







Mr. NETAI DAS. BAWALI MONDAL ROAD TOLLYGUNGE **KOLKATA** WEST BENGAL India - 700026

From here on, you're our responsibility.

Welcome on board.

9123*****

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

Number 150622423380044417 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) (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: 2024.11.12 17:42:03 reliancegeneral.co.in (s) 022 4890 3009 (s) 74004 22200 (s)

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

Policy Number : 150622423380044417	Proposal/Covernote No: R121124104324
Insured Name: Mr. NETAI DAS.	Period of Insurance: From 17:34 Hrs on 12-Nov-2024 to Midnight of 11-Nov-2025
Communication Address & Place of Supply: 13 BAWALI MONDAL ROAD TOLLYGUNGE KOLKATA, WEST BENGAL, India, 700026.	Policy Issuing Branch: Thapar House, 4th Floor, 163, S.P. Mukherjee Road Kolkatta, KOLKATA, WEST BENGAL, 700026.
Mobile No: 9123*****	Tax Invoice No. & Date: R121124104324 & 12 Nov 2024 05:41
Email-ID: S*******@gmail.com	GSTIN/UIN & Place of Supply: WEST BENGAL
0	20.7

Insured Vehicle Details			
Registration No.	WB04H4563	Mfg. Month & Year	JAN-2018
Make / Model & Variant	MARUTI SUZUKI SWIFT DZIRE TOUR S	CC / HP / Watt	1248
Engine No. / Chassis No.	D13A3186337 / MA3FJEB1S00B33027	LCC Including Driver	5
Type of Body	NA	Total Premium `	17173
RTO Location	WEST BENGAL - Kolkata	Total IDV `	300,000.00
Manufacturer fully build in	Yes	Hypothecation/Lease	NA
Vehicle Category	Taxi	Vehicle Usage Type	Others
Vehicle Usage Sub Type	- A		

nsured Declared Value (IDV)						
Chassis IDV	0.00	Non Electrical Accessories	0.00			
Body IDV	0.00	CNG / LPG Kit	0.00			
Vehicle IDV	300,000.00	Trailer / Side Car	0.00			
Electrical / Electronic Accessories	0.00	Total IDV	300,000.00			

Premium Summary			
Own Damage - Section I	Amount (`)	Liability - Section II	Amount (`)
Basic OD	2,650.50	Basic Liability (TPPD 1)	11,852.00
Total Basic Own Damage Premium	2,650.50	Total Basic Liability Premium	11,852.00
		PA Benefits - Section III	
		Legal Liability to paid driver and/or Conductor and/or	
		cleaner	50.00
		TOTAL LIABILITY PREMIUM	11,902.00
TOTAL OWN DAMAGE PREMIUM	2,651.00	TOTAL PACKAGE PREMIUM (Sec I + II + III)	14,553.00
		CGST (@9.00%)	1310.00
		SGST (@9.00%)	1310.00
TOTAL PREMIUM PAYABLE (`)			17,173.00

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

GSTIN:19AABCR6747B1ZD

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	They
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.

Persons/Classes of persons : Any person including insured:

Reliance General Insurance Company Limited.

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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.

Corporate Identification No. U66603MH2000PLC128300. UIN: IRDAN103RP0012V02100001. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License. RGI/MCOM/CO/PCV/PS/Ver. 1.3/310118.





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

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

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.

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. 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 :

Policy has been issued with reference to vehicle inspection report, reference lead no 24284728 & special conditions. The inspection report remarks can be viewed on company's website by the lead no.

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For Reliance General Insurance Co. Ltd.

Authorised Signatory



eliancegeneral.co.in	•
022 4890 3009	0
74004 22200	0

Risk Assumption Letter

Dear Mr. NETAI DAS

Thank you for choosing Reliance General Insurance.

Please find enclosed policy no.: 150622423380044417 which has been issued based on the details declared by the applicant.

