

Ref No.: GEN/WEL/SG/0008.3/5721438700

Date: 02/04/2025

To,  
Mr. Javed Ali  
K 427 K BLOCK NEW SEELAMPUR  
NORTH EAST DELHI  
Delhi - 110053  
District: SOUTH WEST DELHI  
DELHI, India  
Contact Details 9212701987



Policy number: 5721438700  
CKYC ID: 40065318853583

Subject: Risk assumption for Car Secure

Dear Mr. Javed Ali,

We welcome you to Zurich Kotak General Insurance Company (India) Limited and thank you for choosing us as your preferred service provider.

This is with reference to your above mentioned Policy issued under Car Secure.

Enclosed please find the Policy Schedule outlining the details of your policy. Kindly note that the proposal is underwritten and policy is issued based on the information submitted to us by you, as well as acceptance of the terms and conditions. Policy schedule must be read in conjunction with the product brochure and policy wordings. Please visit <https://www.zurichkotak.com/customer-support/downloads> or scan above QR code for detailed policy wording.

We request you to carefully go through the same once again and in case of any disagreement, discrepancy or clarifications, please call us on our toll free number 1800 266 4545 or write to us at [care@zurichkotak.com](mailto:care@zurichkotak.com) within 15 days from the date of this letter. Alternatively, you can also write to us at 401, 4th Floor, Silver Metropolis, Jai Coach Compound, Off Western Express Highway, Goregaon (East), Mumbai – 400063, Maharashtra, India.

Please note that the information provided by you will be verified at the time of claim and the captioned Policy shall be treated as void in case of any untrue or incorrect statement, misrepresentation, non-description or non-disclosure in any form whatsoever made by you or by your agent, on your behalf, at any stage.

In case where premium is not received by us due to cheque dishonour or any other reason, the insurance cover shall be void ab-initio.

As a valued customer, we would like to provide regular updates on your policy through email and SMS. We therefore request you to keep us updated of any change in your contact details.

Assuring you of our best services at all times.

Thanking you,

Yours sincerely,

For Zurich Kotak General Insurance Company (India) Limited



Authorised Signatory

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**Car Secure**  
Comprehensive Policy  
**Certificate cum Policy Schedule**

Policy / Certificate No: 5721438700

For any assistance please call 1800 266 4545 or visit [www.zurichkotak.com](http://www.zurichkotak.com)



#### INSURED DETAILS

Name: **Mr. Javed Ali**  
Address: K 427 K BLOCK NEW SEELAMPUR NORTH EAST  
DELHI Delhi - 110053 District: SOUTH WEST DELHI  
DELHI(07), India  
Phone: NA  
Mobile: 9212701987  
Email: SHIVASANDEEP@YAHOO.COM  
GSTIN:

#### POLICY DETAILS

**Policy Issuing Office:** A-2 3Rd Floor Kirti Nagar Near Karla Hospital  
Delhi Delhi 110015.  
Period of Insurance:  
**From: 09/04/2025 00:00 to: 08/04/2026 Midnight**  
Type Of Vehicle: Private Car  
Policy issued on: 02/04/2025  
Cover Note No: NA  
Hypothecated to: HDFC BANK LTD

#### INTERMEDIARY DETAILS

Intermediary Code  Intermediary Name **ELEVATE INSURANCE BROKERS PRIVATE LIMITED**

Intermediary's Mobile No.  Intermediary's Landline No.

#### VEHICLE DETAILS

Registration Number	Manufacturer	Model	Variant	Year of Manufacture	RTO Location	Engine Number	Vehicle Chassis/Trailer Chassis No.	Cubic Capacity/KW	Fuel Type	Seating Capacity
DL 10 CP 9165	MORRIS GARAGE	HECTOR	SHARP 2.0 DIESEL TURBO MT	2021	WEST DELHI	4634459 24096254	MZ7HD1D2 C4H054355	1956	DIESEL	5

Insured Declared Value (IDV) of the Vehicle (in ₹)	Non - Electrical Accessories fitted to the Vehicle (in ₹)	Electrical & Electronic Accessories fitted to the Vehicle (in ₹)	Trailer (in ₹)	CNG / LPG Kit (in ₹)	Total Value of the Vehicle (in ₹)
11,43,000	0	0	0	0	11,43,000

#### PREMIUM COMPUTATION TABLE (IN ₹)

Section I		Section II	
<b>Own Damage</b>		<b>Liability</b>	
Basic Own Damage	9,436.61	Basic TP Including TPPD Premium	7,897.00
Add:		Legal Liability to Paid Driver (IMT 28)	50.00
Add on Covers Total Premium #	7,047.45	<b>Total Liability Premium (B)</b>	<b>7,947.00</b>
Less:		<b>Section III</b>	
No Claim Bonus Percent 25%	2,359.15	<b>Personal Accident</b>	
		PA Cover for Owner Driver of ₹ 15,00,000	330.00
<b>Total Own Damage Premium (A)</b>	<b>14,124.91</b>	<b>Total Personal Accident Premium (C)</b>	<b>330.00</b>
<b>Taxable value of Services (A+B+C)</b>		<b>22,401.91</b>	
CGST @ 9%		2,016.17	
SGST @ 9%		2,016.17	
<b>Total Premium (in ₹)</b>		<b>26,434.00</b>	

