







Mr. ASHIS KIRTUNIA SISHU TIRTHA BAMANGACHI NORTH 24 PARGANAS WEST BENGAL WEST BENGAL BAMANGACHI WEST BENGAL India - 743248

## From here on, you're our responsibility.

Welcome on board.

Your Reliance Commercial Vehicles (Passengers Carrying 4W<6) Package Policy - Schedule, with

Number 230322423380001630 is now live to access your policy anytime, anywhere download our Reliance Selfi App and enjoy a host of special features





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) (S)



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: 2024.11.15 14:54:19 reliancegeneral.co.in © 022 4890 3009 © 74004 22200 ©

## Reliance Commercial Vehicles (Passengers Carrying 4W<6) Package Policy - Schedule

Policy Number : 230322423380001630	Proposal/Covernote No: R15112441976
Insured Name: Mr. ASHIS KIRTUNIA	Period of Insurance: From 00:00 Hrs on 16-Nov-2024 to Midnight of 15-Nov-2025
Communication Address & Place of Supply: SISHU TIRTHA BAMANGACHI NORTH 24 PARGANAS WEST BENGAL WEST BENGAL BAMANGACHI, NORTH 24 PARGANAS, WEST BENGAL, India, 743248.	<b>Policy Issuing Branch</b> : Shop No - 516, 5th Floor, National Corporate Park, Commercial Complex, G E Road,, RAIPUR, CHHATTISGARH, 492099.
Mobile No: 7044*****	Tax Invoice No. & Date: R15112441976 & 15 Nov 2024 02:54
Email-ID: d********@gmail.com	GSTIN/UIN & Place of Supply: WEST BENGAL
7	

Insured Vehicle Details			
Registration No.	WB25J8159	Mfg. Month & Year	JUL-2019
Make / Model & Variant	MARUTI SUZUKI CELERIO TOUR H2	CC / HP / Watt	998
Engine No. / Chassis No.	K10BN2244216 / MA3ETDE1S00653710	LCC Including Driver	5
Type of Body	SALOON	Total Premium `	14427
RTO Location	WEST BENGAL - Barasat	Total IDV `	280,000.00
Manufacturer fully build in	Yes	Hypothecation/Lease	Mahindra And Mahindra Fin Ser Ltd / KOLKATA
Vehicle Category	Taxi	Vehicle Usage Type	Others
Vehicle Usage Sub Type	- CF		35

Insured Declared Value (IDV)					
Chassis IDV	0.00	Non Electrical Accessories	0.00		
Body IDV `	0.00	CNG / LPG Kit	0.00		
Vehicle IDV `	280,000.00	Trailer / Side Car	0.00		
Electrical / Electronic Accessories	0.00	Total IDV `	280,000.00		

Premium Summary			
Own Damage - Section I	Amount (`)	Liability - Section II	Amount (`)
Basic OD	2,289.70	Basic Liability (TPPD 1)	10,688.00
Total Basic Own Damage Premium	2,289.70	Total Basic Liability Premium	10,688.00
Less		PA Benefits - Section III	
Deduct 35 % for NCB	-801.40	Legal Liability to paid driver and/or Conductor and/or	
Sub Total of Deductions	-801.40	cleaner	50.00
		TOTAL LIABILITY PREMIUM	10,738.00
		TOTAL PACKAGE PREMIUM (Sec I + II + III)	12,226.00
		IGST (@18.00%)	2201.00
TOTAL OWN DAMAGE PREMIUM	1,488.00		
TOTAL PREMIUM PAYABLE (`)			14,427.00

Subject to I.M.T.Endt.Nos. & Memorandum printed/herein/attached hereto. IMT 40,22,7

GSTIN:22AABCR6747B1ZQ

HSN: 997134, Description of services: Motor vehicle Insurance Service

"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."

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

22BRG708 / CERTIGO INSURANCE BROKERS PRIVATE LTD	9752507002	piyushkhare@certicoinsurance.com	all land
Intermediary Code/Name	Intermediary Contact No.	Intermediary E-mail ID	POS UID Aadhaar No. / PAN No.