Insured Vehicle Details				
Registration No.	WB04H4563	- 5	Mfg. Month & Year	JAN-2018
Make / Model & Variant	MARUTI SUZUKI SWIFT DZIRE TOUR S	10	CC / HP / Watt	124
Engine No. / Chassis No.	D13A3186337 / MA3FJEB1S00B33027		LCC Including Driver	
Type of Body	NA	1	Total Premium	1717:
RTO Location	WEST BENGAL - Kolkata		IDV `	30000
Manufacturer fully build in	Yes		Hypothecation/Lease	N/
Insured's Declared Value (IDV)			
Chassis IDV `	7) GU	0.00 Non	Electrical Accessories `	0.00
Body IDV `	17	0.00 CNG	/ LPG Kit `	0.00
Vehicle IDV `	-31	300000 Traile	er / Side Car `	0.00
Electrical / Electronic Accessorie	es `	0.00 Total	IDV `	300,000.00
Previous Policy Details				
Previous Year Policy No.	Period of Insurance		Previous Policy-0	Claim Status
20	From: To:		Yes	✓ No
YOU HAVE OPTED FOR THE	FOLLOWING COVERS		W. C.	6 6 C
Standard Vehicle Ow	n Damage + Third Party Coverage		6 -0	
Cover Electric	cal/electronic accessories		0	
	ectrical accessories kits comprising LPG/CNG systems	A STORE	TIGO	
Add-on Covers	into comprising Er Grone systems	00	The same	THE STATE OF THE S
Nil Depreciation Cover	No deduction for depreciation on vehicl	e parts other th	an tyres and tubes with respect of ap	oproved partial loss claims.
Additional towing Charge	Provides cover for towing charges over Insured - ` 0/-)	and above the	standard policy guideline as per the	cover opted by customer (Sum
Additional Limit of TPPD	Indemnify the Insured for an additional Insured or held in trust or in custody of		opted for damage to property other that	an the property belonging to the
Emergency Hotel Accommodation	Provide allowance towards the Hotel are provided in policy copy.		insured vehicle met with accident/ st	olen 200 kms away from the location
Please take a moment to carefull	y check your policy details mentioned above a	and in the policy	schedule. Kindly confirm that the sa	ame 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.

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

(The queries made/details state The Insurer may seek any othe *(Applicable to all classes of ve	er information as desired for un	der for underwriting purpose	e.)	County	Sec.
✓ PCV	GCV	MIS	SC D	Trailer	6
For Office Use Only	AS-				
Policy Number	150622423380044417		Date		The same
Savvion Reference No.	C.		Inspection Lead No.		
Intermediary Details (To be filled in BLOCK I	ETTERS)	20		
Intermediary Name	CERTIGO INSURANCE BRO		Code	22BRG708	400
Branch Name	Kolkata II	MEROT RIVATE ETD	Code	1506	
Sales Manager Name	Bapi Halder		Code	70786920	
*POS PAN No.		110	*POS UID Aadhaar No.	The same	- O.C.
Details (To be filled in	BLOCK LETTERS)	-6"			100
This Proposal is for	A new Policy	Renewal of Policy	Endorsement	Others	s (Please specify)
2a. Proposer's Full Name	✓ Mr. Mrs.	NETAI DAS .	10		
100	-		A alaba a a b a a b i a	In in a new allow leads and	Uland OS
2b. Address	Address for Comm	unication	Address where vehic	le is normally kept and	Used
Flat/Building/Door/Bloc Road /Street/Sector	k No. 13 BAWALI MONI	DAL ROAD TOLLYGUNGE	uco.	ACO.	
Newstrand	500				110
Nearest Landmark Area	Siller.	100	1900		1600
City	KOLKATA		1111		V
Pin Code	700026		of all		1
State	WEST BENGAL	.00	allo.	all?	\$78
Country	India	Alle	G	-01	
Phone	42.	The same of the sa	Mobile	9123*****	
Emergency Contact No).		Blood Group	200	
Email	S******@	gmail.com	Fax		160,
Period of Insurance	From 12/11/2		To11/11/202		THE
4. Source of Funds	Business		Salary Agricultura		Savings
5. Monthly Income	Upto `20,000	`20,001 to `50,000	`50,001 to `1,00,0	000`1,00,	001and above
6. UID Aadhaar No.	alle	0	7. PAN No.	20	
8. Fast Tag ID	The state of the s	dille	G.		56.5
Details of the Vehicle					
9. Registration Number	WB04H4563	143	10. Date of Registration	10	6/02/2018
11. Registering Authority & L		AL - Kolkata			The same
12. Year & Month of Manufac	177	de	13. Cubic Capacity	1:	248
14. Engine Number	D13A3186337				M
15. Chassis Number	MA3FJEB1S00		500	700	
16. Make of Vehicle	MARUTI SUZ		alle	20	6%
17. Type of Body/Model	NA/SWIFT DZ	IKE	G	50	
	GVW)/Cubic Capacity (C.C.)		andria Caada	New Herendeus Co	a da
19. Goods type (Applicable of 20. Is the Vehicle made in Inc.)		Haza	ardous Goods	Non-Hazardous Go ✓ Yes	
	ala <i>?</i> capacity (No. of Passengers) ir	case of Passenger carryin	a vehicles 4	<u>v</u> 165	No
22. Vehicle Category	Bus	Taxi	9 101110103 4		Her
Vehicle usage type (App	and the same of th	Contract Carriage	Stage Carriage	Private Usad	ne
	(Applicable if Contract Carriage			ee pickup Bus	Others
23. Seating capacity (Includ		1000	and the second	- ap	Ø.80
000	200	The same of the sa	Co.	-01	

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etails o	of the Vehicle Type and Use		000	100	-01	
	ether the Vehicle is driven by Non-co		Yes	No If yes Bi Fuel	CNG	LPG
	ed's Declared Value of vehicle Chasis Non - elect accessories vehicle ()	rical Electronic ac s fitted to the fitted to the ve		/ LPG Kit Bi Total Value ()	8
300,0	0.00	0.00	0.00	300,000.00		
b. Do v	/ou have a valid PUC? ✓ Y	es No	110	alle	0.0	
	Warranted that the insured named he		a valid Pollution Under Control	(PUC) Certificate and/or valid fit	ness certificate	e, as
applica	ble, on the date of commencement obsistence of the Policy. Further, the C	f the Policy and undertakes to re	enew and maintain a valid and	effective PUC and/or fitness Ce	rtificate, as ap	plicable, c
- 63	5		te appropriate action in case c		niness certific	ate.)
100	s of Driver: (a) Age of Owner Defective vision		firmity	Others	No	- 0
100	" please give	To Houring of any physical in	minity.	103	110	
details_		17.	200	-8		
			(43)	and the second	0	
c) Has the	e driver ever been involved for caus	ing any accident or loss?	So.	Yes	□No	
	please give details as under includ		any:-	MASS		
7	C	W.	-10	of the		
d) D.O.B.	dille	180	all of	in Par		9
Add Or	n Covers (Subject to availability and	d eligibility)		COL		
(a)	Easy Monthly Instalment (EMI) Pr	otection Cover: (RGI-MO-A00	-00-17-V01-14-15)			
	If Yes, please choose any one option	. 603	10	Miller	00	
	Plan I - 1 EMI, EMI Amount :	OP	50	William Control	dille	
	Plan II - 2 EMIs, EMI Amount :			Phys.	1711	
	Plan III - 3 EMIs, EMI Amount :		- C			
(b)	Additional Towing Charges	.00	O. P. C.	all a	No	0
(c)	Nil Depreciation Cover:	MILL	G	E.D.	No	
(d)	Total Cover	17	400	-0	No	
(e)	Voluntary Deductible	OLE S	Mall .	William .	- 60	
(-)	Voluntary Deductible amount opted	Light.	60	THE STATE OF THE S	dille	
(f)	Emergency Hotel Accommodation			III.	No	
(1)	Benefit Amount:	120	30	all a	110	
(a)	Additional limit of TPPD	, CO	- office		No	
(9)	Additional amount opted:	ALL DE	G	00		
(h)	Personal Belongings Cover	11/1	CO	_0	No	
(11)	Benefit Amount:		The state of the s	different	110	
(i)	Daily Allowance Benefit	100°		CHILD	No	
(1)	Per day allowance amount opted :	O _x		Philips .	No	
- 1	Coverage Days opted:		10	300		
(1)	Daily Allowance Benefit Plus	100	all of	and a	Ma	- 0
(1)		(m)	G	E.O.	No	
	Per day allowance amount opted:	Carlotte Carlotte	100	.8		
	Coverage Days opted:	alles	1101	MILLO	00	
(k)	Tools and Equipment Cover		000	all of	The same	
(1)	Any other Details	O.		III.	17	
	0		100	. 6		

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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.



