

FIRE AND SPECIAL PERILS INSURANCE - PROPOSAL FORM

(Please fill in CAPITALS only)

CUSTOMER INFORMATION*

Customers PAN No.

Name of the Insured (Full Registered Name)

Address of the Insured: Building Name/ Block No.

Street Name Locality

Floor No. City Pincode State

Tel. Mobile Fax No.

STD Code

Email

Name of Contact Person

Business of Insured Code

Paid up Capital ☐ Up to Rs. 15 Crores ☐ Between Rs. 15 and 25 Crores ☐ Over Rs. 25 Crores ☐ NA

Intermediary Details ☐ Broker ☐ Agent ☐ Dealer ☐ Direct ☐ Banc assurance

Intermediary Code Intermediary Name

Client Type ☐ SME* ☐ Corporate* ☐ Government ☐ PSU ☐ Individual ☐ Partnership ☐ Others

Period of Insurance From To

PREMIUM DETAILSAmount Rs. Rupees **SOURCES OF FUND**Salary ☐ Business ☐ Other ☐ (Please Specify) **BANK ACCOUNT DETAILS**

Name of the Bank Account Holder

Bank Account No. Account: Savings ☐ Current ☐

Name of Bank Branch

MICR Code 8 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)

I wish: ☐ Any refund due on the premium payment / any payment/claims will be directly credited to my aforesaid Bank Account.*

*As per the IRDA, its mandatory that all payments made to the insured only through electronic mode.

COVERAGE INFORMATION*

Period of Insurance From To

Financial Interest: ☐ Yes ☐ No If yes, pls specify Name

Basis of Valuation for Building, P&M, Contents: ☐ Market Value ☐ Reinstatement Value

Details of Add on covers along with their Sum Insured:

1) Architects Fees	☐ Yes ☐ No	Value
2) Removal of Debris	☐ Yes ☐ No	Value
3) Spontaneous Combustion	☐ Yes ☐ No	Value
4) Additional Rent	☐ Yes ☐ No	Value
5) Impact Damage	☐ Yes ☐ No	Value
6) Earthquake	☐ Yes ☐ No	
7) Terrorism	☐ Yes ☐ No	
8) Other Covers required		Value
9) Other Covers required		Value
10) Other Covers required		Value
11) Other Covers required		Value

Perils to be deleted:

☐ RSMD (Riot, Strike, Malicious Damage group of Perils) ☐ STFI (Storm, Tempest, Flood, Inundation group of Perils)Escalation Required? ☐ Yes ☐ No If Yes, Specify %age 5% ☐ 10% ☐ Other %Plinth & Foundation to be covered for Fire? ☐ Yes ☐ NoSpecial Coverage - ☐ Floater Basis ☐ Declaration Basis ☐ Floater Declaration BasisVoluntary Deductible Option ☐ Yes ☐ No

Voluntary deductible will be 5% of Claim Amount Subject to a minimum of Rs.10 Lacs for AOG Perils & Rs 5 Lacs for Other Perils

RISK/OCCUPANCY INFORMATION

LOCATION PARTICULARS: (Please use additional sheet for more than 1 locations)

Address of the Insured : Building Name / Block No.

Street Name Locality

Floor No. City Pincode State

Tel. STD Code Mobile Fax No.

Email

SUM INSURED PARTICULARS:

Building	Value	Stock In Process	Value
Plinth & Foundation	Value	Stocks	Value
Plant & Machinery	Value	Stocks in Open	Value
Electrical Installation	Value	Others (pls specify)	Value
Furniture, Fixture and fittings	Value	TOTAL SUM INSURED	Value

RISK DETAILS

1. Occupancy Code

2. Construction : Roofs ☐ RCC ☐ ACC ☐ Metallic ☐ Combustible ☐ Walls ☐ Brick ☐ RCC ☐ Others ☐

3. Age of Occupancy ☐ Upto 5 years ☐ 5 – 10 years ☐ More than 10 years

4. Use of Flammable Materials ☐ No ☐ Yes, If Yes give details

5. Fire Protection ☐ Yes ☐ No
If Yes specify: Hand appliances ☐ Sprinkler ☐ Hydrant ☐ Smoke detectors ☐

6. Whether 24 X 7 security is available? ☐ Yes ☐ No

7. If Basement exists, specify kind of goods stored therein, percentage of asset value in Basement, No. of Basements

8. Is the risk located in a low lying area or is the premises near to any sea, lake, river ? ☐ Yes ☐ No
If yes, pls specify the nearness distance

9. History of Past Floods, If any

10. Previous Loss / Claims History till date –
No. of claims in last 3 Yrs ☐ Nil ☐ 1 to 5 ☐ More than 5
Total claim amount including outstanding claims in past 5 Yrs.
Type of claims ☐ Fire ☐ STFI ☐ RSMD ☐ Others, Pls Specify

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 hereby also understand, declare, consent and authorize the Company that the Company shall have right to retain the aforementioned information and disseminate the same to its service provider(s) for providing services related to insurance.

I/ We hereby declare that the statements made by me / us in this Proposal Form are true to the best of my /our knowledge and belief and I / We hereby agree that this declaration shall form the basis of the contract between me / us and the Insurer – M/S HDFC ERGO General Insurance Company Ltd.

If any additions or alterations are carried out in the risk proposed after the submission of this proposal form then the same should be conveyed to the insurers immediately.

Place

Date

Signature of Proposer

Sr. No.	Location	Construction		Fire Protection	Occupancy	Description	Sum Insured
		Walls	Roof				
						Building	
						Plant & Machinery	
						Stocks	
						Stocks In Process	
						Others	
						Total	
						Building	
						Plant & Machinery	
						Stocks	
						Stocks In Process	
						Others	
						Total	
						Building	
						Plant & Machinery	
						Stocks	
						Stocks In Process	
						Others	
						Total	
						Building	
						Plant & Machinery	
						Stocks	
						Stocks In Process	
						Others	
						Total	

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 Rs 500/- (Rupees Five Hundred)