

Welcome

Mrs. ESAKKI UMA E
 NO 21-23E 2ND STREET KALYANIPURAM
 ALWARKURICHI ALWARKURICHI
 AMBASAMUDRAM TIRUNELVELI
 AMBASAMUDRAM
 TAMIL NADU India - 627412
 9498*****

From here on, you're our responsibility.

Welcome on board.
 Your Reliance Two Wheeler Policy Bundled - Policy Schedule, with Policy Number 120222523750044153 is now live to access your policy anytime, anywhere download our Reliance Selfi App and enjoy a host of special features.



[Download Now](#)  



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.

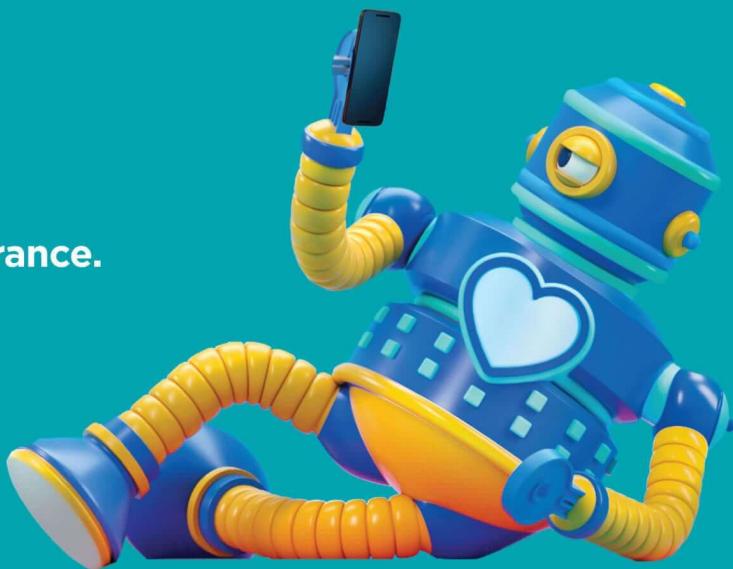
[Click here](#) to download

[Customer Information Sheet \(CIS\)](#)

Now *Live Smart*
With Reliance general Insurance.

Tech+ 

Best Regards,



reliancegeneral.co.in



[022 4890 3009](tel:02248903009) (Paid)



[74004 22200](https://wa.me/912248903009) (WhatsApp)



Reliance Two Wheeler Policy Bundled - Policy Schedule

Important

- The validity of this certificate of Insurance cum policy is subject to realization by the company of the premium cheque paid by the Insured.
- Except as provided in GR 27 Rule (g) of Erstwhile Indian Motor Tariff (i.e. Sale of Vehicle), No NCB will be allowed when a policy is not renewed within 90 days of its expiry.

Policy Number : 120222523750044153

Proposal/Covernote No : R14112538645

Insured Name : Mrs. ESAKKI UMA E

Period of Insurance :

Own Damage - Section-I Period : From : 12:19 Hrs on 14-Nov-2025 to Midnight of 13-Nov-2026

Liability - Section-II Period : From : 12:19 Hrs on 14-Nov-2025 to Midnight of 13-Nov-2030

Compulsory PA - Section III Period : From : 12:19 Hrs on 14-Nov-2025 to Midnight of 13-Nov-2026

Communication Address & Place of Supply : NO 21-23E 2ND STREET KALYANIPURAM ALWARKURICHI ALWARKURICHI AMBASAMUDRAM TIRUNELVELI AMBASAMUDRAM, TIRUNELVELI, TAMIL NADU, India, 627412.

Policy Issuing Branch : 2nd floor, V.V Complex, 260, Avarampalayam Road, New Sidhapudur, COIMBATORE, TAMIL NADU, 641044.

Mobile No : 9498*****

Tax Invoice No. & Date : R14112538645 & 2025-11-14 12:28:31.0

Email-ID : NA

GSTIN/UIN & Place of Supply: TAMIL NADU

Insured's Blood Group :

Insured Vehicle Details

Registration No.	NEW	Mfg. Month & Year	OCT-2025
Make / Model & Variant	SUZUKI ACCESS 125 RC	CC / HP / Watt	125
Engine No. / Chassis No.	AF266377954 / MB8EN11AKS8717775	Seating Capacity Including Driver	2
Type of Body	NA	Total Premium ₹	6891
RTO Location	TAMIL NADU - Tirunelveli	IDV ₹	91,714.00
Hypothecation/Lease	NA		

Insured Declared Value (IDV)

Vehicle IDV ₹	91714	Non Electrical Accessories ₹	0
Electrical / Electronic Accessories ₹	0	Total IDV ₹	91714

Premium Summary

Own Damage - Section I	Amount (₹)	Liability - Section II	Amount (₹)
Basic OD including Add-on where Applicable	1,614.08	Basic Liability (TPPD 1)	3,851.00
Total Basic Own Damage Premium	1,614.08	Total Basic Liability Premium	3,851.00
Add on Cover/s Opted		PA Benefits - Section III	
Nil Depreciation		Compulsory PA cover to Owner Driver	375.00
Emergency Medical Assistance		Total PA Premium	375.00
TOTAL OWN DAMAGE PREMIUM	1614.08	TOTAL LIABILITY PREMIUM	4,226.00
		TOTAL PACKAGE PREMIUM (Sec I + II + III)	5,840.00
		CGST (9.00%)	526.00
		SGST (9.00%)	526.00
TOTAL PREMIUM PAYABLE (₹)			6,891.00

Subject to I.M.T.Endt.Nos. IMT 15,22

GSTIN : 33AACBR6747B1ZN **HSN :** 997134,

Description of services : Motor vehicle Insurance Service

"As per the GST regulations, the amount of GST (if applicable) will not be refunded if the policy / endorsement is cancelled after 31st October of the next financial year."

PA-Nominee Details	Name	Age	Relation
1	SAILAPPAN	42	Spouse

Limits of liability

- : (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 - ₹100000/-, TPPD 2 Sum Insured - ₹6,000/-) (iii) PA cover for owner driver under section III CSI ₹1500000/-

Consolidated Stamp duty Paid vide, order No ENF-1/CSD/105/2025 Validity Period Dt. 01/10/2025 to Dt. 01/12/2026 OW No.3810 Date 24-09-2025 GRN No 1) MH008072909202526E 2) MH008074161202526E Date 05-09-2025 SBI. Deface No. 1) 0005159211202526 2) 0005159293202526 Deface Date 23-09-2025. ** Not Applicable for the State of Jammu & Kashmir.

12BRG363 / VIZZA INSURANCE BROKING SERVICES PRIVATE LIMITED

8608500088

customercare@vizzafin.com

Intermediary Code/Name	Intermediary Contact No.	Intermediary E-mail ID	POS UID Aadhaar No. / PAN No.
Limitations as to use	The Policy covers use for any purpose other than: (a) Hire or Reward other than for the purpose of driving tuition, (b) Carriage of goods (other than samples or personal luggage), (c) Organized racing, (d) Pace making, (e) Speed testing, (f) Reliability trials, (g) Any Purpose in connection with Motor Trade .		
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 :	(i) Compulsory deductible ₹100/- (ii) Additional compulsory deductible ₹0/- (iii) Voluntary deductible ₹0/-		

*No Claim Bonus is subject to no claim on the previous policy. Benefits under the policy stands forfeited if claim is/was made in previous policy.

"It is hereby declared and agreed that any damages pre-existing, any losses occurred & any Liability having been incurred, prior to the commencement of cover under this policy are excluded from the scope of this policy."

Period of Insurance	% of Discount on Own Damage Premium	% of NCB on OD Premium
The Preceding Year	20%	
Preceding Two Consecutive Years	25%	
Preceding Three Consecutive Years	35%	
Preceding Four Consecutive Years	45%	
Preceding Five Consecutive Years	50%	

The policy wording with detailed terms, conditions and exclusions are available on our website <http://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.

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.

Safeguard your transaction by paying your premium via crossed cheque/DD in favour of Reliance General Insurance Company Ltd.

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 affix FASTag on your vehicle.

Grievance Clause :

For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 02248903009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located.

Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, (old 312), Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668, 24333678 Email: oio.chennai@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. This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017.

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under subrule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule

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)

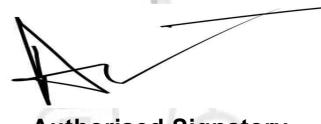
In the unfortunate event of a claim, please call quoting your Policy No. 022 4890 3009(Paid) on and register your claim immediately within 7days from the date of loss.

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.InspectionID_HIDE & special conditions.The inspection report remarks can be viewed on company's website by the lead no.

For Reliance General Insurance Company Ltd.



Authorised Signatory

IRDAN103RP0003V04202425/A0058V01202223 IRDAN103RP0003V04202425/A0060V01201819



Proposal Form For Reliance Two Wheeler Policy - Bundled

Is the vehicle made in India?

 Yes No

Type of vehicle:

 Two Wheeler Three Wheeler Four Wheeler

For Office Use Only

Policy Number

120222523750044153

Date

Savion Reference No.

Inspection Lead No.

Intermediary Details (To be filled in BLOCK LETTERS)

Intermediary Name VIZZA INSURANCE BROKING SERVICES PRIVATE LIMITED

Code 12BRG363

Branch Name Coimbatore

Code 1202

Sales Manager Name Gunasekar Es

Code 70901136

Details (To be filled in BLOCK LETTERS)

1. This Proposal is for A new Policy Renewal of Policy Endorsement Others (Please specify)2a. Proposer's Full Name Mr. Mrs. Ms. ESAKKI UMA E

2b. Address Address for Communication

Address where vehicle is normally kept and Used

Flat/Building/Door/Block No. NO 21-23E 2ND STREET KALYANIPURAM
Road /Street/Sector ALWARKURICHI ALWARKURICHI
AMBASAMUDRAM TIRUNELVELI

Nearest Landmark

Area AMBASAMUDRAM

City 627412

Pin Code TAMIL NADU

State India

Phone

Mobile 9498*****

Emergency Contact No.

Blood Group

#Email

Fax

3. Source of Funds Business Profession Salary Agricultural Income Savings Others

4. Period of Insurance :

Own Damage - Section-I Period : From : 12:19 Hrs on 14-Nov-2025 to Midnight of 13-Nov-2026

Liability - Section-II Period : From : 12:19 Hrs on 14-Nov-2025 to Midnight of 13-Nov-2030

Compulsory PA - Section III Period : From : 12:19 Hrs on 14-Nov-2025 to Midnight of 13-Nov-2026

5. Monthly Income Upto ₹20,000 ₹20,001 to ₹50,000 ₹50,001 to ₹1,00,000 ₹1,00,001 and above

6. UID Aadhaar No.

7. PAN No.

8. Fast Tag ID

9. Do you have a GST Registration Number Yes No

If Yes, please specify

10. Related Party Yes No

#The Policy copy and all related documents shall be sent to the email ID provided above. If you wish to receive Policy copy and related documents in physical form to the aforesaid communication address, please drop us an email at rgicl.services@relianceada.com

Details of the Vehicle

11. Registration Number	NEW	12. Date of Registration	14/11/2025
13. Registering Authority & Location	TAMIL NADU - Tirunelveli		
14. Year & Month of Manufacture	OCT-2025	15. Cubic Capacity	125
16. Engine Number	AF266377954		
17. Chassis Number	MB8EN11AKS8717775		
18. Make of Vehicle	SUZUKI	20. Seating Capacity including Driver	2
19. Type of Body/Model	NA/ACCESS 125		

Details of the Vehicle Type and Use

21. a. Whether the Vehicle is driven by Non-conventional source of power?

 Yes No If yes Bi Fuel CNG LPG

Insured declared value (IDV) of the Vehicle	Non-electrical Accessories fitted to the Vehicle	Electrical & Electronics Accessories fitted to the Vehicle	Side Car(Two_wheeler) Trailer(Pvt.Cars)	Value of CNG/ LPG Kit Bi Fuel	Total Value
91714	0	0	0	0	91714

b. Do you have a valid PUC? Yes No

(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.)

