

**SRI LANKA INSURANCE CORPORATION LTD.**  
**MOTOR INSURANCE PROPOSAL FORM BANCASSURANCE GI**  
 (All types of Vehicles)



1. Salutation :- Mr/ Mrs /Miss /Ms /Hon /Dr /Prof /Rev /Ven.
2. Date of Birth : .....
3. Name of the Insured :- .....
4. National Identity Card Number/ Business Registration. No :- ..... 5. Age:-.....
6. Postal Address :- ..... 7. City:-.....
8. District:- ..... 9. Province :- .....
10. Occupation :- ..... 11. Employer / Business Name :-.....
12. Fixed Line Number :- ..... 13. Mobile Number :- .....
14. Email :- ..... 15. VAT Registration Number :- .....
16. Reg. Number of the Vehicle :- ..... 23. Copy of latest Luxury tax payment receipt & Year :-.....
17. Make & Model :- ..... 24. Current market value of the vehicle :-.....
18. Chassis Number :- ..... 25. Vehicle Type :- Hybrid /Non Hybrid /Electric /Other
19. Engine No :- ..... 26. Type of fuel :- Petrol /Diesel /Gas /Electronic /Solar
20. Year of Manufacture :- ..... 27. Seating Capacity including Driver :-.....
21. Engine Capacity :- ..... 28. Vehicle status :- Brand New /Re-conditioned /Locally Assembled
22. Date of 1st Registration :- .....
29. Vehicle Usage :- Private / Hiring / Rent A Car
30. Vehicle Type :- Car / Van / Lorry / Threewheel / Trailer / Other(Specify).....
31. What are the accessories and extra fittings including in the estimated value of car ? .....

32. Additional Covers Required. Please Tick ...(☒)....

- |   |  |
|---|--|
| a) Special windscreen cover (Amount) .....  | g) Rent a car Cover .....  |
| b) Flood and Natural Disaster Cover .....   | h) Cover for Excluded Items (Hiring & Rent only) .....             |
| c) Extended Air bag cover (Total value) .....   | i) Enhance 3 <sup>rd</sup> party property Cover ( Max. limit)..... |
| d) Strike, Riot & Civil commotion Cover .....   | j) Legal Liability ( Max. limit) .....                             |
| e) Terrorism Cover .....  | k) Lerner driver cover(Excess on E.E.C Rs. 2,500) .....            |
| f) Enhanced towing charges (Amount) .....   | l) Other Covers.....   |
| k) Workmen's compensation Insurance paid to & number Driver <input type="checkbox"/> ...../ Attendant <input type="checkbox"/> ...../ Cleaner <input type="checkbox"/> ...../ Labour <input type="checkbox"/> ..... |  |

33. Any accidents /losses during last 3 years in connection with you .....

34. Personal Accident benefits to Insured ☐ ....., Passengers ☐ ....., Person diving other than the insured or paid driver ☐ ....., any named person or driver ☐ .....

35. Is there any financial assignment (Lease/Hire Purchase / Loan)?

If Yes, What is the

a) Name of the Assignee .....

b) Branch of the Assignee .....

36. Business Verification / Identification Code

a) Bank / Financial Institutions agency Code :- .....

b) SLIC No :-.....

I/We warrant that the above statements and particulars are true and I/We have not suppressed or mis-stated any material fact. I/we undertake that the motor car to be insured will be maintained in good condition and shall not be driven by any person who to my/our knowledge has been refused any Motor Car Insurance or continuance there of and I/We hereby agree that this declaration shall be promissory and shall form the basis of the contract between me/us and SRI LANKA INSURANCE CORPORATION LTD., and I am / we are willing to accept a policy subject to the terms,exceptions and conditions prescribed by the Company therein and to pay the Premium thereon.

.....  
Date

.....  
Signature of Proposer