







Mr. RAM KUMAR MAHATO PEYARA BAGAN DOHARIYA MADHYAMGRAM BARASAT - II WEST BENGAL India - 700132 9903*****

From here on, you're our responsibility.

Welcome on board.

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

Number 150622423380042916 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: 2024.11.01 19:01:29

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

Policy Number : 150622423380042916	Proposal/Covernote No: R01112446086
Insured Name: Mr. RAM KUMAR MAHATO	Period of Insurance: From 00:00 Hrs on 04-Nov-2024 to Midnight of 03-Nov-2025
Communication Address & Place of Supply: PEYARA BAGAN DOHARIYA MADHYAMGRAM BARASAT - II, NORTH 24 PARGANAS, WEST BENGAL, India, 700132.	Policy Issuing Branch: Thapar House, 4th Floor, 163, S.P. Mukherjee Road Kolkatta, KOLKATA, WEST BENGAL, 700026.
Mobile No: 9903*****	Tax Invoice No. & Date: R01112446086 & 01 Nov 2024 07:01
Email-ID: R*******@gmail.com	GSTIN/UIN & Place of Supply: WEST BENGAL
D.	

Registration No.	WB25L9545	Mfg. Month & Year	OCT-2023
Make / Model & Variant	MARUTI SUZUKI SWIFT DZIRE TOUR S CNG.	CC / HP / Watt	1197
Engine No. / Chassis No.	K12NP7383396 / MBHCZFB3SPK491914	LCC Including Driver	5
Type of Body	NA	Total Premium `	21180
RTO Location	WEST BENGAL - Barasat	Total IDV `	638,000.00
Manufacturer fully build in	Yes	Hypothecation/Lease	MAHINDRA & MAHINDRA FINANCIAL SERVICES LTD
Vehicle Category	Taxi	Vehicle Usage Type	Others
Vehicle Usage Sub Type	-10	20"	05

nsured Declared Value (IDV)						
Chassis IDV `	0.00	Non Electrical Accessories	0.00			
Body IDV `	0.00	CNG / LPG Kit	0.00			
Vehicle IDV `	638,000.00	Trailer / Side Car	0.00			
Electrical / Electronic Accessories	0.00	Total IDV `	638,000.00			

Elocation / Elocation / tooocoolino	0.00	1 otal 15 v	000,000.00
Premium Summary			
Own Damage - Section I	Amount (`)	Liability - Section II	Amount (`)
Basic OD	5,344.85	Basic Liability (TPPD 1)	11,852.00
CNG/LPG Bi-fuel Kit (IMT-25)	267.24	CNG/LPG Bi-fuel Kit (IMT-25)	60.00
Total Basic Own Damage Premium	5,612.09	Total Basic Liability Premium	11,912.00
		PA Benefits - Section III	
		Compulsory PA cover to Owner Driver	375.00
		Total PA Premium	375.00
		Legal Liability to paid driver and/or Conductor and/or	
TOTAL OWN DAMAGE PREMIUM	5,612.00	cleaner	50.00
		TOTAL LIABILITY PREMIUM	12,337.00
		TOTAL PACKAGE PREMIUM (Sec I + II + III)	17,949.00

CGST (@9.00%) 1615.00 SGST (@9.00%) 1615.00 TOTAL PREMIUM PAYABLE (`) 21,180.00

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."

PA-Nominee Details	Name	Age	Relation
1	MRS MANJU MAHATO	41	Spouse

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

BROKERS PRIVATE LTD Intermediary Code/Name	Intermediary Contact No.	Intermediary F-mail ID	POS LIID Aadhaar No / PAN No
22BRG708 / CERTIGO INSURANCE	9752507002	pivushkhare@certicoinsurance.com	

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

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

Subject to I.M.T.Endt.Nos. & Memorandum printed/herein/attached hereto. IMT 25,40,22,7

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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Limits of liability

PA cover for owner driver under section III CSI 1500000 (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 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 Central Motor Vehicles Rules, 1989.