22. Age of Owner Driver _____

23. D.O.B. _____

24. Add On Covers (Subject to availability and eligibility)

1. Nil Depreciation Cover

Yes

2. NCB Retention Cover (Applicable only for Annual Policy)

No

3. Easy Monthly Instalment (EMI) Protection Cover:

If Yes, please choose any one option;

Plan I - 1 EMI, EMI Amount : ₹

Plan II - 2 EMIs, EMI Amount : ₹

Plan III - 3 EMIs, EMI Amount : ₹

4. Total Cover

No

5. Daily allowance benefits

No

Per Day Allowance: ₹

Coverage Days :

6. Helmet cover: Sum Insured ₹

No

Number of Helmet Covered

7. Daily allowance benefits Plus

No

Per Day Allowance: ₹

Coverage Days :

8. Voluntary Deductible

No

Voluntary Deductible amount opted: ₹ 0

9. Hospital Cash Cover (Applicable only for Annual Policy)

No

Sum Insured: ₹

No of Days:

Convalescence Benefit SI: ₹

10. Emergency Hotel Accommodation

No

Benefit Amount: ₹

11. Additional limit of TPPD

No

Additional amount opted: ₹

12. Tyre Protector(Applicable only for annual Policy)

No

Specifications of Tyres and Tubes:

For Tyre : Width in mm: _____ Aspect Ratio: _____

Tyre Serial Number 1 _____ 2 _____

13. Rim Protector(Applicable only for annual Policy)

No

Specification of Rims:

For Rim : Width in mm: _____ Aspect Ratio: _____

Rim Serial Number 1 _____ 2 _____

14. Consumable Expenses
15. Engine Protector
16. Return to Invoice (Applicable only for Annual Policy)
17. Loss of Personal belongings (Applicable only for annual Policy)
Sum Insured: ₹
18. Key protect cover
Sun Insured: ₹
19. Any other Details

No
No
No
No

25. Is the vehicle fitted with any Anti-theft device approved by the ARAI ?
If Yes,please attach certificate of installation in the vehicle,issued by automobile Association of India.
26. Are you a member of Automobile Association of India ? If Yes,please submit membership copy.
27. Will the Vehicle be used exclusively for
 - a. Private,social,domestic,pleasure and professional purposed ?
 - b. Carriage of goods other than samples or personal luggage?
28. Whether the Vehicle is used for Driving Tuitions?
29. Whether use of Vehicle is limited to Own Premises?
30. Whether the Vehicle is fitted with Fibre Glass Tank?
31. Whether the Vehicle belongs to the Embassy/Consulate of a Foreign Country?
If so, is the duty element included in the IDV?
32. Whether the Vehicle is design for use of Blind/Handicapped/Mentally Challenged Person?
33. Date of purchase of the Vehicle by the Proposer
34. Whether the Vehicle at the time of purchase was

Yes No
 Yes No

Yes No
 New Second Hand

14-Nov-2025

Risk Inclusions

35. Please select the higher deductible if you wish to opt for over and above the compulsory deductible
Two wheeler
36. Liability to third parties : The policy provides Third Party Property Damage(TPPD) of ₹ 1 lakh (Two wheelers) and ₹ 7.5 lakhs (Private car)
Do you wish to restrict the above limits to the statutory TPPD Liability limit of ₹ 6000/- only?
37. Personal Accident Cover for Owner Driver. Please give details of nomination

Name	Name of the Nominee	Age of Nominee	Name of the Appointee (if Nominee is Minor)	Relationship	Address
	SAILAPPAN	42		Spouse	

(Note: 1. Personal Accident cover for owner driver is compulsory for Sum Insured of ₹ 15,00,000/- for Two Wheeler, Private Car, GCV, PCV and Misc-D
2. Compulsory PA cover for owner driver cannot be granted where a vehicle is owned by a company, a partnership firm or a similar body corporate or where the owner-driver does not hold an effective driving license)

38. Extension of Geographical Area

Whether extension of Geographical Area to the following Countries required ?

- 1. Bangladesh
- 2. Bhutan
- 3. Maldives
- 4. Nepal
- 5. Pakistan
- 6. Sri Lanka

Details of Hire Purchase / Hypothecation / Lease

39. Please state if the vehicle is under
 - Hire Purchase
 - Lease Agreement
 - Hypothecation Agreement

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: IRDAN103RP0003V04202425 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/2312/PS/VER. 1.0/310118.

If so, give name and address of concerned parties.