Add on Covers Opted For: Consumable Cover, Depreciation Cover, Engine Protect, Key Replacement, Loss of Personal Belongings, Return to Invoice, Road Side Assistance

# : For the covers opted as shown in [Add On Cover Details Table](#)

Geographical Area  Additional Excess ₹  Compulsory Deductibles ₹   
Voluntary Deductible ₹  Voluntary Deductible for Depreciation Cover ₹  Total Deductible ₹

## NOMINEE DETAILS

*Nominee Name	*Nominee Age	*Relationship	*Name of Appointee(if nominee is a minor)	Relationship to the Nominee
RASHID ALI	65	Father		

## ADD-ON COVER DETAILS

Sr. No.	Add-On Cover	Sum Insured(₹)	Premium (₹)	Remarks
1	Consumable Cover UIN:IRDAN152RP0006V04201516/A0012V02201516	NA	768.10	
2	Depreciation Cover UIN:IRDAN152RP0006V04201516/A0011V03201516	NA	4,146.80	No. Of Claims:2 Voluntary Deductible: 0
3	Engine Protect UIN:IRDAN152RP0006V04201516/A0013V02201516	NA	614.93	
4	Key Replacement UIN:IRDAN152RP0006V04201516/A0026V01201819	25,000	233.75	
5	Loss of Personal Belongings UIN:IRDAN152RP0006V04201516/A0025V01201819	10,000	93.50	
6	Return to Invoice UIN:IRDAN152RP0006V04201516/A0014V02201516	NA	690.37	
7	Road Side Assistance UIN:IRDAN152RP0006V04201516/A0015V02201516	NA	500.00	

## CUSTOMER DECLARATION FOR CNG/ LPG KIT

I/ We agree and undertake to immediately inform the Company in case of change on account of addition of CNG/LPG kit and obtain necessary endorsement in the Policy.

## DISCLAIMER

For complete details on terms and conditions governing the coverage and NCB please read the Policy Wordings. This document is to be read with the Policy Wordings(which are also available on the Company website i.e. [www.zurichkotak.com](http://www.zurichkotak.com)). Please refer to the claim form for necessary documents to be submitted for processing the claim.

## PUC DECLARATION

This policy has been issued subject to valid Pollution Under Control (PUC) Certificate/Fitness Certificate disclosed to our representative / declared by You prior to commencement of risk under this policy and further undertaking to renew and maintain a valid PUC throughout the duration of the Policy.

## LIMITS OF LIABILITY

Under Section II - 1(i) of the policy -> Death of or bodily injury: Such amounts is necessary to meet their requirements of Motor Vehicles Act, 1988.  
Under Section II - 1(ii) of the policy -> Damage to Third Party Property ₹ 7,50,000; PA Cover under Section III: for Owner Driver CSI ₹ 15,00,000

## LIMITATIONS AS TO USE

Limitation as to use (Package Policy): The policy covers use of the vehicle for any purpose other than: (a) Hire or reward (b) Carriage of goods (other than samples or personal luggage) (c) Organized racing (d) Pace making (e)Speed testing (f) Reliability trails (g)Use in connection with Motor Trade. Note: In case of vehicles used for Driving Tuition the words "other than for the purpose of driving tuition" to be read after the words „hire or reward".

## DRIVER'S CLAUSES

Any person including the insured: Provided that a person driving hold an effective Driving License at the time of accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learners' License may also drive the Vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor vehicles Rules 1989.

## SPECIAL CONDITIONS

1. Previous policy document is required at the time of claim verification.
2. All type of pre – existing damages or cost of repair of such damage will be excluded at the time of claim settlement.

## NO CLAIM BONUS SCALE

Number of Claims	% of Discount on Own Damage Premium
No claim made or pending during the preceding full year of insurance	20%
No claim made or pending during the preceding 2 consecutive years of insurance	25%
No claim made or pending during the preceding 3 consecutive years of insurance	35%
No claim made or pending during the preceding 4 consecutive years of insurance	45%
No claim made or pending during the preceding 5 consecutive years of insurance	50%

\*No Claim Bonus (NCB) is subject to no claim on the previous policy. Benefits under the policy will be forfeited if claim is/was made in previous policy. Please contact our Customer Care team in case of wrong NCB % mentioned.

## 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 Policy 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". For legal interpretation, English version will hold good.

Subject to I.M.T. Endt.Nos. & Memorandum 22, GR36A, 28, GR27, 7 Printed/herein/attached hereto Under Hire Purchase Agreement with NA

#### TAX DETAILS

Service Tax/GST Registration No. 

0	7	A	A	F	C	K	7	0	1	6	C	1	Z	V
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 Category : General Insurance Services

SAC Code 

997134
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 Description 

Motor Vehicle Insurance Services
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Invoice Number 

5721438700
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#### DECLARATION

I/We hereby certify that the policy to which the certificate relates as well as the certificate of insurance are issued in accordance with the provision of chapter X, XI of M.V.Act 1988.