The Customer Information Sheet (CIS) for this product is available on our website https://www.reliancegeneral.co.in/insurance/about-us/downloads.aspx

Limits of liability : PA cover for owner driver under section III CSI 0 (a) Under Section II (1)(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988. (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 of 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.

Reliance General Insurance Company Limited.

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Persons/Classes of persons entitled to drive:

: Any person including insured:

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

Deductible under Section-I: (i) Compulsory deductible `500/- (ii) Additional compulsory deductible `00/- (iii) Voluntary deductible `0/-

#### 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 NCB provided is on Basic OD Premium excluding Add-on wherever applicable. The policy wording with detailed terms, conditions and exclusions are available on our website www.reliancegeneral.co.in

#### 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.

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

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Call 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.

Office of the Insurance Ombudsman,LIC Zonal Office Building,1st Floor, South Wing,60B, "Jeevan Shikha" Hoshangabad/Narmadapuram Road,Bhopal(MP) 462011. Tel.:- 0755-2769201, 2769202 Fax: 0755-2769203 Email: bimalokpal.bhopal@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. 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

Policy has been issued with reference to vehicle inspection report, reference lead no. & special conditions. The inspection report remarks can be viewed on company's website by the lead no.

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reliancegeneral.co.in (s)
022 4890 3009 (s)
74004 22200 (s)

For Reliance General Insurance Co. Ltd.

**Authorised Signatory** 



### **Risk Assumption Letter**

Dear Mr. ASHIS KIRTUNIA

Thank you for choosing Reliance General Insurance.

Please find enclosed policy no.: 230322423380001630 which has been issued based on the details declared by the applicant.

Insured Vehicle Details				
Registration No.	WB25J8159	Mfg. Month & Year	JUL-2019	
Make / Model & Variant	MARUTI SUZUKI CELERIO TOUR I	H2 CC / HP / Watt	998	
Engine No. / Chassis No.	K10BN2244216 / MA3ETDE1S006537	710 LCC Including Driver	5	
Type of Body	SALOON	Total Premium `	14427	
RTO Location	WEST BENGAL - Barasat	IDV `	280000	
Manufacturer fully build in	Yes	Hypothecation/Lease	Mahindra And Mahindra Fin Ser Ltd / KOLKATA	
Insured's Declared Value (ID)	<b>/</b> )			
Chassis IDV `	2.	0.00 Non Electrical Accessories `	0.00	
Body IDV `	71.70	0.00 CNG / LPG Kit `	0.00	
Vehicle IDV `	ALC:	280000 Trailer / Side Car `	0.00	
Electrical / Electronic Accessor	ies `	0.00 Total IDV `	280,000.00	
Previous Policy Details				
Previous Year Policy No.	Period of Insurance	Previous Policy-Claim S	Status	
334027/31/24/009917	From: 16/11/2023 To: 15/11/2024 n	midnight Yes	✓ No	
Cover Electri	FOLLOWING COVERS IN Damage + Third Party Coverage cal/electronic accessories lectrical accessories lkits comprising LPG/CNG systems	Selfance Ge.	died	
Add-on Covers	-010	100	130	
Nil Depreciation Cover	No deduction for depreciation on	vehicle parts other than tyres and tubes with respect of approved	d partial loss claims.	
Additional towing Charg	Provides cover for towing charges Insured - ` 0/-)	s over and above the standard policy guideline as per the cover of	opted by customer (Sum	
Additional Limit of TPPE		Indemnify the Insured for an additional TPPD amount opted for damage to property other than the property belonging to the Insured or held in trust or in custody of Insured.		
Emergency Hotel Accommodation	Provide allowance towards the H provided in policy copy.	lotel accommodation insured vehicle met with accident/ stolen 20	00 kms away from the location	
Please take a moment to careful	ly check your policy details mentioned at	have and in the policy schedule. Kindly confirm that the same are	in order. In case of	

Please take a moment to carefully check your policy details mentioned above and in the policy schedule. Kindly confirm that the same are in order. In case of discrepancies, please let us know immediately. You can write to us at rgicl.services@relianceada.com or call us 022 48903009(Paid) for necessary changes/rectification. 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. Non disclosure and/or misrepresentation of claims in the previous policy period can lead to cancellation of your policy or rejection of your claims

(Note- Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.)

