Proposer Details Details

Reference Number: 20112020163039			
Proposer's Full Name :	Email:		
AGIL	agency@agency.com		
Address :	Fax No:		
asdaSD	1234567890		
PinCode :	Occupation/Business :		
123456	agency dealer		
Telephone No:	Type Of Cover:		
1234567890	Package Policy		
Vehic	cle Details		
Registration No:	Make of Vehicle:		
	MCWG		
Date Of Registration :	Type of Manufacture : Type of Model :		
DD-MM-YYYY	Honda		
Registering Authority & Location:	Year Of Manufacturer :		
	2020		
Chassis No:	Vehicle Fuel Type :		
SACC2R32R32R32R32	Petrol		
Engine No:	Vehicle Type :		
FW45RFE34R	Commercial		
Cubic Capacity:	Vehicle Sub Type :		
0	Non-two wheeler		
Seating Capacity including driver:	Vehicle CategorType :		
8	4 wheeler and higher(more than 6 passengers) -C		
Vehicle Weight (kgs) :	Date Of Manufacture :		

0.00

Other Details

Whether the vehicle is driven by non-conventional source of power(if Yes, Please give details) Permited by the concerned RTA	○Yes	No
Whether the vehicle is used for driving tutions	○Yes	No
Whether extension of geographical area to the following countries required ?	Yes	No
Whether the use of vehicle is limited to your own premises?	○Yes	No
Whether use of vehicle is used for commercial purpose?	○Yes	No
Whether the vehicle belongs to foreign embassy/consulate?	○Yes	No
Whether the car is certified as Vintage Car and Classic car Club of India?	○Yes	No
Whether the vehicle is designed for use of Blind/Handicaped/Mentally Challenged persons and duly endorsed as such by RTA.	○Yes	No
Whether the vehicle is fitted with fibre glass tank?	○Yes	No
Whether the vehicle is fitted with bi-fuel system such as petrol/diesl and CNG/LPG permitted by concerned RTA?	○Yes	No
Do you wish to opt for higher deductible over and above the Compulsory deductible (Rs. 50 for two wheelers and Rs. 500/- Rs. 1000/ - for private cars)	Yes	No
Are you a member of Automobile Association of India?	○Yes	No
Do you wish to cover Legal Liability to ?	○Yes	No
Are you etitled to No Clai Bonus? If yes, Please submit Proof thereof	○Yes	No
Liability to Third Parties? The policy provides Third Party propertt Damage (TPPD) of Rs.1Lakh (Two Wheelers) and Rs. 7.5Lakhs (Private Cars). Do you wish to restrict the above the limits to statutory TPPD Liability, Limit of Rs. 6000/- only?	○Yes	No
Whether higher towing charges is opted over and above the limit prescribed in the policy?	○Yes	No
Whether higher towing charges is opted over and above the limit prescribed in the policy? Do you wish to include Personal Accident (P.A.)Cover for name and persons?		NoNo
	0	

Insured's Declared value of Vehicle Rs.	1213132.00	
Non-electrical accessories fitted to the vehicle Rs.		
Electrical and electronic accessories fitted to the vehicle Rs.		
Side car (Two wheeler Trailer(Pvt cars)) Rs.		
Value of CNG / LPG KIT Rs.		
Total Purchase Value	1152475.00	
Previous	History Details	
a. Date of purchase of the vehicle by the proposer		
b. Whether the vehicle was New or SecondHand at the time of purchase	f •New Second	
c. Will the vehicle be used exclusively for		
A. Private, Social, Domestic, Pleaasure & Professional purposes	○Yes No	
B. Carriage of goods other than samples or personal luggage	○Yes •No	
d. Is the vehicle is in good condition ?	○Yes No	
If'no' please give full details		
e. Name and address of the previous insurer		
f. Previous Policy Number		
Period of insurance from:		
g. Type Of Cover:		

i. Has any insurance company ever :

a). Declined the proposal	○Yes	● No
b) Cancelled and refused to renew	○Yes	● No
c) Imposed special condition of excess	○Yes	● No
31. Details of Hire Purchase / Hypothecation / Lease a. If the vehicle proposed for insurance :		
Under Hire Purchase	Yes	●No
Under Lease agreement	Yes	●No
Under Hypothecation Agreement	○Yes	●No
33. Any other relevant information		

Declaration

I/We here by declare that the statement made by me / us in this proposal form are true to the best of my /our knowledge and belief and I/We here by agree that this declaration shall from the basis of the contact between me / us and the Karanataka Government Insurance Department.

I/We here by declare that any additions or alterations are carried out after the submission of this proposal form, the same would be conveyed to the insureres immediately. Received a copy of the proposal form duly filled and signed by me/ on my behalf

I agree to the terms and condition mentioned above.