In Witness whereof this Policy has been signed for and behalf of A-2 3Rd Floor Kirti Nagar Near Karla Hospital Delhi Delhi 110015. at Mumbai this 02 day of April of 2025

Stamp Duty of ₹ 0.50 is paid as provided under Article 47(B) of Indian Stamp Act, 1899 and included in Consolidated Stamp Duty Paid to the Government of Maharashtra Treasury vide Order of Addl. Controller Of Stamps, Mumbai at General Stamp Office, Fort, Mumbai - 400001., vide this Order No. (LOA/ENF-2/CSD/14/2025/Validity Period Dt. 31/01/2025 To Dt. 31/12/2026 (O/w.No. 488)/Date: 29/01/2025).

For Zurich Kotak General Insurance Company (India) Limited



Authorised Signatory

This document is digitally signed, hence counter signature / stamp is not required.

## CUSTOMER INFORMATION SHEET

**This document provides key information about your policy. Please refer to the policy document for detailed terms and conditions.**

SI NO	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number																																				
1	Product Name	Car Secure																																					
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN152RP0006V04201516																																					
3	Structure	<ul style="list-style-type: none"><li>State basis of Sum/Limit Insured<ul style="list-style-type: none"><li>Indemnity</li><li>Fixed Benefit</li></ul></li></ul>																																					
4	Interests Insured	Car Secure is designed to provide insurance cover to Private Car Vehicles																																					
5	Sum Insured / Motor Insured Declared Value Scope	<div>The Insured's Declared Value (IDV) of the vehicle will be deemed to be the 'SUM INSURED' for the purpose of this policy which is fixed at the commencement of each policy period for the insured vehicle.</div> <div>The IDV of the vehicle (and accessories if any fitted to the vehicle) is to be fixed on the basis of the manufacturer's listed selling price of the brand and model as the vehicle insured at the commencement of insurance/renewal and adjusted for depreciation.</div> <table><tr><th>Section</th><th>Coverage</th><th>Sum Insured</th></tr><tr><td>Section I</td><td>Loss of Or Damage to The Vehicle Insured</td><td>Refer below table</td></tr><tr><td>Section II</td><td>Liability to Third Parties</td><td>As per Court Order</td></tr><tr><td>Section III</td><td>Personal Accident Cover for Owner-Driver</td><td>INR 15,00,000/-</td></tr></table> <table><tr><td>Insured Declared Value (IDV) of the Vehicle (INR)</td><td>INR 1143000</td></tr><tr><td>Non - Electrical Accessories fitted to the vehicle (INR)</td><td>INR 0</td></tr><tr><td>Electrical &amp; Electronic Accessories fitted to the vehicle (INR)</td><td>INR 0</td></tr><tr><td>Trailer (INR)</td><td>INR 0</td></tr><tr><td>CNG / LPG Kit (INR)</td><td>INR 0</td></tr><tr><td>Total Value of the Vehicle (INR)</td><td>INR 1143000</td></tr></table> <div><p><b>Total Loss/ Constructive Total Loss</b></p><p>The Company may at its own option repair reinstate or replace the vehicle or part thereof and/or its accessories or may pay in cash the amount of the loss or damage and the liability of the Company shall not exceed:</p><p>a. For total loss / constructive total loss/cash-loss of the vehicle - the Insured's Declared Value (IDV) of the vehicle (including accessories thereon) as specified in the Schedule less the value of the wreck.</p><p>b. For partial losses, i.e. losses other than Total Loss/Constructive Total Loss/cash-loss of the vehicle - actual and reasonable costs of repair and/or replacement of parts lost/damaged subject to depreciation as per limits specified.</p><p>c. If a damaged motor vehicle is assessed as being unrepairable and hence a wreck i.e. a 'total loss' or 'write-off' the Company shall grant the Policyholder the option to retain the wreck and accept a 'cash loss' settlement (being the IDV less the assessed value of Salvage based on competitive quotes procured by the Company including any submitted by or through the insured).</p><p>d. In the event of a 'cash-loss' settlement, the Company is entitled to cancel the Own Damage insurance effective the date of damage. Additionally, the Company can cancel the statutory Motor Third Party Liability insurance policy after requiring the insured to either cancel the road registration of the wreck and submit documentary evidence in original thereof or alternatively evidence in original a statutory Motor Third Party liability insurance policy covering the wreck effective the date of damage.</p><p>The insured vehicle shall be treated as a CTL if the aggregate cost of retrieval and / or repair of the vehicle, subject to terms and conditions of the policy, exceeds 75% of the IDV of the vehicle.</p></div> <div><p><b>Illustration of IDV Calculation</b></p><p>IDV of the vehicle is calculated on ex-showroom price less depreciation depending on the age of the vehicle.</p><table><tr><th colspan="4">Example: Ex-showroom price of the vehicle is INR 10,00,000.</th></tr><tr><th>Age of vehicle</th><td>1 Year</td><td>2 Years</td><td>3 Years</td></tr><tr><th>Depreciation %</th><td>15%</td><td>20%</td><td>30%</td></tr></table></div>	Section	Coverage	Sum Insured	Section I	Loss of Or Damage to The Vehicle Insured	Refer below table	Section II	Liability to Third Parties	As per Court Order	Section III	Personal Accident Cover for Owner-Driver	INR 15,00,000/-	Insured Declared Value (IDV) of the Vehicle (INR)	INR 1143000	Non - Electrical Accessories fitted to the vehicle (INR)	INR 0	Electrical & Electronic Accessories fitted to the vehicle (INR)	INR 0	Trailer (INR)	INR 0	CNG / LPG Kit (INR)	INR 0	Total Value of the Vehicle (INR)	INR 1143000	Example: Ex-showroom price of the vehicle is INR 10,00,000.				Age of vehicle	1 Year	2 Years	3 Years	Depreciation %	15%	20%	30%	
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		IDV	INR 8,50,000	INR 8,00,000	INR 7,00,000	
		<b>Note:</b> The above Illustration is as per the depreciation slabs mentioned in the policy wording for the age of the vehicle.				