For Reliance General Insurance Co. Ltd.

**Authorised Signatory** 

## **Know your policy**

Remember to carefully go through the Risk Assumption Letter and confirm your personal as well as your vehicle details.

In case of any discrepancy in the policy details, kindly revert within 15 days from the policy start date on 022 48903009 (Paid) or visit any of our branches. Kindly refer to the Key Feature Document and Policy Wording at www.reliancegeneral.co.in to understand your policy better and learn more about the policy coverages, add-on covers and Policy Exclusion. This document is a statement of the specific provisions that form the Terms and Conditions of this Policy.

## What documents do you require for making any change to your policy

- 1. Changes in vehicle make & model/cubic capacity/seating capacity/engine & chassis no./year of manufacture/registration no./ location/address
- Documents required: Letter for change, policy copy and registration certificate copy along with additional premium cheque, if applicable.
- 2. Changes in electrical and non electrical accessories/CNG/LPG kit
- **Documents required :** Letter for addition, policy copy, invoice copy of accessories, endorsed registration certificate copy (for CNG/LPG kit) and cheque for additional
  - premium
- 3. Changes in financier details (Hypothecation/Lease/Hire purchase)
- Documents required: Letter for change, policy copy, endorsed registration certificate copy and no objection certificate from financier (not mandatory for deletion, if
  - registration certificate copy is endorsed).

## How to register a Claim - Cashless



Report vehicle at Network Garage



Claim registration by Network Garage



Survey, Document verification, Loss Assessment & Re-inspection



Cashless Amount Confirmation



Vehicle Delivery

## How to register a Claim - Reimbursement



Registration of Claim



Report Vehicle at Garage



Survey,Document verification,Loss Assessment and Re-inspection



Vehicle Delivery



Submission of Original Repair Bills + Payment Receipt



Claim Settlement to Customer

## What documents do you require to register a Claim

- 1. Claim form duly filled and signed (company stamp in case of company registered vehicles)
- 2. Registration copy
- 3. Driving License of the driver at the time of loss
- 4. Policy copy
- 5. Vehicle fitness certificate
- 6. Vehicle route permit
- 7. Vehicle carriage permit
- 8. Road tax copy
- 9. Load Challan (if applicable)

Note: 1. As soon as a claim occurs, please intimate immediately to our call centre 022 48903009 (Paid). Delay in intimation would result in the violation of policy condition.

2. Any additional document, if required, will be informed.



The content on this page is for additional information & Should not be considered as part of the policy document/Schedule

#### Reliance General Insurance Company Limited.

#### IRDAI Registration No. 103



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## Proposal Form for POS Reliance Commercial Vehicles Package Policy (Other than Motor Trade Internal Risks Policy)