40. Full Name M/s
41. Address

Details of Previous Insurance

42. Full Name of previous insurer
43. Address -
44. Policy Number
45. Type of Cover Package Policy Liability only others (to be describe)
46. Claims taken in previous policy
If yes, No. of Claims Yes No
47. Are you entitled to No Claim Bonus
If yes, please submit/attached proof thereof Yes No
48. No Claim Bonus allowed under previous Policy (%) 0

Claims Amount ₹

I/ We hereby declare that the rate of NCB claimed by me/ us is correct and that No claim has arisen in the expiring policy period (copy of policy enclosed). I/ We undertake that if this declaration is found incorrect, all benefits under this policy in respect of Section 1 of the policy will stand forfeited.

Signature of the Proposer _____

Payment Details

- Cheque/ DD
Cheque/ DD Date

- Cheque/ DD No.
 Cash Credit Card Others

Proposer's Bank Details

49. Name of the Bank Account Holder
50. Bank Account No.:
52. Name of the Bank
53. Branch
54. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)
55. IFSC Code (11 character code appearing on your cheque leaf)

51. Account: Saving Current

I understand that any refund due on the premium payment / any payment / claims to be directly credited to my aforesaid Bank Account.*

* As per IRDAI, its mandatory that all payments made to the insured are only through electronic mode.

GENERAL DECLARATION:

I understand that as per the new AML/CFT Guidelines issued Reliance General Insurance Company 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.

AML Guidelines

"I/ We hereby confirm that all premiums have been/ will be paid from bonafide sources and no premium have been/ will be paid out of the proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act 2002. I understand that the company has the right to call for the documents to establish source of funds. The insurance company has the right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly/ indirectly governing the prevention of Money Laundering in India.

- | | |
|---|---|
| Nationality <input type="checkbox"/> Indian | <input type="checkbox"/> Non-Indian, If Non Indian Please specify the country |
| Type of organization <input type="checkbox"/> Corporation | <input type="checkbox"/> Goverment <input type="checkbox"/> Non Goverment Organizations |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> International Organization <input type="checkbox"/> Corporates |
| | <input type="checkbox"/> Society <input type="checkbox"/> Trust |
| | <input type="checkbox"/> Section 25 Companies |

PEP Declaration:

Are you a Politically Exposed Person (PEP)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please mention the position held	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is any of your close relation or family member a PEP?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please mention the name and relation and the position held by such close relative/family member.	

I hereby declare that in future if me, any of my close relatives or any of my family member attains a position of PEP then I shall confirm the same to Reliance General Insurance Company Ltd as a mandate. I understand that this is a crucial information under the PMLA Rules and AML/ CFT Guidelines and shall confirm that the answers given by me is true. In case the company comes to know that this is a misrepresentation and concealment of information then the policy shall be put on hold for scrutiny by the company and I shall be solely responsible for the same.

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 Company 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 for 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 hereby 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.

This proposal form was completed by

Name

Date :

14 Nov 2025 12:28

Place :

Date :

14 Nov 2025 12:28

Signature

Signature of Proposer & Company Seal

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.
- 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 to be of the registered owner of the vehicle proposed for insurance

Place

Date

(In case of Direct Business, Name & Signature of CSO /SM to be taken)

Signature of IRDAI Agent/ Broker

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)

IRDAN103RP0003V04202425/A0001V01202122 IRDAN103RP0003V04202425/A0004V01202223 IRDAN103RP0003V04202425/A0009V01202122
 IRDAN103RP0003V04202425/A0012V01202122 IRDAN103RP0003V04202425/A0013V01202122 IRDAN103RP0003V04202425/A0015V01202021
 IRDAN103RP0003V04202425/A0016V01202021 IRDAN103RP0003V04202425/A0039V01202425 IRDAN103RP0003V04202425/A0040V01202425
 IRDAN103RP0003V04202425/A0041V01202425 IRDAN103RP0003V04202425/A0053V01201819 IRDAN103RP0003V04202425/A0058V01202223
 IRDAN103RP0003V04202425/A0058V01202223 IRDAN103RP0003V04202425/A0060V01201819 IRDAN103RP0003V04202425/A0062V01201819
 IRDAN103RP0003V04202425/A0068V01202223 IRDAN103RP0003V04202425/A0069V01202223 IRDAN103RP0003V04202425/A0071V01202223
 IRDAN103RP0008V01201819/A0054V01201819 IRDAN103RP0008V01201819/A0056V01201819 IRDAN103RP0008V01201819/A0059V01201819
 IRDAN103RP0008V01201819/A0061V01201819