6	Policy Coverage	<p>The coverages available under this policy are listed in below and will be applicable as mentioned in the Policy Schedule.</p> <p><b>Section I: Loss of Or Damage to The Vehicle Insured</b> Cover for any Partial or Total Loss or Damage to the vehicle due to natural calamities such as - Fire, explosion, self-ignition or lightning, earthquake, flood, typhoon, hurricane, storm, tempest, inundation, cyclone, hailstorm, frost landslide, rockslide etc. Or man - made calamities such as burglary, theft, riot, strike, malicious act, accidental external means, terrorist activity, any damage in transit by road, rail, inland waterway, lift elevator or air, etc.</p> <p><b>Section II: Liability to Third Parties</b> Covers legal liability for third party property damage and third-party bodily injury (including death) due to an accident.</p> <p><b>Section III: Personal Accident Cover for Owner-Driver</b> Personal Accident Cover is provided to the Owner-Driver whilst driving the vehicle including mounting into/dismounting from or traveling in the insured vehicle as a co-driver. Additionally, other passengers and paid drivers can also be covered by opting for the same- limited to the carrying capacity of the vehicle, excluding the driver.</p>	Policy Wordings - Section I, Section II, Section III
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7	Add-on Cover	S.No	Add-on Name and Description	UIN	Sum Insured	Add-on Wording
		1	<b>Depreciation Cover</b> <b>Description:</b> Covers for depreciation in case of parts replaced on account of damage to the Insured vehicle and/or to its accessories, arising out of any peril covered under Section I of the Policy	UIN:IRDAN152RP0006V04201516/A0011V03201516	1143000	
		2	<b>Consumables cover</b> <b>Description:</b> Cover is provided for expenses incurred by the Insured in respect of Consumable Items in the event of damage to the Insured vehicle and/or to its accessories, arising out of any peril as covered under the Policy.	UIN:IRDAN152RP0006V04201516/A0012V02201516	1143000	
		3	<b>Engine Protect</b> <b>Description:</b> Cover is provided to indemnify the Insured for expenses incurred in repair or replacement of Engine Parts, Differential Parts and Gear Box Parts which becomes necessary due to Consequential Damage arising out of water ingress/leakage of lubricating oil which directly cause loss or damage to the aforesaid parts.	UIN:IRDAN152RP0006V04201516/A0013V02201516	1143000	
		4	<b>Return to Invoice</b> <b>Description:</b> Cover is provided to pay the difference between the Insured's Declared Value (IDV) of the Insured vehicle and lower of the Purchase Invoice Price (as defined below) of Insured Vehicle OR current replacement price of new vehicle in case exactly same make/model is available, upon the occurrence of any Total Loss (including theft)/ Constructive Total Loss as defined in the Policy.	UIN:IRDAN152RP0006V04201516/A0014V02201516	1143000	
		5	<b>Road Side Assistance</b> <b>Description:</b> Cover is Provided for following: a.Towing due to an accident or breakdown b.Battery jump start c.Arrangement/ Supply of fuel: d.Emptying of fuel tank	UIN:IRDAN152RP0006V04201516/A0015V02201516	0	



		e.Flat Tyre(s) f.Breakdown support over phone g.Taxi Benefits h.Arrangement of keys i.Message Relay j.Minor Repairs		
	6	<b>Loss of Personal Belongings</b> <b>Description:</b> Cover is provided to pay for the loss or damage to You and Your Family member's personal belongings caused by perils mentioned under section 1 of the Comprehensive policy while personal belongings are in the vehicle at the time of loss or damage to the vehicle.	UIN:IRDAN152RP0006V04201516/A0025V01201819	10000
	7	<b>Key Replacement</b> <b>Description:</b> Cover is provided to indemnify the Insured, the cost of repair / replacement of Insured Vehicle key(s), including labor cost, in case key(s) of Insured Vehicle are lost / stolen or damaged.	UIN:IRDAN152RP0006V04201516/A0026V01201819	25000

8	Loss Participation	<b>Deductible</b>	
		Compulsory Deductible: INR 2000	
		Voluntary Deductible: INR 0	
		Voluntary Deductible for Depreciation Cover: INR 0	
		Total Deductible: INR 2000	

