

Dear RAJU V,

It is our privilege to welcome you to the Bajaj Allianz General Insurance family.

We thank you for choosing Bajaj Allianz for your Insurance needs. We are one of India's leading general insurance companies with iAAA rating from ICRA for the last ten consecutive years indicating the company's high claims paying ability and fundamentally strong position in the industry. Please be assured that you have made the right choice by choosing us and we will stand by you in your hour of need.

To provide you with the best customer experience, here are a few important things for you to note:

Policy Details	
Policy Number	OG-18-9906-1802-00205629
Policy Type	Motor Two Wheeler
Name of Insured	RAJU V
Address	H.NO.C3-513, Sri Vijayalakshmi Nilayam Near Chandanagar MMTS HYDERABAD TELAN- GANA



Please find enclosed the policy schedule. We wish to inform you that the policy issued is based on the information submitted in the proposal form as well as the acceptance of the terms and conditions, and this will be verified at the time of filing of claim. Request you to kindly go through the same once again and in case of any disagreement, discrepancy or clarifications - let us know within 15 days of the letter date. For policy wordings containing detailed terms, conditions and exclusions of your insurance coverage, you will receive a hard copy on your correspondence address.

Once again, we welcome you to the Bajaj Allianz family and look forward to a long association with you.

With Warm Regards,

Sourabh Chatterjee

Sourabh Chatterjee President-Direct Sales and Marketing, Head-Web Sales

Stay Connected





















Proposal Form For Motor Two Wheeler Package Policy

Personal Information		Policy Address		
First Name	RAJU	House No. / Building Name / Flat No	H.NO.C3-513, Sri Vijayalakshmi Nilayam	
Middle Name		Street / Locality / Land- mark	Near Chandanagar MMTS	
Surname	V	State	TELANGANA	
Email Address	raju.theone@gmail.com	City	HYDERABAD	
Mobile Number	9963179663	Area	CHANDANAGAR	
PAN Number	NA	Pincode	500050	
Mailing Address				
House No. / Building Name / Flat No	H.NO.C3-513, Sri Vijayalakshmi Nilayam	Street / Locality / Land- mark	Near Chandanagar MMTS	
State	TELANGANA	City	HYDERABAD	
Area	CHANDANAGAR	Pincode	500050	
Vehicle Information				
Vehicle Reg No	AP09CB7383	PA Covered for Owner Driver		
Policy Start Date	22-FEB-2018	PA cover for co- passengers worth	0	
Vehical Make	YAMAHA	Vehicle IDV/Sum Insured	27916	
Vehical Model	FZS	Vehicle under a bank loan	NO	
Vehical Subtype	STD	Bank Name	NA	
Year Of Manufacture	2011	Engine Number	21C6032349	
Fuel Type	Petrol	Chassis Number	ME121C061B2032245	
Value Of Elec Accessories	0	Previous NCB	50%	
Value Of Non-elec Accessories	0	NCB Offered	50%	
Value Of CNG Kit		Voluntary Excess	0	
Previous Policy Number	1-CZF4W6L	Previous Policy Expiry Date	18-FEB-2018	
Previous Insurer	Iffco Tokio General Insurance Company Limited.			
Was there any ownership	change in your existing policy?	N		
No. of claims in your existing policy		0		
No. of claims in your last year's policy		0		

Declaration:

I/We, the undersigned hereby declare and warrant that the insurance policy is issued by Bajaj Allianz General Insurance Company Ltd [Company] subject to the declarations, warranties, statements and particulars given in this proposal form during the process of my/our online purchase through web. The statements and particulars given in this proposal form are complete, true and accurate to the best of my/our personal knowledge and belief. I/we have understood the terms and conditions to the contract and agree that the statements and particulars given in this proposal form shall be held to be promissory and shall be the basis of the insurance contract between me/us and the Company and the Company shall have no liability under the insurance contract if it is found that any of the statements or particulars or declarations in this proposal form or other documents are incorrect and or untrue or suppressed any information or provided misleading or false information in any respect on any matter to the grant of a cover. I/we will accept the usual conditions and form of the policy prescribed and issued by Company.I/We declare that I have read the policy schedule and the rate of NCB claimed by me/ us is correct and that no claim has arisen in the expiring policy period. I/We further undertake that if this declaration is found to be incorrect, all benefits under the policy will stand forfeited with no liability to refund the premium. I hereby agree to confirm within 7 days in case of any objection or disagreement with the above.

Statutory Warning:

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 prospectus or tables of the insurer.

Date: 19-FEB-18



Bajaj Finserv Building 1st Floor Behind Weikfield IT-Park Viman Nagar Pune 411014 1800-209-0144

Receipt

Receipt Number: 9906-01671500

Receipt Date: 19-FEB-18

Business Channel: WS

Received with Thanks from: RAJU V

(Customer ID: 113569969) a total sum of rupees only.

Instrument Type	Instrument Date	Amount
CREDIT CARD 19-FEB-18		1311
Total Amount Received for this Po	1311	

Receiving the Premium amount and issuance of this receipt does not automatically amount to underwriting risk by Bajaj Allianz General Insurance Company Ltd. Our assuming risk arises only after Proposer completing all required formalities for our taking underwriting call, upon which our Company specifically takes underwriting call to assume risk and accordingly informs the Proposer by way of issuing Policy Schedule or Cover Note, but not before. Our standard terms and conditions shall apply upon our assuming risk.

Please note: This is an electronically generated receipt and does not require signature.