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28. 29.	Are you a member of Automob Whether the Vehicle is used for		? If Yes,please subi	mit membership o	сору.		☐ Yes ✓ No☐ Yes ✓ Yes
30.	Whether use of Vehicle is limit	ted to Own Premises?	30			200	Yes V No
31.	Whether the commercial vehic	cle is also used for Privat	te purposes (exclu	ding use for hire	or reward)?	ALP.	Yes No
32.	Whether the Vehicle is fitted w	vith Fibre Glass Tank?	C. C. L.		3		Yes V No
33.	Whether the Vehicle belongs to	o the Embassy/Consulate	e of a Foreign Cour	ntry?		.0	Yes No
	If so, is the duty element includ	led in the IDV?		10		The same of	, O
34.	Whether the Vehicle is design	for use of Blind/Handicap	oped/Mentally Chal	lenged Person?	No.		Yes V No
35.	Date of purchase of the Vehicle	e by the Proposer			11/2		16/Feb/2018
36.	Whether the Vehicle at the time	e of purchase was			100	New	Second Hand
Ris	k Inclusions	200					
37.	Do you wish to cover legal lia (a) Driver/Conductor /Cleane	ability to? er (No. of persons)	y TPPD Liability lin	nit of 6000/- onl	y?	uco Com.	Yes No
	(b) Other employees (No. of				- 3	0	Yes No
	(c) Non-fare paying passeng	er (No. of persons)			500		Yes No
38.	Do you wish to include person						✓ Yes No
20	If Yes, give name and Capital slakhs for other classes of vehicle Personal Accident Cover for O	cles.	180		er person is 1 Lakh	in the case of Motoris	sed two wheelers and 2
39.	Fersonal Accident Cover for O	——————————————————————————————————————	e details of Horninal		A	C _O	
	Name	Name of the Nominee	Age of Nomine	e	e Appointee (if ee is Minor)	Relationship	Address
		The same		Tomine	o to territory	all.	100
	(Note: 1. Personal Accident of 2. Compulsory PA cov		ot be granted wher				similar body corporate or
40.		er does not hold an effect hal Accident cover Name	- 13		Chara.	and the	Yes V No
40.	where the owner-drive Do you wish to include Person	al Accident cover Name	d Persons?	of Nominee Na	ame of the Appointee f Nominee is Minor)	Relationship	Yes No
40.	where the owner-drive Do you wish to include Person	nal Accident cover Name	d Persons?	of Nominee Na		Relationship	
40. 41.	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh	SI Opted Name of	d Persons? f Nominee Age	of Nominee Na		Relationship	
40.	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan	SI Opted Name of	d Persons? f Nominee Age	of Nominee Na		Relationship	
40.	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh	SI Opted Name of	d Persons? f Nominee Age	of Nominee Na		Relationship	
40.	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan	SI Opted Name of	d Persons? f Nominee Age	of Nominee Na		Relationship	
40.	where the owner-driver Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geographical 1. Bangladesh 2. Bhutan 3. Maldives	SI Opted Name of	d Persons? f Nominee Age	of Nominee Na		Relationship	
40.	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal	SI Opted Name of	d Persons? f Nominee Age	of Nominee Na		Relationship	
9	where the owner-driver Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geographical 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka	nal Accident cover Name of Nam	d Persons? f Nominee Age age age age age age age age	of Nominee Na		Relationship	
Det	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka tails of Hire Purchase / Incomparent to the content of the co	SI Opted Name of Name	d Persons? f Nominee Age age age age age age age age	e of Nominee No (II	Nominee is Minor)	Relationship	Address
9	where the owner-drive Do you wish to include Person Name Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka tails of Hire Purchase / Please state if the vehicle is un	Accident cover Name of	d Persons? f Nominee Age age age age age age age age	e of Nominee No (II		Relationship	
Det 42.	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka tails of Hire Purchase / Please state if the vehicle is unif so, give name and address of	Accident cover Name of	d Persons? f Nominee Age age age age age age age age	e of Nominee No (II	Nominee is Minor)	Relationship	Address
Det 42.	where the owner-drive Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka tails of Hire Purchase / Please state if the vehicle is unif so, give name and address of	A Accident cover Name of Name	d Persons? f Nominee Age age age age age age age age	e of Nominee No (II	Nominee is Minor)	Relationship	Address
Det 42.	where the owner-driver Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka tails of Hire Purchase / Please state if the vehicle is un If so, give name and address of Full Name Address	A Accident cover Name of Name	d Persons? f Nominee Age age age age age age age age	e of Nominee No (II	Nominee is Minor)	Relationship	Address
Det 42. 43. 44. No	where the owner-driver Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka tails of Hire Purchase / Please state if the vehicle is un If so, give name and address of Full Name Address	Hypothecation / Lender of concerned parties. M/s	d Persons? f Nominee Age age age Age Age Age Age Age	ed?	se Agreement	Hypothecat	Address ion Agreement
Det 42. 43. 44. No The each	where the owner-driver Do you wish to include Person Name CS Extension of Geographical Are Whether extension of Geograp 1. Bangladesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Sri Lanka tails of Hire Purchase / Please state if the vehicle is un If so, give name and address of Full Name Address te	Accident cover Name of SI Opted Name of Name o	d Persons? f Nominee Age age age age Age Age Age Age	ed ?	se Agreement the purpose of this to	Hypothecat	Address ion Agreement at the commencement of