9	Exclusions	<b>GENERAL EXCEPTIONS (Applicable to all Sections of the Policy)</b> The Company shall not be liable under this Policy in respect of <ol style="list-style-type: none"> <li>Any accidental loss or damage and/or liability caused sustained or incurred outside the geographical area;</li> <li>Any claim arising out of any contractual liability;</li> <li>Any accidental loss damage and/or liability caused sustained or incurred whilst the vehicle insured herein is             <ol style="list-style-type: none"> <li>Being used otherwise than in accordance with the 'Limitations as to Use'. Or</li> <li>Being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.</li> </ol> </li> <li> <ol style="list-style-type: none"> <li>Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss</li> <li>Any liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission.</li> </ol> </li> <li>Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.</li> <li>Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war) civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequence of any of the said occurrences and in the event of any claim hereunder the insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.</li> </ol>	Policy Wordings - General Exclusions (Applicable to all Sections of the Policy)
		<b>For complete list of exclusions including Section-wise exclusions, refer the policy wordings</b>	

10	Special Conditions and Warranties (if any)	<b>Special Conditions</b> <ul style="list-style-type: none"> <li>All type of pre - existing damages or cost of repair of such damage will be excluded at the time of claim settlement.</li> </ul> <b>Explain obligations of the Policyholder</b> <ul style="list-style-type: none"> <li>The insured shall take all reasonable steps to safeguard the vehicle from loss or damage and to maintain it in efficient condition and the Company shall have at all times free and full access to examine the vehicle or any part thereof or any driver or employee of the insured. In the event of any accident or</li> </ul>	Policy Wording - Conditions
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		<p>breakdown, the vehicle shall not be left unattended without proper precautions being taken to prevent further damage or loss and if the vehicle be driven before the necessary repairs are effected any extension of the damage or any further damage to the vehicle shall be entirely at the insured's own risk.</p> <p>•The due observance and fulfillment of the terms, conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the insured and the truth of the statements and answers in the said proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.</p>													
11	Admissibility of Claim	<p>1. Notice shall be given in writing to the Company immediately upon the occurrence of any accidental loss or damage in the event of any claim and thereafter the insured shall give all such information and assistance as the Company shall require.</p> <p>2. No admission offer promise payment or indemnity shall be made or given by or on behalf of the insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the insured the defence or settlement of any claim or to prosecute in the name of the insured for its own benefit any claim for indemnity or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the insured shall give all such information and assistance as the Company may require.</p> <p>3. In the event of the death of the sole insured, this policy will not immediately lapse but will remain valid for a period of three months from the date of the death of insured or until the expiry of this policy (whichever is earlier).</p> <p style="text-align: center;"><b>• Sample claim calculation process</b></p> <p>Mr. ABC has Motor OD policy and met with an accident. The claim amount for this vehicle will be calculated as below:</p> <table><tr><th>Details</th><th>Amount (INR)</th></tr><tr><td>Vehicle Repair Cost</td><td>50,000</td></tr><tr><td>Amount assessed by surveyor</td><td>48,000</td></tr><tr><td>Depreciation applicable (Part Depreciation: Metal as per age, plastic 50%, Glass nil)</td><td>5,000</td></tr><tr><td>Compulsory deductible</td><td>1,000</td></tr><tr><td>Total Claim payable</td><td>42,000</td></tr></table> <p><i>** The above claim calculation is subject to change as per Add on covers opted and policy terms and conditions</i></p>	Details	Amount (INR)	Vehicle Repair Cost	50,000	Amount assessed by surveyor	48,000	Depreciation applicable (Part Depreciation: Metal as per age, plastic 50%, Glass nil)	5,000	Compulsory deductible	1,000	Total Claim payable	42,000	Policy Wording - Conditions
Details	Amount (INR)														
Vehicle Repair Cost	50,000														
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Compulsory deductible	1,000														
Total Claim payable	42,000														
