







Ms. MITHU BISWAS **AMARBATI** 3 NO CHANDIGARH MADHYAMGRAM BAZAR MADHYAMGRAM BARASAT - II WEST BENGAL India - 700130

# From here on, you're our responsibility.

Welcome on board.

Your "A" Policy for Act Liability Insurance (Passengers Čarrying 4W<6) Policy - Schedule,

Number 150622423530017936 is now live to access your policy anytime, anywhere download our Reliance Selfi App and enjoy a host of special features





## My Policy

Attach, Access or Download your policy



#### Claim Status

Register, Track or Submit claim documents



#### Locator

Go cashless, Tap and spot from amongst 5000+ network garages.



#### Video Claim **Assistance**

Intimate claims instantly through live video streaming.

# Now live Smart

With Reliance general Insurance.

Tech+

Best Regards,





🕟 reliancegeneral.co.in 📞



022 4890 3009 (Paid) 🕦



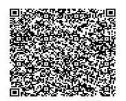
74004 22200 (WhatsApp)

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company





Digitally signed by Reliance General Insurance Company Limited Date: 2024.11.09 17:04:18

reliancegeneral.co.in 022 4890 3009 (4) 74004 22200 🕒

### A" Policy for Act Liability Insurance (Passengers Carrying 4W<6) Policy - Schedule

Policy Number : 150622423530017936	Proposal/Covernote No: R09112476629
Insured Name : Ms. MITHU BISWAS	Period of Insurance : From 00:00 Hrs on 10-Nov-2024 to Midnight of 09-Nov-2025
Communication Address & Place of Supply:  AMARBATI 3 NO CHANDIGARH MADHYAMGRAM BAZAR MADHYAMGRAM BARASAT - II, NORTH 24 PARGANAS, WEST BENGAL, India, 700130.	Policy Issuing Branch: Thapar House, 4th Floor, 163, S.P. Mukherjee Road Kolkatta, KOLKATA, WEST BENGAL, 700026.
Mobile No: 8240*****	Tax Invoice No. & Date: R09112476629 & 09 Nov 2024 05:04
Email-ID: S******@gmail.com	GSTIN/UIN & Place of Supply: WEST BENGAL
Nominee Name :	

28.5	35	-10.	
Insured Vehicle Details			
Registration No.	WB25K0037	Mfg. Month & Year	SEP-2019
Make / Model	MARUTI SUZUKI / ALTO 800 / TOUR H1	CC / HP / Watt	796
Engine No. / Chassis No.	F8DN6249283 / MA3EUA61S00E96524	LCC Including Driver	5
Type of Body	NA	Total Premium (₹)	12671
RTO Location	WEST BENGAL - Barasat	Total IDV (₹)	0.00
Vehicle Category	Taxi	Vehicle Usage Type	Others
Vehicle Usage Sub Type	50	-03	350

Premium Summary			
Own Damage - Section I	Amount (₹)	Liability - Section II	Amount (₹)
Basic OD	0.00	Basic Liability (TPPD 1)  Total Basic Liability Premium  PA Benefits - Section III  Legal Liability to paid driver and/or Conductor and/or cleaner	10,688.00 <b>10,688.00</b> 50.00
TOTAL OWN DAMAGE PREMIUM	0.00	TOTAL LIABILITY PREMIUM TOTAL PACKAGE PREMIUM (Sec I + II + III)	10,738.00 10,738.00
		CGST (@9.00%) SGST (@9.00%)	966.00 966.00
TOTAL PREMIUM PAYABLE (₹)			12,671.00

GSTIN:19AABCR6747B1ZD, HSN:997134 Description of services: Motor vehicle Insurance Service

NA

Hypothecation/Lease

Subject to I.M.T.Endt.Nos. & Memorandum printed/herein/attached hereto. IMT 40

"As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year."

The Customer Information Sheet (CIS) for this product is available on our website

https://www.reilancegeneral.co.in/insurance/about-us/downloads.aspx					
Limits of liability		(a) Under Section II (1)(i) of the Policy-Death of or bodily inju			

ury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988. (iii) PA cover for owner driver under section III CSI ₹0 (b) Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or

in the custody or control of the insured up to the limits specified- (TPPD 1 Sum Insured - ₹7,50,000/-, TPPD 2 Sum Insured - ₹6.000/-).