The	Insurer may seek any other	d below are the minimum requinformation as desired for unicles with suitable amendme	der for underwriting purpos	e.)	Coluly	g.
<b>~</b>	PCV	GCV	MI	SC D	Trailer	6
Fo	or Office Use Only	200			75	
		230322423380001630		D	ate	- lu
	vion Reference No.	67		Inspection Lead		( )
Int	termediary Details (T	o be filled in BLOCK I	ETTERS)	20		
	210	100	W. W. J.	0	-d- 00DD 0700	V-
		CERTIGO INSURANCE BRO	KERS PRIVATE LTD		ode 22BRG708 ode 2303	
	8.50	Raipur Yashwant Sahu		6.00	ode 71006045	
	S PAN No.	rasilwant Gand		*POS UID Aadhaar		- do
	etails (To be filled in l	BLOCK LETTERS)	-6/	. GG GID / Idail Idail	700	1907
1.	This Proposal is for	A new Policy	Renewal of Policy	/ Endorseme	ont Othe	rs (Please specify)
	-			Lidorseine		is (i lease specify)
2a.	Proposer's Full Name	✓ Mr. Mrs.	ASHIS KIRTUNIA	20	000	20
2b.	Address	Address for Comm	unication	Address where ve	ehicle is normally kept ar	d Used
					Co	
	Flat/Building/Door/Block Road /Street/Sector		AMANGACHI NORTH 24 T BENGAL WEST BENGA	500	-0	
	Noau /Stree/Sector	FARGANAS WES	I BENGAL WEST BENGA	0	William .	100
	Nearest Landmark	~D	00		The state of the s	The same
	Area	-00				The
	City	BAMANGACHI		all the		
	Pin Code	743248		25		-01
	State	WEST BENGAL	200	-00	All.	Sr.
	Country	India	All III	Co.	20,	
	Phone	3	Ø	Mobile	7044*****	
	Emergency Contact No.	(Files	45	Blood Group	The contract of	
_	Email	d*******@gmai		Fax	10005	Me
3.	Period of Insurance	From 16/11/2		To 15/11/		On to me
4. -	Source of Funds	Business	Profession		tural Income	Savings 0,001and above
5. 6.	Monthly Income UID Aadhaar No.	Upto `20,000	`20,001 to `50,000	50,001 to `1 7. PAN No.	00,000 1,00	0,00 rand above
o. 8.	Fast Tag ID	OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLUM	1860	7. FAN NO.		
0		The state of the s	Colonia Coloni	0.0	-0	
De	etails of the Vehicle			AU.	_0	
9.	Registration Number	WB25J8159	123	10. Date of Registrat	ion	08/08/2019
11.	Registering Authority & Lo		AL - Barasat		AL DE	Allen .
12.	Year & Month of Manufacto		100	13. Cubic Capacity		998
14.	Engine Number	K10BN2244210		11		100
15.	Chassis Number	MASETDE1S0		S. C.	200	
16.	Make of Vehicle	MARUTI SUZ		- Clare	200	650
17.	Type of Body/Model	SALOON/CELE	ERIO	G	-0	
18.		VW)/Cubic Capacity (C.C.)	□ Hea	ardaya Caada	Non-Hazardous G	`aada
19.	Goods type (Applicable or Is the Vehicle made in Indi		паг	ardous Goods	✓ Yes	
<ul><li>20.</li><li>21.</li></ul>		ar apacity (No. of Passengers) ir	n case of Passenger carnin	na vehicles	4	No
22.	Vehicle Category	Bus	✓ Taxi	ig verillies	7	160
	Vehicle usage type (Applic	and the same of th	Contract Carriage	Stage Carriage	e Private Usa	age
		Applicable if Contract Carriage			loyee pickup Bus	Others
23.	Seating capacity (Includin		, , , , , , , , , , , , , , , , , , , ,		7 1 7 1 7 20	\$100
		The second	alle	0	- 05	

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tails of	the Vehicle Type and Use					
	her the Vehicle is driven by Non-conve	ntional source of power?	☐ Yes ✓	No If yes Bi Fuel	CNG	LPG
	d's Declared Value of vehicle Chasis Non - electrical accessories fitte vehicle ( )			PG Kit Bi Total Value (	)	0
280,000	0.00	0.00	0.00	280,000.00		
b. Do vo	ou have a valid PUC? Yes	No	TION.	all the	0.0	
	Varranted that the insured named herein/	owner of the vehicle holds a val	lid Pollution Under Control (PU	C) Certificate and/or valid fits	ness certificate	e, as
	ole, on the date of commencement of the sistence of the Policy. Further, the Comp					
- 25			200	others	nariodo dorano	uto.)
250	of Driver: (a) Age of Owner Drive e driver suffer from defective vision or			Yes	No	- 8
	please give	Troding of any physical minima	.y.			
details	160	12	, C°	-5		
	200		(40)	100		
Has the	driver ever been involved for causing a	any accident or loss?		Yes	□No	
	please give details as under including the		(10)			
A.C	-0	W.	10	de		
D.O.B.	different		or Con	900		- 0
Add On	Covers (Subject to availability and elig	gibility)	Go	-01		
(a)	Easy Monthly Instalment (EMI) Protect	ction Cover: (RGI-MO-A00-00-	-17-V01-14-15)			
	If Yes, please choose any one option;	AST TO SERVICE STATE OF THE SE	Ald I	MIC		
	Plan I - 1 EMI, EMI Amount :	D'	70,	The state of the s	dillo	
	Plan II - 2 EMIs, EMI Amount :		10	2	OR.	
	Plan III - 3 EMIs, EMI Amount :		01			
100		ob.	100	100	No	
	Additional Towing Charges	"Illia"	Go.		No	
	Nil Depreciation Cover:	The same	50		No	
. ,	Total Cover	(3)	" Aller	20	No	
	Voluntary Deductible	00	Oliver and the second	The same of the sa	de	
	Voluntary Deductible amount opted: _		10	3	AL.	
1	Emergency Hotel Accommodation			(A)	No	
A 25	Benefit Amount:	6.	ART .	-00		
(0)	Additional limit of TPPD	All to	00		No	
	Additional amount opted:	The same		0.7		
(h)	Personal Belongings Cover	ta	THE	200	No	
	Benefit Amount:			of the	Me.	
(i)	Daily Allowance Benefit			all a	No	
	Per day allowance amount opted :			- 4	× .	
MIL	Coverage Days opted:		010	dille		
(j)	Daily Allowance Benefit Plus	100	cen	all ships	No	- 5
	Per day allowance amount opted:	They.	_0	Co		
	Coverage Days opted:		W. C.	-CE		
	Tools and Equipment Cover	all	110	an	1000	
	Any other Details	88	1	m.	160	
(1)	Tury other betails		110		100	
	7	2470	43	200		

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Registered & Corporate Office: Reliance General Insurance Company Limited, 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063.

If Yes, please attach certificate of Installation in the vehicle, issued by Automobile Association of India.



reliancegeneral.co.in	0
022 4890 3009	0
74004 00000	1

28. 29. 30. 31.	Are you a member of Automobi Whether the Vehicle is used for Whether use of Vehicle is limite	or Driving Tuitions? ed to Own Premises?	3.	ord In	n.	Yes No Yes No Yes No Yes No
- 00	Whether the commercial vehicle		purposes (excluding	use for fille of feward)?	offer	
32.	Whether the Vehicle belongs to		of a Foreign Country			Yes ✓ No     No
33.	Whether the Vehicle belongs to	4.5	or a Foreign Country	The same of the sa	100	Yes No
24	If so, is the duty element include		ad/Mantally Challans	and Doroon?	Age.	☐ Yes ✓ No
34.	Whether the Vehicle is design for		ed/Mentally Challeng	ged Person?	77	Yes ✓ No 08/Aug/2019
35.	Date of purchase of the Vehicle Whether the Vehicle at the time	34.30		111	Now	Second Hand
36.	whether the vehicle at the time	e or purchase was	22	20	New	Second Hand
Ris	k Inclusions	AN	1000			
37.	Do you wish to restrict the abo	ove limits to the statutory	TPPD Liability limit of	of 6000/- only?	-01	Yes No
	Do you wish to cover legal lia (a) Driver/Conductor /Cleane (b) Other employees (No. of F (c) Non-fare paying passenge	er (No. of persons) Persons)		cellarice . e	trance C	Yes No Yes No
38.	Do you wish to include personal If Yes, give name and Capital Slakhs for other classes of vehic	Sum Insured (CSI) opted for			akh in the case of Motori	Yes No No sed two wheelers and 2
39.	Personal Accident Cover for Ov	wner Driver. Please give o	letails of nomination	Co	-01	
	Name 1	Name of the Nominee	Age of Nominee	Name of the Appointee (if Nominee is Minor)	Relationship	Address
	W.E.	3		allo-	100	100
	<ol><li>Compulsory PA cove</li></ol>	ei ioi ownei unvei cannoi	be granted where a			
40.	where the owner-driver Do you wish to include Persona	r does not hold an effectiv al Accident cover Named	Persons?	Name of the Appoin	taa	Yes V No
40.	where the owner-driver Do you wish to include Persona	r does not hold an effectiv	Persons?	- oneral	tee Relationship	
40.	where the owner-driver Do you wish to include Persona	r does not hold an effectiv al Accident cover Named	Persons?	Name of the Appoin	tee Relationship	Yes V No
40.	where the owner-driver Do you wish to include Persona	r does not hold an effective al Accident cover Named SI Opted Name of N	Persons?  Nominee Age of N	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes V No
41.	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph  1. Bangladesh 2. Bhutan 3. Maldives	r does not hold an effective al Accident cover Named SI Opted Name of N	Persons?  Nominee Age of N	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes V No
41.	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph  1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal	r does not hold an effective al Accident cover Named SI Opted Name of N	Persons?  Nominee Age of N	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes V No
41.	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph  1. Bangladesh 2. Bhutan 3. Maldives	r does not hold an effective al Accident cover Named SI Opted Name of N	Persons?  Nominee Age of N	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes V No
Q	where the owner-driver  Do you wish to include Persona  Name  CS  Extension of Geographical Area Whether extension of Geograph  1. Bangladesh  2. Bhutan  3. Maldives  4. Nepal  5. Pakistan	r does not hold an effective al Accident cover Named St Opted Name of	Persons?  Nominee Age of N  Countries required ?	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes V No
Q	where the owner-driver  Do you wish to include Persona  Name  CS  Extension of Geographical Area Whether extension of Geograph  1. Bangladesh  2. Bhutan  3. Maldives  4. Nepal  5. Pakistan  6. Sri Lanka  ails of Hire Purchase / Heads	r does not hold an effective all Accident cover Named of Name	Persons?  Nominee Age of N  Countries required ?	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes No Address
Det	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph  1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka	r does not hold an effective all Accident cover Named of Name	Persons?  Nominee Age of N  Countries required ?	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes V No
<b>Det</b> 42.	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka  ails of Hire Purchase / H  Please state if the vehicle is und If so, give name and address of	r does not hold an effective all Accident cover Named Stropted Name of Name of Name at hical Area to the following stropted der foncerned parties.	Persons?  Nominee Age of N  Countries required ?	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes No Address
<b>Det</b> 42.	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka  ails of Hire Purchase / H  Please state if the vehicle is und If so, give name and address of	r does not hold an effective all Accident cover Named Stropted Name of	Persons?  Nominee Age of N  Countries required ?  Se  Hire Purchase	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes No Address
<b>Det</b> 42.	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka  ails of Hire Purchase / H  Please state if the vehicle is und If so, give name and address of Full Name Address	r does not hold an effective all Accident cover Named Stropted Name of	Persons?  Nominee Age of Nominee Age	Nominee Name of the Appoin (If Nominee is Min	tee Relationship	Yes No Address
Det 42. 43. 44. Not	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka  ails of Hire Purchase / H  Please state if the vehicle is und If so, give name and address of Full Name Address	r does not hold an effective all Accident cover Named of Name	Persons?  Nominee Age of Nominee Age	Nominee Name of the Appoin (If Nominee is Min	tee Relationship  Hypotheca	Yes No Address  tion Agreement
Det 42. 43. 44. Not The each	where the owner-driver  Do you wish to include Persona  Name CS  Extension of Geographical Area Whether extension of Geograph 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka  ails of Hire Purchase / H  Please state if the vehicle is und If so, give name and address of Full Name Address e	r does not hold an effective at Accident cover Named of Name o	Persons?  Nominee Age of Nominee Age	Name of the Appoin (If Nominee is Min  Lease Agreement  Fin Ser Ltd	tee Relationship  Hypotheca	Yes No Address  tion Agreement  d at the commencement of

Reliance General Insurance Company Limited.

Details of Previous Insurance
45. Full Name of previous insurer

IRDAI Registration No. 103

Shriram General Insurance Company Ltd.

An ISO 9001:2015 Certified Company

Registered & Corporate Office: Reliance General Insurance Company Limited, 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063.



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46.	Address		700		110	
47.	Policy Number	334027/31/24/009917	Previous Policy Ex	piry 15/11/2024	-	
48.	Type of Cover	Package Policy Liab	ility only others (to be	describe)		
49.	NO CLAIM BONUS allowed	under previous policy (%) 25		VO.		
50.	Claims taken in previous pol	icy	C	-00	Yes	✓ No
	If yes, No. of Claims	" Ite.	Claims Amount `			
51.	Are you entitled to No Claim	Bonus	and the same of th	100	Yes	No
	If yes, please submit/attached	proof thereof	all o	All Comments	1860	
Pay	ment Details					
	Cheque/ DD	-0	Cheque/ DD No.		J	
	Cheque/ DD Date		Cash Credit Ca	ard Others		
Pro	poser's Bank Details					
52.	Name of the Bank Account H	older	Call	alle 1		80
53.	Bank Account No.:	The state of the s	54. Account:	Saving	Cur	rent
55.	Name of the Bank	1/2	STON.	-50		
56.	Branch	W. C.	110		-65	
57.	MICR Code (9 digit MICR cod	de number of the bank and branch appear	ing on the cheque issued by the bank)	Special	Contract of the Contract of th	
58.	IFSC Code (11 character cod	le appearing on your cheque leaf)	9		311	
	I understand that any refund	due on the premium payment / any payme	ent / claims to be directly credited to my	aforesaid Bank Account .	*	
* As	per IRDAL its mandetory that a	all payments made to the insured are only	through electronic mode	O.C.		- 3

Reliance General Insurance Company Limited.

**IRDAI Registration No. 103** 

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#### **GENERAL DECLARATION:**

I understand that as per the new AML/CFT Guidelines issued Reliance General Insurance Co. Ltd will be verifying my details pertaining to KYC and PAN provided 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 the proposal form, identification proof, and address proof at the time of issuance of the policy. I request Reliance General Insurance Company Limited to issue the policy with the details appearing as per my proposal form. I will be solely responsible for any consequences arising out of the difference in detail given by me during the verification of supporting documents provided by me at the time of issuance of the policy or otherwise.

PEP Declaration:	
Are you a Politically Exposed Person (PEP)?	Yes V No
If yes, please mention the position held	Hay Silver
Is any of your close relation or family member a PEP?	Yes No
If yes, please mention the name and relation and the position held by such close relative/family member.	TICE Y
I hereby declare that in future if me, any of my close relatives or any of my family memb Insurance Co. Ltd as a mandate. I understand that this is a crucial information under the given by me is true. In case the company comes to know that this is a misrepresentation scrutiny by the company and I shall be solely responsible for the same.	PMLA Rules and AML/ CFT Guidelines and shall confirm that the answers

"Politically Exposed Persons" (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of

# States/Governments, senior politicians, senior government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc (As per sub clause (xii) of 3(b) of Chapter I of Master Direction – Know Your Customer (KYC) Direction, 2016 issued by Reserve Bank of India (RBI). Declaration by Proposer

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 documents have 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 have read and understood the brochure, prospectus, sales literature & Policy wordings and confirm to abide by the same. • 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 under section 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 to procure 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, mis-description of nondisclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other persons, files a proposal fo insurance containing any false information, or conceals for the purpose of misleading, information, information concerning any fact material thereto, commits a fraudulent act which will render the policy voidable at the company's sole discretion and result in a denial of insurance

This proposal form was completed by

	You can support our Go Green Initiative by saying "No" to Policy kit, Renewal Notice and Other Communications hard copy. We will be sending you digitally signed soft copy on your registered Email ID & Mobile number.					
Go Green	Hard copy required	Yes No	- 4	O. C.	Office	
Name	S	- Sille	Place:	700	23	3
Date:	15 Nov 2024 02:54	IL.	Date:	15 Nov 2024 02:54		
	of the		TICE	ACC.	730	
Signatu	re	all all	6	Signature of Proposer & C	ompany Seal	_

benefits. • 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.

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

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.

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

Registered & Corporate Office: Reliance General Insurance Company Limited, 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063.



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022 4890 3009 (s)
74004 22200 (s)

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.

Supporting Confirmation of Agent/Broker/SM/CSO		
I confirm the above signature tobe of the registered owner of the vehicle proposed for insurance	200	-611
Name of IRDAI Agent/ Broker Mr. Mrs.	- OL	Sec.
Place		
Date		
(In case of Direct Business, Name & Signature of CSO /SM to be taken)	Signature of IRDAI Agent/ Brok	cer
* Mandatory details to be filled	.uro	
The policy does not cover liability for death, bodily injury or damage as excluded under Section	n 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)	7,	
20	36	

Reliance General Insurance Company Limited.

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