12	Policy Servicing - Claim Intimation and Processing	<ul style="list-style-type: none"><li>• Toll free / IVRS number of the insurer : 1800 266 4545 (8 AM TO 8 PM)</li><li>• Website / Email: <a href="http://www.zurichkotak.com/">www.zurichkotak.com/</a> <a href="mailto:care@zurichkotak.com">care@zurichkotak.com</a></li><li>• Details of designated company officials to be contacted in time of claim: <a href="mailto:zkgi.motorclaimservices@zurichkotak.com">zkgi.motorclaimservices@zurichkotak.com</a></li></ul> <p><b>Details of procedure to be followed for cashless service (In case of Motor Insurance) as well as for reimbursement of claim</b></p> <p>In case of cashless process, please follow the below mentioned process</p> <ul style="list-style-type: none"><li>• Call our 12 hours helpline with details of accident and policy/cover note number.</li><li>• Once the claim is registered, the customer support executive will provide you with a Claim Reference Number.</li><li>• You will need to submit relevant documents to us such as - Driving license, RC copy, Policy copy etc. in accordance with the Policy terms and conditions.</li><li>• We will arrange for an inspection in<ul style="list-style-type: none"><li>- 24 hours, if a claim is reported on a working day</li><li>- Next working day, if a claim is reported on Sunday or Public holiday</li></ul></li><li>• On cashless facility confirmation, the vehicle would be repaired at a cashless garage and the payment would be made directly to the garage.</li><li>• You will only have to pay the deductible as mentioned in the policy and the depreciation value, salvage etc. as informed by the surveyor.</li></ul> <p>In case of reimbursement process, you will have to submit documents to Zurich Kotak General Insurance Company Ltd., and we will make the payment within 7 days of completion of documentation. The detailed list of documents required is mentioned in the claims form which can be downloaded from our website <a href="http://www.zurichkotak.com">www.zurichkotak.com</a>.</p> <p><b>• Turn Around Time (TAT) for claims settlement</b></p> <table><tr><td>Appointment of surveyor</td><td>Immediate after intimation</td></tr><tr><td>Survey report submission</td><td>15 days</td></tr><tr><td>Claims concluded by the insurer</td><td>within 7 days after receipt of final survey report</td></tr><tr><td></td><td>Within 7 days after receipt of final</td></tr></table>	Appointment of surveyor	Immediate after intimation	Survey report submission	15 days	Claims concluded by the insurer	within 7 days after receipt of final survey report		Within 7 days after receipt of final					
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		<table><tr><td>Settlement of claims</td><td>survey report and/or the last relevant and necessary document as the case may be</td></tr></table>	Settlement of claims	survey report and/or the last relevant and necessary document as the case may be					
Settlement of claims	survey report and/or the last relevant and necessary document as the case may be								
		<div>• <b>Escalation Matrix when TAT is not satisfied</b></div> <table><tr><td>Level 1</td><td>regional.motorclaims@zurichkotak.com</td></tr><tr><td>Level 2</td><td>zonal.motorclaims@zurichkotak.com</td></tr><tr><td>Level 3</td><td>head.motorclaims@zurichkotak.com</td></tr></table>	Level 1	regional.motorclaims@zurichkotak.com	Level 2	zonal.motorclaims@zurichkotak.com	Level 3	head.motorclaims@zurichkotak.com	
Level 1	regional.motorclaims@zurichkotak.com								
Level 2	zonal.motorclaims@zurichkotak.com								
Level 3	head.motorclaims@zurichkotak.com								
13	Grievance Redressal and Policyholders protection	<p>For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call toll free number 1800 266 4545 or may write an e- mail at care@zurichkotak.com. In case the Insured is not satisfied with the response, Insured may contact the Grievance Officer of the Company at grievanceofficer@zurichkotak.com. In case if the Insured is not satisfied with the solution the Grievance Officer has provided, Insured can write to seniorgrievanceofficer@zurichkotak.com/ chiefgrievanceofficer@zurichkotak.com.</p> <p>However, if the resolution provided by us is not satisfactory you may approach Insurance Regulatory and Development Authority of India (IRDAI) through the Bima Bharosa Portal: https://bimabharosa.irdai.gov.in.</p> <p>You may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance.</p> <p>The details of the Insurance Ombudsman/ complete Grievance Redressal Process is also available at Company's website: www.zurichkotak.com</p>	Policy Wording - Grievance Redressal						
14	Obligations of the Policyholder/	<ul style="list-style-type: none"><li>• To disclose all information correctly sought by the insurer at time of filling the proposal form</li><li>• In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the insurer immediately</li><li>• Non-disclosure of material information may affect the claim settlement.</li><li>• Disclosure of other material information during the policy period.</li></ul> <p>("Material Information" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk such as Purpose of the Vehicle, Usage of the Vehicle, Claim details (accident date, spot of accident, damaged parts etc.), details of vehicle, NCB details etc.)</p>							