Limitations as to use The policy covers the use only under a permit within the meaning of Motor Vehicle Act, 1988 or such a carriage falling under sub-section (3) of Sec 66 of the Motor Vehicle Act, 1988. The Policy covers use for any purpose other than: (a) Organized racing (b) Pace making (c) Speed testing (d) Reliability trials.(e) Use whilst drawing a trailer except the

towing (other than for reward) of any one disabled mechanically propelled vehicle.

Persons/Classes of persons Any person including insured: entitled to drive:

Provided that a person driving holds a valid driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided that the person holding a valid learner's license may drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the

Central Motor Vehicles Rules, 1989.

22BRG708 / CERTIGO INSURANCE 9752507002 piyushkhare@certicoinsurance.com **BROKERS PRIVATE LTD** 

POS UID Aadhaar No. / PAN No. Intermediary Code/Name Intermediary Contact No. Intermediary E-mail ID

Reliance General Insurance Company Limited.

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#### Compulsory PA cover for owner driver :

Insured is not eligible for the Compulsory PA cover for owner driver in this policy as the same has not been opted for the reasons allowed as per motor tariff and/or basis insured's declaration given below:

"I/ we hereby declare that I/ we hold an effective personal accident insurance policy covering death and permanent disability (total & partial) and/ or compulsory personal accident (CPA) for owner driver in other vehicles; whereby the Sum Insured limit is of Rs 1,500,000 or more in all such above mentioned conditions."

In case you have missed it, please opt for compulsory PA cover by payment of additional premium as applicable .Liability of insurance company shall commence from the date of receipt of such additional premium.

"It is hereby declared and agreed that all pre-existing damages to the vehicle having occured prior to the commencement of cover are excluded from the scope of the policy.

The policy wording with detailed terms, conditions and exclusions are available on our website www.reliancegeneral.co.in

Consolidated Stamp duty Paid vide Letter of Authorization "NO LOA/ENF-1/CSD/62/2024-25/(Validity Period Dt. 01/10/2024 to Dt. 01/12/2025)/4634 Date 25-09-2024" at General Stamp Office, Mumbai.\*\* Not Applicable for the State of Jammu & Kashmir

This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017.

#### **Statutory Provisions:**

"As per Section 146 of the Motor Vehicle Act, 1988 it is Mandatory to have your vehicle insured against third party risk."

As per Section 196 of the Motor Vehicle Act, 1988 driving an uninsured vehicle is punishable with fine or Rs. 2000 and/or imprisonment up to 3 months for the first offence and fine of Rs. 4000 and/or imprisonment up to 3 months for the second offence."

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

Note: In the event of dishonor of cheque, this policy document automatically stands cancelled from inception irrespective of whether a separate communication is sent or not.

#### Safeguard your transaction by paying your premium via crossed cheque/DD in favour of Reliance General Insurance Co. Ltd.

The policy has been issued based on the information provided by you and the policy is not valid if any of the information provided is incorrect. Subject otherwise to the terms, conditions and exclusions of the Reliance Miscellaneous and Special Types of Vehicles Package Policy Certificate Cum Policy Schedule. In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Proposal/Covernote No. as mentioned in the policy.

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Cal centre/Policy issuing Branch (Applicable for policies booked without Registration No of vehicles).

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'. For legal interpretation, English version will hold good. In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change. As per National Highways Authority of India, kindly ensure to affixed FASTag on your vehicle.

#### Grievance Clause:

For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 02248903009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located.

Shri. K. B. Saha Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax: 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in

Note: Kindly acknowledge the receipt of this policy. In case you find any variations against your proposal or any discrepancy in the policy, kindly contact us immediately.

#### Fast Tag ID -

The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)

In the unfortunate event of a claim, please call quoting your Policy No. on 022 48903009(Paid) and register your claim immediately within 7days from the date of loss. For Customer service, please call along with your Policy No. on 022 48903009 (Paid) or visit www.reliancegeneral.com

In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal.

Special Conditions: NA

For Reliance General Insurance Co. Ltd.