Details of Previous Insurance

45. Full Name of previous 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.

Corporate Identification No. U66603MH2000PLC128300. UIN: IRDAN103RP0012V02100001. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License. RGI/MCOM/CO/PCV/PS/Ver. 1.3/310118.



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74004 22200	0

46.	Address -		1		12.	
47.	Policy Number		Previous Policy Expir	y		
48.	Type of Cover Package Policy	Liability only	others (to be des	scribe)		- 3
49.	NO CLAIM BONUS allowed under previous policy (%)	0	700	40,		
50.	Claims taken in previous policy	Jille .	G	-00	Yes	✓ No
	If yes, No. of Claims		Claims Amount `			
51.	Are you entitled to No Claim Bonus		M.		Yes	No
	If yes, please submit/attached proof thereof	110		6.0	1860	
Pay	ment Details					
	Cheque/ DD	Chequ	ie/ DD No.	10.7	710	
	Cheque/ DD Date	Ca	sh Credit Card	Others		
Pro	poser's Bank Details					
52.	Name of the Bank Account Holder	160	001	alle,		1
53.	Bank Account No.:		54. Account:	Saving	Cui	rrent
55.	Name of the Bank	125	C.	, S		
56.	Branch	100			-60	
57.	MICR Code (9 digit MICR code number of the bank and bra	anch appearing on the chec	ue issued by the bank)		VIII.	
58.	IFSC Code (11 character code appearing on your cheque le	eaf)	19		114	
	I understand that any refund due on the premium payment	/ any payment / claims to b	e directly credited to my afo	oresaid Bank Account .	*	
* Δc	ner IPDAL its mandatory that all nayments made to the insu			all a		- 5

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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	State
Is any of your close relation or family member a PEP?	Yes V No
If yes, please mention the name and relation and the position held by such close relative/family member.	itice -ce .
I hereby declare that in future if me, any of my close relatives or any of my family mem 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.	e PMLA Rules and AML/ CFT Guidelines and shall confirm that the answers
Note : "Politically Exposed Persons" (PEPs) are individuals who are or have been entrusted v	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

		nitiative by saying "No" to Policy kit, Re r registered Email ID & Mobile number		and Other Communications hard copy	. We will be sending you a
Go Green	Hard copy required	Yes No	- 1	St. Other	
Name		310	Place:	200	40
Date:	12 Nov 2024 05:41	Phile.	Date:	12 Nov 2024 05:41	
	of the		THE	100	720
Signature		Total Colonial Coloni		Signature of Proposer & Company 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

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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	20,00	-611
Name of IRDAI Agent/ Broker Mr. Mrs.	- Or	Sec.
Place		
Date		
(In case of Direct Business, Name & Signature of CSO /SM to be taken)	Signature of IRDAI Agent/ Brok	ker
* Mandatory details to be filled	JIFO MILE	
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 Ac	t 1988 (Inserted
Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)	77	
20	To the same of the	

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

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