#### Declaration by the Policy Holder

I have read the above and confirm having noted the details.

Place

Date

Signature of the Policy Holder

#### Note:

- Please visit <https://www.zurichkotak.com/documents/customer-support/downloads> for product related documents including CIS
- In case of any conflict, the terms and conditions mentioned in the policy document shall prevail

## Transcript cum Proposal Form - Car Secure

### Important Information for the Insured:

1. This is a transcript of the details declared by you on the e-proposal and shall be the basis of underwriting of the policy. Request you to carefully review the complete information provided under this transcript and get back to us within 15 days of issuance of this document, in case there is any discrepancy found.
2. The policy is subject to receipt of complete premium and the risk under the Policy shall commence only from the date as specified in the policy schedule.
3. This document has to be read in conjunction with the policy schedule/document.
4. Refund, if any, with regard to the premium paid, would be processed in the same source / account (net banking / credit card / debit card) from where the premium payment has been originally made subject to policy terms and conditions.
5. The policy is subject to the underwriting guidelines of the Company and the details as declared by the Insured under the e-proposal.
6. Online premium payment should be made by the policyholder himself. No third party payment should be made using this mode of payment.
7. The Policyholder/ Insured has fully understood the terms and conditions of the Policy including all the features available thereunder.

Proposal No : 202504020041985

Proposal for : Rollover Policy

Premium Amount (Inclusive of taxes)

Type of cover: Comprehensive Policy

Registration No.	Vehicle Make/Model/ Variant	Type of body	Cubic Capacity/KW	Fuel Type
DL 10 CP 9165	MORRIS GARAGE/HECTOR/SHARP 2.0 DIESEL TURBO MT		1956	Diesel

Year of Manufacture	Insured Declared Value (IDV)	Engine Number	Chassis Number
2021	11,43,000	4634459 24096254	MZ7HD1D2 C4H054355

Special conditions :

### PROPOSER / OWNER'S DETAILS

1. Title and Name of the Insured:	<input type="text" value="Mr. Javed Ali"/>				
2. Insured Permanent Address*	<input type="text" value="S/O RASHID ALI K-431 NEW SEELAMPUR NEW SEELAMPUR District: NORTH EAST DELHI 110053 DELHI(07), India"/>				
If Correspondence Address different from Permanent Address, please provide*:	<input type="text" value="K 427 K BLOCK NEW SEELAMPUR NORTH EAST DELHI Delhi - 110053 District: SOUTH WEST DELHI DELHI, India"/>				
3. Phone	<input type="text"/>	4. Mobile *	<input type="text" value="9212701987"/>	5. Email ID*	<input type="text" value="SHIVASANDEEP@YAHOO.COM"/>
6. Gender	<input type="text"/>	7. Date Of Birth *	<input type="text"/>	8. Nationality	<input type="text" value="Indian Resident"/>

Proposal Date & Time:

Policy Start Date:

Policy End Date:  
(Comprehensive)

**Limitation as to use (Private Car):** The policy covers use of the vehicle for any purpose other than: (a) Hire or reward (b) Carriage of goods (other than samples or personal luggage) (c) Organized racing (d) Pace making (e) Speed testing (f) Reliability trails (g) Use in connection with Motor Trade. Note: In case of vehicles used for Driving Tuition the words "other than for the purpose of driving tuition" to be read after the words "hire or reward".

**Driver's Clauses:** Any person including insured: Provided that a person driving hold an effective Driving Licence at the time of accident and is not disqualified from holding or obtaining such a licence. Provided also that the person holding an effective Learners' Licence may also drive the Vehicle and that such a person satisfies the requirement of Rule 3 of the Central Motor Vehicle Rules, 1989.

#### STATUTORY WARNING PROHIBITION OF REBATES (Under Section 41 of Insurance Act 1938)

- 1) 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 prospectuses or tables of the Insurer.
- 2) Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to ₹ 1,000,000/-

#### VEHICLE DETAILS

Registration Authority and RTO Location	Date of Registration	CNG/LPG/Bi Fuel	Lease / Hire / Hypothecation (Name and address of concerned parties)	Color of Vehicle	Seating Capacity
WEST DELHI	09/04/2021	DIESEL	HDFC BANK LTD		5
*Insured Declared Value of the Vehicle (in INR)	*Non - Electrical Accessories fitted to the Vehicle (in INR)	*Electrical & Electronic Accessories fitted to the Vehicle (in INR)	Trailer (in INR)	*CNG / LPG Kit (in INR)	*Total Value (in INR)
11,43,000	0	0	0	0	11,43,000

PUC - NO

#### OPTIONAL ADD-ON COVERS

1. <input checked="" type="checkbox"/> Depreciation Cover# 3. <input checked="" type="checkbox"/> Return to Invoice 5. <input checked="" type="checkbox"/> Road Side Assistance 7. <input checked="" type="checkbox"/> Loss of Personal Belongings Sum Insured 10000 9. <input type="checkbox"/> Daily Car Allowance 11. <input type="checkbox"/> Meter (Switch On/ Switch Off) Cover 13. <input type="checkbox"/> Clutch Protect	2. <input checked="" type="checkbox"/> Engine Protect 4. <input checked="" type="checkbox"/> Consumable Cover 6. <input checked="" type="checkbox"/> Key Replacement Sum Insured 25000 8. <input type="checkbox"/> Tyre Cover 10. <input type="checkbox"/> NCB Protect 12. <input type="checkbox"/> Battery Protect Cover	#If Depreciation cover is selected: Voluntary Deductible offered under the "Depreciation Cover", which would be applied over and above the Compulsory Deductible? No
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### RISK INCLUSION / EXCLUSION

1. *Personal Accident Cover of INR 15,00,000 for the Owner Driver	*Nominee Name and Age RASHID ALI 65	*Relationship Father	*Name of Appointee (if nominee is a minor)	Relationship to the Nominee
2. Do you wish to include Personal Accident cover for the Named passenger? No Please give details mentioned aside:	Name	CSI Opted (Rs)	*Nominee Name	Relationship
3. Do you wish to include Personal Accident cover for the Un-named Passengers / hirer / pillion passenger? No Please give details mentioned aside:			No. of Persons As Per Seating Capacity	C. S. I. (Per Person)
# The maximum CSI available per person is ₹ 2,00,000, each in multiples of ₹ 10,000.				
4. Do you wish to restrict Third Party Property Damage of ₹ 7.5 Lakh to the statutory TPPD liability limit of ₹ 6,000/- only? No				
5. Do you wish to cover legal liability? A) Paid Driver (IMT 28) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, no. of Person: 1				
B) Legal Liability to Employee (IMT 29) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, no. of Person: C) Unnamed Passengers <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, no. of Person: 0				
Compulsory Personal Accident (PA) Cover for owner-driver (PA Cover for Owner –Driver is compulsory for individual vehicle owners). I hereby declare below : <input type="checkbox"/> The Owner Driver does not require Compulsory Personal Accident Cover as Owner Driver has a separate existing Personal Accident Cover against Death and Permanent Disability (Total and Partial) for sum Insured of atleast 15 lacs/ The Vehicle to be insured is not owned by an individual/ The Owner driver does not have an effective driving license.				