Deductible under Section-I:

: Ni Compulsory deductible ` 500/- (ii) Additional compulsory deductible ` 00/- (iii) Voluntary deductible ` 0/-

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.

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: 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.

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

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

For Reliance General Insurance Co. Ltd.

Authorised Signatory



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

Risk Assumption Letter

Dear Mr. RAM KUMAR MAHATO

Thank you for choosing Reliance General Insurance.

Please find enclosed policy no.: 150622423380042916 which has been issued based on the details declared by the applicant.

Insured Vehicle Details				
Registration No.	WB25L9545	97 98	Mfg. Month & Year	OCT-202
Make / Model & Variant	MARUTI SUZUKI SWIFT D	ZIRE TOUR S CNG.	CC / HP / Watt	119
Engine No. / Chassis No.	K12NP7383396 / MBHCZFB	3SPK491914	LCC Including Driver	
Type of Body	NA		Total Premium	2118
RTO Location	WEST BENGAL - Barasat		IDV `	63800
Manufacturer fully build in	Yes	do	Hypothecation/Lease	MAHINDRA & MAHINDRA FINANCIAL SERVICE: LTI
Insured's Declared Value (ID	V)			
Chassis IDV `	30	0.00 Non	Electrical Accessories `	0.0
Body IDV `	100		/ LPG Kit `	0.0
Vehicle IDV `		100	er / Side Car `	0.0
Electrical / Electronic Accessor	ries `	0.00 Total	IDV `	638,000.0
Previous Policy Details				
Previous Year Policy No.	Period of Insurance	160	Previous Policy-C	laim Status
04280031230160283324	From: 04/11/2023 To: 03/	11/2024 midnight	✓ Yes	No
YOU HAVE OPTED FOR THI	E FOLLOWING COVERS	(HD)	Co	
Standard Vehicle Ov	vn Damage + Third Party Cov	verage		
Non-e	ical/electronic accessories electrical accessories I kits comprising LPG/CNG sys	stems	GUITATIC	inited
Add-on Covers	50		110	Charles and the control of the contr
Nil Depreciation Cover	No deduction for depred	ciation on vehicle parts other th	nan tyres and tubes with respect of ap	proved partial loss claims.
Additional towing Charg	Provides cover for towin Insured - ` 0/-)	g charges over and above the	standard policy guideline as per the o	cover opted by customer (Sum
Additional Limit of TPPI	Indemnify the Insured for Insured or held in trust or		opted for damage to property other that	an the property belonging to the
Emergency Hotel Accommodation		ards the Hotel accommodation	insured vehicle met with accident/ sto	olen 200 kms away from the location
Please take a moment to careful	lly check your policy details may	ntioned above and in the policy	schedule. Kindly confirm that the sai	me 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 queries made/details stated The Insurer may seek any other *(Applicable to all classes of veh	information as desired for und	er for underwriting purpose.)	poser.	Caluly	Sec.
✓ PCV	GCV	MISC D	_ т	railer	
For Office Use Only	A		-		
	50622423380042916		Date	10	
Savvion Reference No.	G.		Inspection Lead No.	A. P.	
Intermediary Details (To	o be filled in BLOCK L	FTTERS)	20	100	-0
	CERTIGO INSURANCE BROK	- W.W.)	Codo 225	PDC700	100
767	CERTIGO INSURANCE BROP Kolkata II	NEKS PRIVATE LTD	Code 22E Code 150	8RG708	
1.50	Bapi Halder	200		86920	
*POS PAN No.	rapi i laidoi	*	POS UID Aadhaar No.	50020	
Details (To be filled in I	BLOCK LETTERS)	~8		1,000	
This Proposal is for	A new Policy	Renewal of Policy	Endorsement	Others (Please specify	/)
2a. Proposer's Full Name	✓ Mr. Mrs.	RAM KUMAR MAHATO	- 40		- 4
100			000	200	05
2b. Address	Address for Commu	inication	Address where vehicle is no	ormally kept and Used	
Flat/Building/Door/Block Road /Street/Sector	No. PEYARA BAGAN [DOHARIYA MADHYAMGRAM		0	
Noad /Street/Sector	400	110	The same of the sa		
Nearest Landmark	OD.	00	THE .	All Land	
Area	-01		16/2	170	
City	BARASAT - II		all the		
Pin Code	700132	8	31	- 52	-0
State	WEST BENGAL	40	-0	The same	80
Country	India	May .	G.	CO.	
Phone		20	Mobile 990	3*****	
Emergency Contact No.	(The	A COLOR	Blood Group		
Email 3. Period of Insurance	R*********@gmai From 04/11/20		Fax To 03/11/2025	The same	
 Source of Funds 	Business	Profession Salar	10.000	me Savings	
 Monthly Income 	Upto `20,000	`20,001 to `50,000	`50,001 to `1,00,000	`1,00,001and above	
6. UID Aadhaar No.	Opto 20,000	20,001 10 00,000	7. PAN No.	1,00,00 rand above	160
8. Fast Tag ID	101	A COLOR			800
Details of the Vehicle	-Ul	10	0	×0"	
11	WB25L9545		O Data of Registration	40/44/0000	
 Registration Number Registering Authority & Loc 			Date of Registration	10/11/2023	
12. Year & Month of Manufacture			3. Cubic Capacity	1197	
14. Engine Number	K12NP7383396		o. Ouble dapaony	1101	
15. Chassis Number	MBHCZFB3SPł		100	10	
16. Make of Vehicle	MARUTI SUZU		187	Oth	
17. Type of Body/Model	NA/SWIFT DZIF	and the second s	COL	-day	3
	VW)/Cubic Capacity (C.C.)	Res.	C.	C. C.	
19. Goods type (Applicable or		Hazardou	s Goods No	n-Hazardous Goods	
20. Is the Vehicle made in Indi		110	-	✓ Yes No	
21. Max. Licensed carrying ca	apacity (No. of Passengers) in	case of Passenger carrying veh	2010	all the	
22. Vehicle Category	Bus	✓ Taxi	100	1111	
Vehicle usage type (Applic	cable if bus) :	Contract Carriage	Stage Carriage	Private Usage	
Vehicle usage sub type (A	applicable if Contract Carriage)	: School Bus	Employee pick	up Bus Others	s
23. Seating capacity (Includin	g Driver) 5	3100	-0	Phill.	Sign
			10.7		

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	f the Vehicle Typ		ol course of a success		No. Harris D.E.		
	ether the Vehicle is driv	_0		✓ Yes L	No If yes Bi Fuel	CNG	LPG
	ed's Declared Value of vehicle Chasis	Non - electrical accessories fitted to vehicle ()	the Electronic accessor		_PG Kit Bi Total Value ()		67
638,00	00.00	0.00	0.00	0.00	638,000.00		
h Dov	ou have a valid PUC?	✓ Yes	No	ALBERT .	a Park	6.	
				Pollution Under Control (F	PUC) Certificate and/or valid fitr	ness certificate	as
applical	ble, on the date of com	mencement of the Police	cy and undertakes to renew	and maintain a valid and e	ffective PUC and/or fitness Cer	tificate, as app	olicable, d
		-8	eserves the right to take app	propriate action in case of a	any discrepancy in the PUC or	ritness certifica	ite.)
100		ge of Owner Driver	ing or any physical infirmity	"US"	Others	□ No	8
100	ne anver suller from a " please give	elective vision of flear	ing or any physical infirmity	Go	res	No	
details_	product give		T. I.	70°	-6		
	101		3	1101	- 100	- 6	
(c) Has the	e driver ever been invo	olved for causing any a	ccident or loss?		Yes	□No	
		1000	ending prosecution, if any:-	2.00			
The said	GO C	-0	W.	10	all of		
(d) D.O.B.		dille	180	of Land	and and		0
6. Add Or	n Covers (Subject to a	vailability and eligibility	()		50		
(a)	Easy Monthly Instaln	nent (EMI) Protection	Cover: (RGI-MO-A00-00-1	7-V01-14-15)			
	If Yes, please choose		53	Mal.	Will Co.	00	
	Plan I - 1 EMI, EMI A	- 637			THE STATE OF THE S	THE PERSON NAMED IN	
	Plan II - 2 EMIs, EMI			187	Sec.	1711	
	Plan III - 3 EMIs, EM			401			
(b)	Additional Towing Ch		100	O. C. C.	all a	No	0
(c)	Nil Depreciation Cov	17.	All line	G		No	
(d)	Total Cover		100	400		No	
(e)	Voluntary Deductible	6	8)	Wall.	William .		
(-)	Voluntary Deductible		0	0	all free	dille	
(f)	Emergency Hotel Ac	-0"		112		No	
(.)	Benefit Amount:			20	of the		
(a)	Additional limit of TP	PD		- Office	W.B.	No	
(9)	Additional amount op		ALL IN	G	CO		
(h)	Personal Belongings		T. P. C.	CO	-0	No	
(11)	Benefit Amount:	00101		The state of the s	OTTO STATE OF THE PARTY OF THE		
(i)	Daily Allowance Ben	ofit			CHILD	Mo	
(1)	Per day allowance ar			1	The said	No	
- 1	Coverage Days opted	05		300	all of		
(i)	Daily Allowance Ben	41	180	o'Clo	and,	No	0
(1)			(m)	G	50	NO	
	Per day allowance an		17	200	.0		
71.5	Coverage Days opted		23	1131	allin	.00	
(k)	Tools and Equipmen	ı Cover	(2)		all a	Call.	
(1)	Any other Details	E.O.		- 1			
	000	-0		10	(1)		

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



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			1

28. 29.	Are you a member of A Whether the Vehicle is		on of India? If Yes,pleastions?	se submit mem	pership copy.	Jul.	Yes No
30.	Whether use of Vehicl					. 35	Yes ✓ No
31.	Whether the commerc	cial vehicle is also us	ed for Private purposes	(excluding use	for hire or reward)?	400	Yes No
32.	Whether the Vehicle is		1		G	-00	Yes V No
33.		1457	sy/Consulate of a Foreig	n Country?			Yes No
33.			44	ii Country :	Sept.	100	1es 1vo
0.4	If so, is the duty eleme			. Ob all a said 1 5	0	ALC:	□ v _{ee} □ Ne
34.		-	nd/Handicapped/Mentall	y Challenged P	erson?	The same of the sa	Yes ✓ No
35.	Date of purchase of the	100			110		01/Nov/2023
36.	Whether the Vehicle at	t the time of purchase	ewas		20	New	Second Hand
Ris	k Inclusions						
37.	Do you wish to restri	ct the above limits to	the statutory TPPD Lial	oility limit of 6	000/- only?	- Oller	Yes No
×	Do you wish to cover	r legal liability to?	" The		-0	C.	
	(a) Driver/Conductor	/Cleaner (No. of per	rsons)		Mc.	60	Yes No
	(b) Other employees		Aller I	10	8.	of the same of the	Yes No
	(c) Non-fare paying p	passenger (No. of pe	rsons)	00		11/2	Yes No
38.	Do you wish to include	e personal Accident (P.A.) Cover for paid driv	ers cleaners a	nd conductors?		✓ Yes No
00.						_akh in the case of Motor	
	lakhs for other classes		(OOI) opted for. The me	iximam oor ave	mable per person is	Lanti III tile case oi Motor	isca two wriccicis and 2
39.	Porconal Assidant Co.	or for Owner Driver	Please give details of n	omination	-01	100	800
39.	reisonal Accident Cov	Ter for Owner Driver.	riease give details of fi			Co	
	Name	Name of the	Nominee Age of N	lominee Na	me of the Appointee (if Nominee is Minor)	Relationship	Address
	(0)	MRS MANJU	MAHATO 4	1 - 30	V	Spouse	100
40.	where the owr	ner-driver does not ho	driver cannot be grante old an effective driving liceover Named Persons?	cense)	oneral	TIP OF	a similar body corporate or Yes No
	Name	CSI Opted	Name of Nominee	Age of Nomi	Name of the Appoi		Address
	- 3	3	· Co		100	-60	- \
41.	Extension of Geograph		To the second	0011		H.g.	Mile
	1.0	Geographical Area to	the following Countries	requirea ?	10		The second
	1. Bangladesh	- 0			- 11	- 0	
	2. Bhutan	Con			18	-00	201
	3. Maldives	10,	160		0		86
-8	_	SIL.	Here		0	Co	
	4. Nepal	11.	2		C.C.	-60	1901
	5. Pakistan			18		ALC:	-00
	7/00		W. Co.			UTO	
	6. Sri Lanka	- 3	200		- 10	9	111
Det	ails of Hire Purch	ase / Hypothec	ation / Lease				
42.	Please state if the vehi	icle is under	Hire Purch	ase	Lease Agreement	Hypotheca	ation Agreement
	If so, give name and ad	ddress of concerned	parties.		Colo	2000	80
43.	Full Name	M/s	MAHINDRA &	MAHINDRA F	NANCIAL SERVICES L	.TD	
44.	Address	11,	1		ACT.	.0	
Not	е						
			e will be deemed to be the	ne 'SUM INSUF	RED' for the purpose of t	his tariff and it will be fixe	d at the commencement of
	policy period for each in		10,	100	- 6		1.16
					ne brand & model as the	vehicle proposed for inst	urance at the commencement
of in	surance / renewal, and a	adjusted for deprecial	ion as per policy wordin				
	ails of Previous I	F 404	lion as per policy wordin	gs. 	all o	_0	The same of the sa

