)*	
Insured Declared Value of the Vehicle* Non-Electrical Accessories fitted to the Vehicle	Electrical & Electronic Accessories fitted to the Vehicle	Trailer Value of	CNG / LPG Kit Total Value*
₹ ₹ ₹ ₹		₹	₹
Type of Cover required Package Policy			
	ADDITIONAL INFOR	MATION	
Registration No.*	Date of R	egistration* DDMMYYY	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	YYY	
Current Period of Insurance* From D D M M Y		YYY	
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 b			
Whether the use of the vehicle is limited to own premises?			YN
Whether the use of the vehicle is limited to confined site? (Applicable to	Goods-carrying vehicles)		YN
Do you wish to cover lamps tryes / tubes mudguards, bonnet/side parts,			YN
Do you wish to cover against over turning (Applicable for mobile cranes,	drill rigs, mobile plants, excavators, navies	s, shovels, grabs, rippers)	YN
Is the vehicle owned / hired /leased / permitted by the state transport aut	horities for the purpose of their operation f	or the public transport (Applicable for passeng	er carrying vehicles)
Is the vehicle proposed for insurance under: Hire-Purchase Lease Agree	ment	Hypothecation Agreement	
If Yes, give the name of the concerned parties			

HDFC ERGO General Insurance Company Limited. (Formerly HDFC General Insurance Limited from Sept, 14, 2016 and L&T General Insurance Company Limited upto Sept, 13, 2016). CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165-166 Backbay Reclamation, H. T. Parekh Marg, Churchgate, Mumbai - 400 020. Customer Service Address: D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai - 400 078. Toll-free: 1800 2 700 700 (Accessible from India only) | Fax: 91 22 66383699 | care@hdfcergo.com | www.hdfcergo.com. UIN: Motor Insurance - IRDAN125P0005V01200203. IRDAI Reg. No. 146.

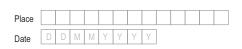
				COVERAGE INFORMATION	N			
Personal Accident Cover for Owner Driver is compulsory in the Package policies. Please give details of nomination:								
(a) Name of Nominee and Age								
(b) Relationship								
(c) N	ame of Appointee (if nominee is a N	/linor)						
. ,	elationship to the Nominee							
Note			1 (= 0 /					
	ersonal Accident Cover for Owner d			ed by a Company, a Partnership firm or	a cimilar body con	acrata or whore the ow	nor drivor	
	not hold an effective driving license	8		eu by a Company, a Farthership inth or	a similar bouy cor			
	ou wish to include the following PA							
· · ·	named			No. of persons				
_	id Driver/Conductor/Cleaner		· · ·			CSI opted for: ₹.		
		ad CCI anted for	No. of paid drivers			CSI opted for: ₹ mum CSI (Capital Sum Insured) per person is ₹2 lakhs		
In ca	se of named persons, give name ar					Insured) per person is <2 lakins		
	Name	CSI opted for: ₹		Nominee	Rel	ationship		
							-	
]	
The p	oolicy provides Third Party Property	Damage (TPPD) of ₹1 Lakh (two-wheelers	s) and ₹7.5 Lakhs (other class of vehicle	es)			
	ou wish to opt for statutory TPPD lia	ability coverage of ₹6000/- only	/?	Yes	No			
_	Liability	No. of P	ersons					
Dri	ver / Conductor / Cleaner							
Ot	ner Employee							
No	n-fare paying passengers							
				MOTOR ADD-ON COVERS				
Do yo	ou wish to opt for higher deductible	Yes Please	Specify ₹					
				TERMS AND CONDITIONS				
I/We	hereby declare that the statements	made by me/us in this Proposa	Form are tru			ov agree that this declar	ation shall form the basis of the contract between	
me/u	s and HDFC ERGO General Insural	nce Company Ltd. I/We also de	clare that, if	any addition or alteration are carried out a een fully explained to me/us and that I/we	afer the submissior	n of this proposal form,	then the same would be conveyed to the insurers	
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.	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 afer 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 from 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 under the 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 endeavor to procure the renewal notice and pass on the same to HDFC ERGO General Insurance immediately upon the receipt of such renewal notice.							
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.								

Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ₹10 Lakhs. 2.

Mode of Payment : Cheque & 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-representaton, mis-descripton or non-disclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other persons, 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 act which will render the policy voidable at the Company's sole discretion and result in a denial of insurance benefits.

I agree to receive a one pager policy document.

	I hereby	/ declare	that I	do not	hold an	effective	drivina	license



Signature of Proposer

FOR OFFICE USE

Branch Location

Channel Partner Code

*Mandatory Information

Signature of Channel Partner