### PREVIOUS INSURANCE DETAILS

1. Name and address of the previous insurer	TATAAIG-thth			
2. Previous Policy Type	ComprehensivePolicy	3. Previous Policy Number	62027407880000	4. Existing bonus
				20 %
5. Period of Insurance	09/04/2024	To	08/04/2025	
6. Details of claims taken in previous policy:	No			
Whether you are entitled to No Claim Bonus <input checked="" type="checkbox"/> Yes <input type="checkbox"/> NO				

### DETAILS OF DEPRECIATION

**Table 1: Schedule of depreciation for arriving at IDV:**

The Insured's declared value (IDV) of the vehicle will be deemed to be the 'Sum insured' and it will be fixed at commencement of each policy period for each insured vehicle

Age of The Vehicle	% of Depreciation for fixing IDV	Age of The Vehicle	% of Depreciation for fixing IDV
Not exceeding 6 Months	5%	Exceeding 2 years but not exceeding 3 years	30%
Exceeding 6 months but not exceeding 1 year	15%	Exceeding 3 years but not exceeding 4 years	40%
Exceeding 1 year but not exceeding 2 years	20%	Exceeding 4 years but not exceeding 5 years	50%

**Note:** IDV of obsolete models of vehicles (i.e. Models which the manufacturers have discontinued to manufacture) and vehicles beyond 5 years of age will be determined on the basis of an understanding between the insurer and the insured.

### PAYMENT DETAILS

Payment Mode : PAYMENT AGGREGATOR  
 Payment Reference No : 23021840734  
 Payment Amount: 26,434.00  
 Payment/Transaction Date: 02/04/2025  
 Bank Details:

I confirm that the premium is paid out of my legitimate sources of fund and the Company has the right to call for documents to establish sources of funds. The Company has the right to cancel the policy in case I am/have been found guilty by any competent authority or court of law of violating any law/regulation.

Intermediary Code: 3850170000

As verified using OTP sent on mobile number ending with 1987 on 02/04/2025 or as submitted by you in the physical proposal form.

### DECLARATION

**PEP :**

Are You or any of the proposed applicants or close relatives is/are associated to Politically Exposed Person (PEP) ? ☐ Yes ☒ No

**Go Green :**

I / We would like to protect and contribute in conserving the environment and help save paper by authorizing Zurich Kotak General Insurance Company (India) Limited to send all my policy and service related communication in soft copy to the email id as mentioned in the proposal form. I/We understand that still a physical copy of policy can be received by contacting our customer care.

**AML Declaration :**

I / We hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been /will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act,2002. I / We understand that the Company has the right to call for document to establish sources of funds. The Insurance Company has right to cancel the insurance contract in case I am/have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

## TAX INVOICE



Details of Receiver (Billed To)		Details of Supplier (billed by)	
<b>GSTIN/UIN</b>		<b>Name :</b>	Zurich Kotak General Insurance Company (India) Limited
<b>Customer ID</b>	1019684745	<b>GSTIN :</b>	07AAFCK7016C1ZV
<b>Customer Name</b>	JAVED ALI	<b>Pan Number :</b>	AAFCK7016C
<b>Email ID</b>	SHIVASANDEEP@YAHOO.COM	<b>CIN:</b>	U66000MH2014PLC260291
<b>Contact No</b>	9212701987	<b>Address:</b>	A-2 3Rd FloorKirti NagarNear Karla HospitalDelhi Delhi 110015.
<b>Address</b>	K 427 K BLOCK NEW SEELAMPUR , NORTH EAST DELHI, SOUTH WEST DELHI, 110053, DELHI, India	<b>Date of Invoice</b>	02/04/2025
<b>IMD Code</b>	3850170000	<b>Invoice No</b>	5721438700
<b>Receipt No</b>	1202600004246	<b>Proposal No</b>	202504020041985
		<b>Partner Application No</b>	
<b>State Code</b>	07	<b>State Code:</b>	07
<b>Place Of Supply Name</b>	DELHI - 07	<b>State Name</b>	DELHI
		<b>IRN</b>	

HSN/SAC Description	HSN / SAC Code	Total Value of Supply (Rs.)	Taxable value of Supply (Rs.)	CGST Rate	CGST Amt (Rs.)	SGST Rate	SGST Amt (Rs.)
Motor Vehicle Insurance Services	997134	22401.91	22401.91	9%	2,016.17	9%	2,016.17
<b>Total</b>		22401.91	22401.91		2016.17		2016.17
<b>Total Invoice Value (In Figure)</b>	26,434.00						
<b>Total Invoice Value (In Words)</b>	Twenty Six Thousand Four Hundred Thirty Four						
<b>Whether Tax Payable on a Reverse Basis or Not</b>				No			

For : Zurich Kotak General Insurance Company (India) Limited



Authorized Signatory

"I/We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule."