







Mr. GAUTAM KUMAR DAS 1FR 1 P C GHOSH ROAD, 24 PGS NORTH WEST BENGAL India - 700048

From here on, you're our responsibility.

Welcome on board. Your "A" Policy for Act Liability Insurance (Passengers Carrying 4W<6) Policy - Schedule, with Policy

Number 150622423530018889 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,

















Digitally signed by Reliance General Insurance Company Limited Date: 2024.11.20 12:48:30

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022 4890 3009 (C)
74004 22200 (S)

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

2.0	
Policy Number : 150622423530018889	Proposal/Covernote No: R20112422006
Insured Name : Mr. GAUTAM KUMAR DAS	Period of Insurance : From 00:00 Hrs on 21-Nov-2024 to Midnight of 20-Nov-2025
Communication Address & Place of Supply: 1FR 1 P C GHOSH ROAD, 24 PGS NORTH, NORTH 24 PARGANAS, WEST BENGAL, India, 700048.	Policy Issuing Branch: Thapar House, 4th Floor, 163, S.P. Mukherjee Road Kolkatta, KOLKATA, WEST BENGAL, 700026.
Mobile No: 9830*****	Tax Invoice No. & Date: R20112422006 & 20 Nov 2024 12:48
Email-ID: b******@gmail.com	GSTIN/UIN & Place of Supply: WEST BENGAL
Nominee Name :	

Insured Vehicle Details			
Registration No.	WB07J1808	Mfg. Month & Year	AUG-2015
Make / Model	MARUTI SUZUKI / SWIFT DZIRE / TOUR S	CC / HP / Watt	1248
Engine No. / Chassis No.	D13A5150888 / MA3FSEB1S00497895	LCC Including Driver	5
Type of Body	NA	Total Premium (₹)	14044
RTO Location	WEST BENGAL - Kolkata	Total IDV (₹)	0.00
Vehicle Category	Taxi	Vehicle Usage Type	Others
Vehicle Usage Sub Type	100		
Hypothecation/Lease	NA	0	

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	11,852,00 11,852.00 50,00
TOTAL OWN DAMAGE PREMIUM	0.00	cleaner TOTAL LIABILITY PREMIUM TOTAL PACKAGE PREMIUM (Sec I + II + III)	11,902.00 11,902.00
		CGST (@9.00%) SGST (@9.00%)	1071.00 1071.00
TOTAL PREMIUM PAYABLE (₹)			14,044.00

GSTIN:19AABCR6747B1ZD, HSN:997134

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

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."

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	liak	ility
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: (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. (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 BROKERS PRIVATE LTD

9752507002

piyushkhare@certicoinsurance.com

Intermediary Code/Name

Intermediary Contact No.

Intermediary E-mail ID

POS UID Aadhaar No. / PAN No.



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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 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.

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



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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	GCV	MISC D	.0
For Office Use Only			
Policy Number	150622423530018889	D	ate
Intermediary Details	(To be filled in BLOCK LETTER	RS)	
Intermediary Name Branch Name Sales Manager Name	CERTIGO INSURANCE BROKERS P Kolkata II Bapi Halder	RIVATE LTD C	ode 22BRG708 ode 1506 ode 70786920
Proposer's/Owner D	etails (To be filled in BLOCK L	ETTERS)	
1. Proposer's/Owner's Full	Ⅱ Name ✓ Mr. ☐ Mrs. ☐ M	Ms. GAUTAM KUMAR DAS	100
2 Address (where the V	ehicle is normally kept)	100	P. Tiller
28		D1/041/0	Arr. D.C.CHOCH BOAD
Flat/Building/Door/Blo	ck No. 1FR 1	Road /Street/Sec	tor P C GHOSH ROAD,
Area	100	City	24 PGS NORTH
Pin Code	700048 State WEST B		India
Phone	11	Mobile	9830*****
Emergency Contact N Email	b*******@gmail.com	Blood Group Fax	All Marie and Al
-0	в шуппан.сот	Tax	0, (6)
3. Occupation / Business	Others	110.	China China
4. Type of Cover	Liability Only Po		
5. Period of Insurance	From 21/11/2024		1/2025
6. UID Aadhaar No.8. Fast Tag ID	The William	7. PAN No.	-00
9. Do you have a GST Re	egistration Number Yes V		0
If Yes, please specify	egistration Number 165 V	CASE OF THE PROPERTY OF THE PR	70°
100			T 11
10. Source of Funds11. Monthly Income	Business Pro	ofession Salary Agricu `20,001 to `50,000 `50,001 to `	Iltural Income Savings Others 1,00,000 1,00,001and above
11. Monthly Income	Opio 20,000	20,001 to 30,000	1,00,000 1,00,00 Tand above
Details of the Vehicle	;		
12. Registration Number	WB07J1808	13. Date of Registra	tion 15/09/2015
14. Registering Authority &	Location WEST BENGAL - Kolka	uta Company	0,0
15. Year & Month of Manufa	acture AUG-2015	16. Engine Number	D13A5150888
17. Chassis Number	MA3FSEB1S00497895	18. Make of Vehicle	MARUTI SUZUKI
19. Type of Body/Model	NA/SWIFT DZIRE	26	The same of the
20. Gross Vehicle Weight ((GVW)	21. Cubic Capacity	1248
22. Max. Licensed carrying	capacity (No. of Passengers) in case of	Passenger carrying vehicles	4
23. Seating capacity (Include	ding Driver) 5	A GEO	all all