**Authorised Signatory** 

Reliance General Insurance Company Limited.

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### **POS - A Policy for Act Liability Insurance**

## (Commercial Vehicle-Liability Insurance proposal Form)

(The liability of the Company commences only when this proposal is accepted by the Company and the premium is received.)

✓ PCV	GC	V	MISC D		C		
For Office Use Or	nly						
Policy Number	1506224235300179	936	00	Date		Me	
Intermediary Deta	ils (To be filled in	BLOCK LETTERS)					
Intermediary Name Branch Name Sales Manager Name	Kolkata II Bapi Halder	ANCE BROKERS PRIVA	.00	Code Code Code	22BRG708 1506 70786920		Q.ellis
Proposer's/Owner	Details (To be fil	ed in BLOCK LETT	ERS)				
1. Proposer's/Owner's	s Full Name Mr.	Mrs. Ms.	MITHU BISWAS	Call S		dille	
Flat/Building/Door Area Pin Code Phone Emergency Conta Email  3. Occupation / Busin 4. Type of Cover 5. Period of Insurance 6. UID Aadhaar No. 8. Fast Tag ID 9. Do you have a GS	700130 act No. S****** ess e Froi	BATI  State WEST BENG  **@gmail.com  Others Liability Only Policy	C GAL C M BI Fa	oad /Street/Sector ity ountry obile ood Group ax To 09/11/202	3 NO CHANDIGAF BAZAR MADHYAM BARASAT - II India 8240******		RAM
10. Source of Funds 11. Monthly Income	B U	usiness Profess pto `20,000 `20,	sion Salary 001 to `50,000	Agricultura		Savings 001and above	Others
Details of the Veh	100	1200		70.	50		S. 637
<ol> <li>Registration Number</li> <li>Registering Authorit</li> <li>Year &amp; Month of Matter</li> <li>Chassis Number</li> <li>Type of Body/Mode</li> <li>Gross Vehicle Weig</li> </ol>	ty & Location WE anufacture SE MA	325K0037 EST BENGAL - Barasat P-2019 3EUA61S00E96524 /ALTO 800	16. E 18. N	Date of Registration Engine Number Make of Vehicle Cubic Capacity	F	8/11/2019 8DN6249283 IARUTI SUZUKI 96	560
<ul><li>22. Max. Licensed carr</li><li>23. Seating capacity (li</li></ul>		ssengers) in case of Pass 5	senger carrying vehicle	s 4	and.		313