Regd Office: GE Plaza, Airport Road, Yerwada, Pune - 411 006



Certificate Cum Policy Schedule

Policy Details				
Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc.	Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar Pune-411014 Ph:1800-209-0144			
Cover Note No.:	Policy Issued On: 19-Feb-2018 19:35:46			
Policy Number:	OG-18-9906-1802-00205629	Product:	Two Wheeler - Package Policy	
Period of Insurance:	From: 22-Feb-2018, 00:00 To: 21-Feb-2019 Midnight			
Insured Name:	RAJU V Zone: A			
Insured Address:	H.NO.C3-513, Sri Vijayalakshmi Nilayam, Near Chandanagar MMTS , , HYDERABAD, TELAN-GANA-500050			
Policy Holder ID:	113569969 Intermediary: 55555557 - WEB SALES			
Hypothecation:	Sub Imd Code: 9906			
GSTIN / UIN	NA			
State Code / Name	36 - Telangana			

Vehicle Details				
Registartion No.	Make	Model	Sub Type	Year Of Mfg.
AP09CB7383	YAMAHA	FZS	STD	2011
Seat Cap.	CC	CNG/LPG Unit	Elec.Acc	Non- Elec. Acc.
2	153	0	0	0
Vehicle IDV	Chassis No.	Engine No.	Total Insured D	eclared Value
27916	ME121C061B2032245	21C6032349	279	16

Schedule Of Premium	
A. Own Damage	
Total Own Damage Premium:	174
B. Liability	
Basic Third Party Liability	887
PA Cover for Owner-Driver of Rs.100000	50
PA Cover For 0 Paid Driver(s) of Rs. 0 each	0
Bonus/ Malus	0
Total Liability Premium:	937
C. Special Discount	0
D. Net Premium (A+B)	1111
E. Service Tax Details	
Integrated GST (18%)	200
Final Premium Rs.(D+E)	1311
***All Premium Figures are in Rupees	
No Claim Bonus:	-50%

I/We declare that I have read the policy schedule and the rate of NCB claimed by me/us is correct and that no claim as arisen in the existing policy period (copy of the policy enclosed). I further undertake that if this declaration is found to be incorrect, all benefits under the policy in respect of section 1 of the policy will stand forfeited. I hereby agree to confirm within 7 days in case of any objection or disagreement with the above.

Geographical Area	India	Additional Excess	Rs. 0
Compulsary Deductible	Rs. 100	Voluntary Excess	Nil
Previous Policy Expired On:	18-FEB-18	Previous Policy Number	1-CZF4W6L

The above Total OD Premium is inclusive of all applicable Loading/Discounts viz (Automobile Association Membership, Voluntary Excess, Anti-Theft, Handicap Person, Driver Tuition, Fiber Glass, CNG/LPG Unit, Geographical Extn., Imported Vehicle etc wherever applicable).

Limits Of Liability

Under section II-I(i) of the policy -> Death of or bodily injury: Such amount as is necessary to meet there requirements of the Motor Vehicles Act, 1988. Under section II-I(ii) of the policy -> Damage to Third Party Property: Rs. 100000

Limitation As To Use:

The Policy covers use of the vehicle for any purpose other than: Hire or reward, Carriage of goods(other than samples or personal luggage), Organised racing, Pace making, Speed testing, Reliability trials, Any purpose in connection with Motor Trade.

Driver

Any person including the insured Provided that a person driving holds an effective driving licence at the time of the accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective Learner's licence may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Important Notice:

The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY.

Subject to IMT Endorsement Nos: 22, Policy wordings attached herewith

No Details

Plan Description:

*** If premium paid through cheque, the policy is void ab-initio in case of dishonor of cheque.

Premium Collection Details: - [Receipt No/Collection No/Amount] 9906-01671500,/82259458,/ Rs.1311,

This certificate of insurance is issued in accordance with the provision of Chapter X and Chapter XI of M.V.Act, 1988.

***** In case of any claim, please contact our 24 Hour Call centre at 1800-22-5858, 1800-102-5858, 1800-209-5959 (Toll Free) / 91-020-30305858 (chargeable, add area code before this number in case of mobile call) or email us at 'info@bajajallianz.co.in' *****

Damage Details:-

Kindly contact our nearest / local offices for No Claim Bonus Confirmations.

Insured Declared Value:

Policy Year	Tenure From	Tenure To	Total Sum Insured
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The schedule of age wise Insured Declared Value (IDV) as shown in the above table is applicable for the purpose of Total Loss including Theft/ Constructive Total Loss (TL/CTL) claims only on basis of loss date falling in the respective year. A vehicle will be considered to be a CTL, where the aggregate cost of retrieval and / or repair of the vehicle subject to terms and conditions of the policy exceed 75% of the IDV.

nul





Authorized Signatory

 ${\it Bajaj Finserv, 1st\ Floor\ ,\ Survey\ \#\ 208/1-B,\ Behind\ Weikfield\ IT-Park,\ Viman\ Nagar,\ Pune-411014}$

 $\frac{BAGIC\ GST\ No: 27AABCB5730G1ZX\ |\ Principal\ Location: GE\ Plaza, Airport\ Road, Yerwada, Pune-411006\ PH: 66026666\ |\ Services\ Accounting\ Code: 997134-Motor\ vehicle insurance\ services.\ No\ reverse\ charge\ is\ payable\ on\ these\ services.\ |\ Invoice\ No.: 93771671/1$