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De	tails of the Vehicle	Type and Use				
24.	a. Whether the Vehicle is	driven by Non-conventi	onal source of power?	All III	Yes	
	If Yes, please give	100	di.	200	Bi Fuel CNG	LPG
-20	Do you have a valid PUC	?? Yes	No	CO	-Olive	4.
th	e date of commencement o	f the Policy and undertak	es to renew and maintain a vali	ution Under Control (PUC) Certificate and effective PUC and/or fitness Cese of any discrepancy in the PUC or fit	rtificate, as applicable, during th	1.1
25.	Whether the use of Vehic	cle is limited to Own Pre	mises?	Mr. Mar.	Yes	✓ No
26.	Whether the commercial	vehicle is also used for	Private purposes (excluding u	se for hire or reward)?	Yes	No
27.	Whether the Vehicle is u	sed for Driving Tuitions?		A Property of	Yes	✓ No
Lia	ıbility Coverage					
28.	Coverage for liability aga	ainst Third Party Risks (Death or Bodily Injury) required	d in respect of:	Olivia Contraction of the Contra	80
18	i) Owner Driver Only	51	" They	-0	Yes	No
	ii) Any person other than	Paid Driver	40	inc.	Yes	No
	If 'Yes', give details of su	ch other persons	alle.	Ho, the	1000	
	a	200	C.	The state of the s	The same of the sa	
	b	-0		- 10	17	
	C	-0		- all	· Con	
	Note:	0.00	d _o	200	000	20
8				ne vehicle to ensure that he or any oth o Section 146 exempts the paid drive		drive a
	2. As per Section 147 (2)(a) the liability is 'as inc	urred' in the case of death/bod	ily injury of a third party		
9.	Do you wish to restrict the	e above limits to the stat	tutory TPPD Liability limit of ₹ 6	6000/- only?	Yes	✓ No
0.			s Compensation Act 1923 is co	overed under theLegal liability to pers /ehicles Act 1988	ons Yes	✓ No
	a. Drivers	No. of pers	sons:	ar ar	O. C.	2.0
	b. Employees (Workmer	CHENT		all of	"ID"	020
	Note: The Motor Vehicles Workmen's Compensation		ا7(1)(ii)(I) covers liability to emp	oloyees who are workmen within the	meaning of the	
11.	The Policy provides addit for other classes of vehic			,00,000/- for Two Wheelers and ₹.7,	50,000/- Yes	No
32.	(This information is sough	ht to cover in addition to	oyees who are 'workmen'? liability under the Workmen's o act 1855 and the Common Law		Yes	No
	Note: The additional lia under this endors	1.00	w and Fatal Accidents Act in re	espect of employees who are workmo	en is covered	0.0
33.	Do you wish to cover wid	der legal liability to empl	oyees who are NOT 'workmer	n'?	Yes	No
				5 in respect of employees who are N	OT workmen is covered under	this
34.	Personal Accident Cover	r for Owner Driver is cor	npulsory in the Liability Only C	over. Please give details of nominati	on:	
	Name of the Nom	inee Age	Relationship	Name of the Appointee	Relationship to the Nominee	
	11/11/11	100 C	60	10	-Do	08
à	Note:	100	Me	GC.	- on	3
		to owner driver cannot l	be granted where a vehicle is o	15,00,000/- for Two Wheeler, Private owned by a company, a partnership f		e or
35.	Do you wish to include P			Chillip	Yes	No
	If 'Yes', give name and C	apital Sum Insured (CSI		7/11	7	
	Name		CSI Opted (₹)	Nominee	Relationship	19



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	Note: The maximum CSI available per person is ₹.2,00,000/- in case of Commercial Vehicles
36.	Do you wish to include Personal Accident cover for Un-named Passengers/hirer/pillion passengers(Two Yes No Wheelers)?
	If 'Yes', give number of persons and Capital Sum Insured (CSI) opted:
	No of persons: CSI (per person):
	Note: The maximum CSI available per person is ₹.2,00,000/- in case of Commercial Vehicles
37.	Do you wish the Geographical Area of the coverage by the policy to be extended to the following countries? Please tick relevant boxes.
	시간에 : 사용하다 : 10 : 사용하다 : 10 : 10 : 10 : 10 : 10 : 10 : 10 : 1
	Bangladesh
-0	Bhutan
-	Maldives Maldives
	Nepal Nepal
	Pakistan
	Sri Lanka
	Note: Presently the territory covered is geographical area of India. Extension of geographical area cover can be availed by use of this endorsement.
De	etails of Previous History
38.	Date of purchase of the Vehicle by the Proposer: 15-Sep-2015
39.	Whether the vehicle was new or second hand at the time of purchase?
40.	Will the vehicle be used exclusively for:
	i) Private, Social, Domestic, Pleasure & Professional Purpose?
	ii) Carriage of goods other than samples or personal language?
41.	Is the vehicle in good condition?
	If 'No' please give
	details
42.	Name of the previous insurer M/s. Reliance General Insurance Company Ltd.
43.	Address of previous insurer -
-	
	Flat Building Road /Street/Sector
	Area City
	Pin Code State Country
	Phone Mobile
10	Email Fax
44.	Previous Policy Number 150122323530007039
45.	Period of Insurance From 16/11/2023 To 15/11/2024
46.	Claim lodged during the preceding 3 years
	Year No. of claims Claim Amount (₹)
Dr	river Details
47.	Date of Birth of the Owner: Age:
48.	Date of Birth of the Driver: Age:
49.	Does the driver suffer from defective vision or hearing or any physical infirmity? If 'Yes', please give details of such infirmity
50.	Has the Driver ever been involved/convicted for causing any accident of loss?
00.	If 'Yes', give details as under including the pending prosecutions:
	Driver's Name:
	Date of Accident: Loss / Cost (₹)



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Circumstances of Accident / Loss:

Details of Hire Purchase / Hypothecation / Lease		
51. Please state if the vehicle is under If so, give name and address of concerned party/parties. Full Name M/s Address (Note: Copies of R.C.Book, Permit & Fitness Certificate should be submitted)	Lease Agreement Pin Code ed along with the Proposal Form)	Hypothecation Agreement
Payment Details		
Cheque Cheque or DD Amount Bank Name Cheque/DD No.	DD Amount in words Cheque/DD Date	COMPORT PRE
Proposer's Bank Details		
 52. Name of the Bank Account Holder	claims to be directly credited to my afo	Saving Current resaid Bank Account .*
GENERAL DECLARATION:		
I understand that as per the new AML/CFT Guidelines issued Reliance General I the time of proposal. I further, do hereby agree and consent that in the case of the event of a mismatch proof at the time of issuance of the policy. I request Reliance General Insurance of the mean of the solely responsible for any consequences arising out of the difference me at the time of issuance of the policy or otherwise.	n of information provided by me in the p Company Limited to issue the policy w	roposal form, identification proof, and address ith the details appearing as per my proposal
PEP Declaration:		
Are you a Politically Exposed Person (PEP)?		101
- G	Yes ✓ N	NO
If yes, please mention the position held	200	90,0
Is any of your close relation or family member a PEP?	Yes V	lo
If yes, please mention the name and relation and the position held by such close relative/family member.	NCO S	Co.
I hereby declare that in future if me, any of my close relatives or any of my family Insurance Co. Ltd as a mandate. I understand that this is a crucial information ungiven by me is true. In case the company comes to know that this is a misreprese scrutiny by the company and I shall be solely responsible for the same.	der the PMLA Rules and AML/ CFT G	uidelines and shall confirm that the answers
Note: "Politically Exposed Persons" (PEPs) are individuals who are or have been entru States/Governments, senior politicians, senior government/judicial/military office etc (As per sub clause (xii) of 3(b) of Chapter I of Master Direction – Know Your	ers, senior executives of state-owned o	corporations, important political party officials,



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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) Act, 2015.

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.



Place:

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 a
digitally signed soft copy on your registered Email ID & Mobile number.	C.	

Hard copy required

Date: 20 Nov 2024 12:48

100	Signature of Proposer	100

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)