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74004 22200	0

otoile of the Vehicle	. Type and Hea	08	- 17	0	
etails of the Vehicle			. 70		
	is driven by Non-convention	nal source of power?	(B)	Bi Fuel CNG	✓ No LPG
If Yes, please give	all o		0	Bi Fuel CNG	LPG
Do you have a valid Pl	JC? ✓ Yes	No	Co	-017	4
the date of commencemen	t of the Policy and undertake	s to renew and maintain a valid a	on Under Control (PUC) Certificate ar nd effective PUC and/or fitness Cert	ificate, as applicable, during th	
1	2.0	F. 300	of any discrepancy in the PUC or fitne		
-50	hicle is limited to Own Prem	CA.		Yes	✓ No
100	Jan (1)	rivate purposes (excluding use	for hire or reward)'?	Yes	No
Whether the Vehicle is	used for Driving Tuitions?		and the same of th	Yes	✓ No
ability Coverage					
Coverage for liability a	gainst Third Party Risks (D	eath or Bodily Injury) required in	respect of:	Old I	80
i) Owner Driver Only		The same of the sa		Yes	No
ii) Any person other th	an Paid Driver	7/2	erio eri	Yes	No
If 'Yes', give details of	such other persons	6, 11,	S. Caller		
a	26,	20	The same of the sa		
b	200		200		
C			97.2	· Ver	
Note:	100	- 20	-87	addition	
1. Section 146 of Moto	r Vehicle Act-1988 makes it	mandatory for the owner of the v	vehicle to ensure that he or any other	er person authorized by him to	drive a
			ection 146 exempts the paid driver	C.	
2. As per Section 147	(2)(a) the liability is 'as incur	red' in the case of death/bodily in	niury of a third party		
NOW.	A	tory TPPD Liability limit of ₹ 600		□ Vec	V No
7.4			red under theLegal liability to perso	165	V No
		le who are 'workmen'.Motor Veh		ns res	V NO
a. Drivers	No. of perso		noice / let 1000	63	
b. Employees (Workm	W. A. C.		- C	000	
1.76	CHONA T		yees who are workmen within the m	neaning of the	50
Workmen's Compensa		( ) ( ) ( )	8	630	
The Policy provides ad	ditional Third Party Property	Damage liability limits of ₹.1,00	0,000/- for Two Wheelers and ₹.7,50	0,000/- Yes	No
for other classes of veh	nicles. Do you wish to cover	the additional limit?	· //	-00	
Do vou wish to cover v	vider legal liability to employ	rees who are 'workmen'?	THE STATE OF THE S	☐ Yes	No
		ability under the Workmen's Cor	mpensation		
Act 1923, also liability u	ınder the Fatal Accidents Ac	t 1855 and the Common Law)	1	(0)	
Note: The additional	liability under Common Law	and Fatal Accidents Act in resp	ect of employees who are workmer	n is covered	
under this endo	prsement	"Illo	00	Ola,	50
Do you wish to cover y	vider legal liability to employ	/ees who are NOT 'workmen'?	.0	Yes	No
			n respect of employees who are NC		
endorsement	ilability under Common Law	and ratar/toolacints/tot 1000 ii	respect of employees who are re-	or workmen is severed under	uno
Personal Accident Cov	ver for Owner Driver is com	oulsory in the Liability Only Cove	er. Please give details of nomination	u.	
	- 23			Relationship to the	
Name of the No	minee Age	Relationship	Name of the Appointee	Nominee	
- 61	200	6.3	25	00	
Note:	100	160	58	The same	- 50
I) Personal Accident co	over for owner driver is com	oulsory for Sum Insured of ₹15 (	00,000/- for Two Wheeler, Private (	Car GCV PCV and Misc-D	
			ned by a company, a partnership fir		or
	does not hold an effective of		D. Aller		
1000	0	0.00	The same	dillo	_
	Personal Accident Cover for	•	and the same	Yes	No
If 'Yes', give name and	Capital Sum Insured (CSI)			70.00	
Nam	ie	CSI Opted (₹)	Nominee	Relationship	- 1

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	0		7 75	1	7.0
	Note: The maximum CSI available per person is	₹.2,00,000/- in case of Commercial	Vehicles	86.	110
36.	Do you wish to include Personal Accident cover for Wheelers)?	or Un-named Passengers/hirer/pillion	ı passengers(Two	Yes	No
18	If 'Yes', give number of persons and Capital Sum	Insured (CSI) onted:		G	
	No of persons:		er person):		
	<b>Note:</b> The maximum CSI available per person i			. 60	
	Note. The maximum CSI available per persont	s <.2,00,000/- iii case oi commercia	i verildes	All I	
37.	Do you wish the Geographical Area of the coverag	e by the policy to be extended to the t	following countries?	- Phi	
	Please tick relevant boxes.		11		- 16
	Bangladesh		200	000	Alle
	Bhutan	1000	-011	Coll.	800
-8	5 - Call 1 -	CLEDY.	0	60	
	Maldives	The said	9	5	
	Nepal	to the	100	do.	
	Dekisten	20	11/20	All Property and the Control of the	
	Pakistan		100	110	
	Sri Lanka		1/1/	100	
	Note: Presently the territory covered is geograph	ical area of India. Extension of geogr	aphical area cover can be ava	iled by use of this endorsemen	t.
De	tails of Previous History				
38.	Date of purchase of the Vehicle by the Proposer:	Charles of the Control of the Contro	G	08-Nov-2019	<u> </u>
39.	Whether the vehicle was new or second hand at the	e time of nurchase?		New Second	
40.	Will the vehicle be used exclusively for:	e une of parchase:	MILLE	INEW Second	i iai iu
40.	i) Private, Social, Domestic, Pleasure & Profession	nal Purpose?	- Allo	Yes	No
	ii) Carriage of goods other than samples or person		100	Yes	No
41.	Is the vehicle in good condition?		Alle.	Yes	No
	If 'No' please give		of a	03	- Alle
	details	200	-010	Alb.	550
-0	29	All.	G.	-01	
42.	Name of the previous insurer M/s. Reliance	General Insurance Company Ltd.	0	5	
43.	Address of previous insurer -	E) 185	100		
	Flat Building	201	Road /Street/Sector	160	
	C0.	- 40	450	100	
	Area	01.1	City	200	
	Pin Code	State	Country Mobile	AL.	110
	Phone Email	100	Fax	416	6500
10	T. 171	ALL STATES	I ax	-0	
44.		23530025530		No.	
45.		05/11/2023 To	04/11/2024		
46.	Claim lodged during the preceding 3 years	200	100	200	
	Year	No. of claims		Claim Amount (₹)	
			- 2	71/2	
	- LD		10,	- 10	100
Dr	iver Details		- 0.5	. 2001	400
47.	Date of Birth of the Owner:	100	Age:	H. G	
48.	Date of Birth of the Driver:	- Chi	Age:	100	
49.	Does the driver suffer from defective vision or hea	ring or any physical infirmity?		Yes	No
	If 'Yes', please give details of such infirmity			110	
50.	Has the Driver ever been involved/convicted for ca		100	Yes	No
	If 'Yes', give details as under including the pending	prosecutions:	111		
	Driver's Name:		30	050	1/2
	Date of Accident:	1000	Loss / Cost (₹)	200	0.81
			and the second		

