

THE NEW INDIA ASSURANCE CO. LTD., Regd. & Head Office: 87, M.G. Road, Fort, Mumbai- 400 001.

Grmed.07 - 01

		L FORM FOR GRO LETED BY THE GR						
R.	O./D.O./B.O.							
Agency Code:		Annual Premium						
Policy No.		Inspector Code		ode				
IN	MPORTANT							
a. b. c.	Company and full premium paid by <u>CHEQUE</u> .							
		PROPOSI	ER DETAIL	S				
2.	Name of the Propos (Capital letters) Description of the P	roposer's business						
	Tel.No:	Fax No:		E-ma	il Add.			
4.	4. Please state whether all eligible members of the Group are Proposed for Insurance.							
5.	5. No. of persons to be covered (list of Persons for each Sum Insured opted as per table)							
ļ	Sr. No. Employee No./Family Member	Name		Date of Birth	Sum Insured			
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6.	Do you require Mater Benefit Extension (str Not applicable)		
7.	Zone Opted for treatment	nent:	
8.	Period of Insurance:	From To	(midnight)
Sig	gnature of the Propose	er	
Pla	ace:		

Date:

Section 41 of Insurance Act, 1938 Prohibition of Rebates

- 1) No person shall allow or offer to allow either directly or indirectly as an inducement of 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 except any rebate except such rebate as may be allowed in accordance with the prospectus or tables of the insurer.
- 2) Any person making default in complying with the provisions of this Section shall be punishable with fine, which may extend to five hundred rupees.