HDFC ERGO General Insurance Company Limited



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PERSONAL EFFECTS INSURANCE - PROPOSAL FORM

(All fields are mandatory a	and fill in CAPITALS only)						
		GENERAL I	NFORMATION				
Name of the Proposer							
	(First N	lame)	(Middle Name)		(Last Name)		
Address of the Proposer i full with Pincode	n						
Phone No.		Fax:		Mobile:			
Email ID							
Occupation/business							
Basis of Sum Insured – Reinstatment Basis or Market Value. PI specify							
Is Valuation report for the	items available? If yes, the	n please attach the sa	me.		Yes No		
If not, then how the SI pro	posed is being arrived at?						
Condition of equipment -	Is the equipment maintained	d in accordance with th	ne manufacturer's instructio	ns?	Yes No		
 a) Have you suffered any to equipments in the pa If so, give full particular 	ast?	Item Value Date of loss					
b) What precautions have	been adopted by you to pro	event such occurrance	?				
	pect of All Risks Insurance						
a) Declined your proposal					Yes No		
b) Cancelled or refused to					Yes No		
c) Accepted your proposa	I on special terms and cond	litions.			Yes No		
If answer to any of the ab	ove point(s) is yes then plea	ase specify the details					
	& mechanical Breakdown con a case, the same is propose						
Whether cover is also req	uired outside India?						
Past Insurance / Claims d	etails (minimum for last 3 ye	ears)					
Is there any other materia this proposal which must	l information relevant to the be known by the Company?	acceptance of					
		PROPERTY T	O BE INSURED				
Sr. Description of the property (as Jewellery, Watches, Cameras, No. Binoculars etc).			Identification Make/Model/ Serial Nos./ Mfg Year / Weight in Gms	Sum Insured (in ₹)	Sum Insured Basis – Reinstatement or Market Value		
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Note: Please use a separate sheet if the space is insufficient

Signing this form does not bind the Proposer to complete the insurance, but it is agreed that this form shall be the basis of the contract should a policy be issued

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(All fields are mandatory and fill in CAPITALS only)



Declaration :

I / We have disclosed all the facts, which could influence the acceptance of this Proposal or the terms to be approved, & the above facts, documents, statements shall be the basis of the contract between me/us and HDFC ERGO General Insurance Company Limited. The Proposer agrees that the receipt of the Proposal Form by HDFC ERGO General Insurance Company Limited along with the premium payment does not tantamount to the acceptance of the Proposal for insurance by HDFC ERGO General Insurance Company Limited and does not result in a concluded contract of insurance. The acceptance of the Proposal for insurance shall be at the Company's sole and absolute discretion. In the event of acceptance of the Proposal for insurance Company Limited, such acceptance shall be specifically intimated to the Proposer by HDFC ERGO General Insurance Company Limited along with the date from which the insurance Cover shall become effective. HDFC ERGO General Insurance Company Limited shall not be liable for any claim in respect of an event giving rise to a claim covered under the Policy of Insurance that has occurred prior to policy issuance (Your proposal form will be considered after HDFC ERGO General Insurance Company Limited receives premium payment).

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 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. Insurance is the subject matter of the solicitation.

DECLARATION & WARRANTY ON BEHALF OF ALL PERSONS PROPOSED TO BE INSURED

I/We hereby understand, declare, consent and authorize the Company to use financial information, as provided to the Company for underwriting the risk.

I / We agree that if this insurance is completed the protections and/or safeguards mentioned above shall not be withdrawn or varied to the detriment of the interests of the Company without their consent and additional premiums if any will be remitted.

Place:										
Date:	D	D	M	M	Y	Y	Y	Y		

Signature of the Proposer

N.B. Fill the form in Block Letters. If the above space is not sufficient for answer please continue on a separate sheet and attach hereto.

The liability of the Company does not commence until the Company has accepted this proposal and the Premium received

SECTION 41 PROHIBITION OF REBATES

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 of the commission payable or any rebate of the premium shown in 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.

Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ₹10 Lakhs.

PREMIUM RECEIPT DETAILS					
Receipt No.		Receipt Date:			
Amount Received in ₹	_ in Words				
Bank Account No.					
Instrument No.	Instrument Date :				
Sources of Fund					
Salary Business Other	(Please Specify)				

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 realised by the Company.