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Circumstances of Accident / Loss:

Details of Hire Purchase / Hypothecation	n / Lease			
51. Please state if the vehicle is under	Hire Purchase	Lease Agreement	Hypothecation Agreement	600
If so, give name and address of concerned party/	parties.	G	50)	
Full Name M/s	The same of the sa	.00	.0	
Address	100	Pin Code	D. Day	
(Note: Copies of R.C.Book, Permit & Fitness Cer	rtificate should be submitted	d along with the Proposal Form)	Ko. Alle	
Payment Details				
Cheque		DD	63	
Cheque or DD Amount		Amount in words	00	20
Bank Name	1/10	00	Ole,	800
Cheque/DD No.	" Tilly	Cheque/DD Date	_C.	
Proposer's Bank Details	100	5(9)	,55	
52. Name of the Bank Account Holder	Mr. Mrs. N	Ms.	(1975) (1975)	
53. Bank Account No.:		54. Account:	Saving	ent
55. Name of the Bank		111		
56. Branch	14.	all a	ale s	1
57. MICR Code (9 digit MICR code number of the ball	nk and branch appearing or	n the cheque	100	050
issued by the bank)	(All)	G	50	
58. IFSC Code (11 character code appearing on your		000		
I understand that any refund due on the premium	1600	3,500	aforesaid Bank Account .*	
* As per IRDAI, its mandetory that all payments made t	to the insured are only throu	igh electronic mode.	(6, 160	
GENERAL DECLARATION:				
I understand that as per the new AML/CFT Guidelines	issued Reliance General In	nsurance Co. Ltd will be verifying r	ny details pertaining to KYC and PAN pro	vided at
the time of proposal.  I further, do hereby agree and consent that in the case	of the event of a mismatch	of information provided by me in th	as pranagal form identification pract and	oddrooo
proof at the time of issuance of the policy. I request Re				
form. I will be solely responsible for any consequences	arising out of the difference	e in detail given by me during the	verification of supporting documents provi	ded by
me at the time of issuance of the policy or otherwise.		40	-0	
PEP Declaration:				
Are you a Politically Exposed Person (PEP)?		☐ Yes ▽	7 No	
G.		165 <u>v</u>	NO	
If yes, please mention the position held	160	200	ales	-3
Is any of your close relation or family member a PEP?	The Co	☐ Yes ✓	/ No	850
If yes, please mention the name and relation and the po	osition held	- 0	G	
by such close relative/family member.	d	The same	200	
I hereby declare that in future if me, any of my close re Insurance Co. Ltd as a mandate. I understand that this				
given by me is true. In case the company comes to kno				
scrutiny by the company and I shall be solely responsible	· ·	1110		
Note:	100	30	The same	- 10
"Politically Exposed Persons" (PEPs) are individuals w States/Governments, senior politicians, senior governments, senior politicians, senior governments, senior governments, senior governments, senior governments, senior politicians, senior governments, senior politicians, senior governments, senior politicians, senior governments, senior politicians, senior governments, senior gove			3, 3,	officials
etc (As per sub clause (xii) of 3(b) of Chapter I of Mast				micials,
	2.30		, ,	