Reliance General Insurance Company Limited.

45. Full Name of previous insurer

IRDAI Registration No. 103

United India 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.

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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46.	Address			40		12.	
47.	Policy Number	04280031230160283324		Previous Policy Expiry	03/11/2024	V.	
48.	Type of Cover	Package Policy	Liability only	others (to be descr	ibe)		
49.	NO CLAIM BONUS allowed ur	nder previous policy (%) 0		200	00,0		
50.	Claims taken in previous policy			C	-00	✓ Yes	No
	If yes, No. of Claims	a file	С	laims Amount `			
51.	Are you entitled to No Claim Bo	onus	100			Yes	✓ No
	If yes, please submit/attached p	roof thereof	Michigan	/B		180	
Pay	ment Details						
	Cheque/ DD	-0	Cheque	DD No.	1.0	7.	
	Cheque/ DD Date		Casl	Credit Card	Others		
Pro	poser's Bank Details						
52.	Name of the Bank Account Hole	der		00	alle,		de
53.	Bank Account No.:	Philips.		54. Account:	Saving	Cur	rent
55.	Name of the Bank	1/2	2/0		-50		
56.	Branch	W. C.	110			- 00	
57.	MICR Code (9 digit MICR code	number of the bank and branch app	pearing on the cheque	e issued by the bank)		Color.	
58.	IFSC Code (11 character code	appearing on your cheque leaf)		100		11.	
	I understand that any refund du	ie on the premium payment / any pa	yment / claims to be	directly credited to my afore	said Bank Account .*		
* ^^	nor IDDAL its mandatory that all	normanta mada ta tha ingurad ara	only through alastron	io modo	all an		

Reliance General Insurance Company Limited.

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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	The state of the s
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.	ince to the
I hereby declare that in future if me, any of my close relatives or any of my family member 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

Note:

"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 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

This proposal form was completed by

		Initiative by saying "No" to Policy kit, Rur registered Email ID & Mobile numbe		and Other Communications hard copy. We w	ill be sending you
Go Green	Hard copy required	Yes No		O'BL	
Name	- C	3/10	Place:	20,	200
Date:	01 Nov 2024 07:01	All.	Date:	01 Nov 2024 07:01	
	of the		The.		
Signatu	re	-ar-	10	Signature of Proposer & Company Seal	0

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

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

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.

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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	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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