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#### Declaration

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 RELIANCE General Insurance Company Limited. I/We also declare that, if any additions or alterations are carried out after the submission of this proposal form, then the same would be conveyed to the insurers immediately. I/We hereby declare that the contents of the form and document shave been fully explained to me/us and that I/We have fully understood the significance of the proposed contract. I/We agree to accept a policy subject to the condition prescribed by the company. I/We declare that the rate of NCB stated above by me/us is correct and that no claim has arisen in the expiring policy (copy of the policy enclosed). I/We further undertake that, if this declaration is found to be incorrect, all benefits under the policy in respect of section I of the policy will stand forfeited. •I/We further understand and agree that RELIANCE General Insurance will seek confirmation of above stated details from my/our previous insurers. Pending receipt of necessary confirmation, I/We agree that, though coverage under the policy will be available to me/us, RELIANCE General Insurance will be liable to release the payment towards any claims under section I of the policy only after a confirmation in this regard is received. In the event this declaration is found to be incorrect, any and all coverage available undersection I of the policy from the date of commencement of the policy shall stand automatically forfeited. Further, any survey arranged/allowed by RELIANCE General Insurance of the motor vehicle, pending confirmation of the declaration from my/our previous insurers, shall be without prejudice to any of the rights and remedies available to RELIANCE General Insurance as contained herein and under the relevant laws and regulations.◆I/We acknowledge and agree that, Pending receipt of confirmation of the declaration from my/our previous insurers, the "cash-less repair facility" provided by RELIANCE General Insurance shall stand suspended.♦I/We also shall endeavour toprocure the renewal notice and pass on the same to RELIANCE General Insurance immediately upon the receipt of such renewal notice. Mode of Payment: Secure your payment by cheque/DD favouring Reliance General Insurance CO.Ltd. This policy shall be voidable at the option of the Company in the event of mis-representation, misdescription of non-disclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other persons, files aproposal fo insurance containing any false information, or conceals for the purpose of misleading, information, information concerning any fact material thereto, commits afraudulent act which will render the policy voidable at the company's sole discretion and result in a denial of insurance benefits. I further agree and undertake not to receive from Reliance General Insurance Company Limited any rebate other than that mentioned in the published prospectus in accordance withthe provisions Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment)

I/We here by state that the above mentioned address shall be taken as address on record for the purpose of GST.

I/We hereby confirm that the contents of the proposal form and connected documents have been fully explained to me/us and I/We have fully understood the significance of the proposed contract.



You can support our Go Green I	nitiative by saying "No"	to Policy kit, Renewal No	tice and Other Commu	nications hard copy. V	ve will be sending you a
digitally signed soft copy on you	registered Email ID &	Mobile number.		C.	
Hard copy required	Voc	No		(5)	

Place : Date: 09 Nov 2024 05:04

Signature of Proposer

#### Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment ) Act, 2015

- 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 liable for a penalty which may extend to ten lakh rupees.

Note: Denial of "Third Party Liability Only Cover" by Insurer, for reasons other than fraud/misrepresentation by Proposer, will entail Regulatory action.

#### IMPORTANT NOTICE

- 1. In the event of a claim, please immediately call our 24 hour call centre only. Improper intimation or delay in intimating claim to call centre can lead to delay in settlement/denial of claim.
- 2. For preferred cashless garage list, please logon to our website or speak to customer care executive. RGICL cannot provide cashless claim settlement at garages other than those in our network list\*.
- 3. Please intimate us your mobile number and we shall keep you updated of the status of the claim by way of SMS periodically . You can download our claim form and claim procedure.

Also view claim status on our website.

Insurance is the subject matter of solicitation.

\* conditions apply.

The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company