







Mr. SHE JAMIR SHE USMAN DHANKI TA UMBERKHEDA DHANKI UMARKHED MAHARASHTRA India - 445207 9422\*\*\*\*

# From here on, you're our responsibility.

Welcome on board. Your "A" Policy for Act Liability Insurance (GCV Other than 3 Wheelers Public) Policy - Schedule, with Policy Number 110722423490003065 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

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: IRDAN103RP0003V01200102. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures





### "A" Policy for Act Liability Insurance (GCV Other than 3 Wheelers Public) Policy - Schedule

Policy Number: 110722423490003065	Proposal/Covernote No : R24072421758
Insured Name : Mr. SHE JAMIR SHE USMAN	Period of Insurance: From 00:00 Hrs on 25-Jul-2024 to Midnight of 24-Jul-2025
Communication Address & Place of Supply:  0 0 DHANKI TA UMBERKHEDA DHANKI UMARKHED, YAVATMAL, MAHARASHTRA, India, 445207.	Policy Servicing Branch: 2ND FLOOR,SAI INFOTECH, OFFICE .NO-210 & 211, OPP. GHATKOPAR STATION, PATEL CHOWK, GHATKOPAR EAST, MUMBAI, MAHARASHTRA, 400077.
Mobile No: 9422*****	Tax Invoice No. & Date: R24072421758 & 24 Jul 2024 12:04
Email-ID: i*******@gmail.com	GSTIN/UIN & Place of Supply: MAHARASHTRA
Naminas Nama : MDC	

MH01BR0469	Mfg. Month & Year	JUL-2014
ATA/ACE/HT FACE LIFT BS4	CC / HP / Watt	702
75IDI07GVYS70452/MAT445553EZG30535	LCC Including Driver	2
ruck	GVW	1550
MAHARASHTRA - Mumbai Central-Tardeo	Total Premium (`)	18,417.00
Public	Total IDV (`)	NA
PICK UP VANS	Goods Type	Non Hazardous
IA S		
	ATA/ACE/HT FACE LIFT BS4 75IDI07GVYS70452/MAT445553EZG30535 fruck MAHARASHTRA - Mumbai Central-Tardeo Public PICK UP VANS	ATA/ACE/HT FACE LIFT BS4 CC / HP / Watt 75IDI07GVYS70452/MAT445553EZG30535 LCC Including Driver GVW AHARASHTRA - Mumbai Central-Tardeo Total Premium (`) Total IDV (`) FICK UP VANS Goods Type

Premium Summary			
Own Damage - Section I	Amount (`)	Liability - Section II	Amount (`)
Basic OD	0.00	Basic Liability (TPPD 1)	16,049.00
		Total Basic Liability Premium	16,049.00
		PA Benefits - Section III	
		Compulsory PA cover to Owner Driver	375.00
		Total PA Premium	375.00
		TOTAL LIABILITY PREMIUM	16,424.00
		TOTAL PACKAGE PREMIUM (Sec I + II + III)	16,424.00
		CGST on OD Premium (@9.00.00 %)	34.00
		SGST on OD Premium (@9.00.00 %)	34.00
		CGST on TP Premium (@6.00.00 %)	963.00
		SGST on TP Premium (@6.00.00 %)	963.00
TOTAL OWN DAMAGE PREMIUM	0.00		
TOTAL PREMIUM PAYABLE (`)			18,417.00

GSTIN :27AABCR6747B1ZG,HSN : 997134, Subject to I.M.T.Endt.Nos. & Memorandum printed/herein/attached hereto IMT Description of services : Motor vehicle Insurance Service 15

PA Nominee Details			
PA Owner Driver	Nominee Name	Age	Relationship with Owner Driver
10	MRS	58	Spouse
Limits of liability  Limitations as to use	requirements of the Motor Verigoroperty belonging to the institution (TPPD 1 SumInsured - 1,0 CSI 1500000/- The policy covers the use on under sub-section (3) of Sectorganized racing (b) Pace in	aly under a permit within the meaning of Moto	the Policy-Damage to property other than old of the insured up to the limits specified- iii) PA cover for owner driver under section III or Vehicle Act, 1988 or such a carriage falling or covers use for any purpose other than: (a) (e) Use whilst drawing a trailer except the
al III	· les	and and	
13BRG050/PROBUS INSURANC	E 7304332968	care@probusinsurance.com	HMWPS2092M / 791058370662

## Reliance General Insurance Company Limited.

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requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the

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Consolidated Stamp duty Paid vide Letter of Authorisation "NO LOA/ENF-1/CSD/22/2024-25/(Validity Period Dt.12/06/2024 to Dt.01/12/2025)/2575 Date 07-06- 2024" at General Stamp Office, Mumbai.\*\* Not Applicable for the State of Jammu & Kashmir.

#### **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."

"As per section 196 of the above act, driving a vehicle without valid insurance is punishable with fine up to `1,000/-or imprisonment up to 3 months or both."

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 Liability Only Policy. In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Proposal/Covernote No. as mentioned in the policy.

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Call centre/Policy issuing Branch (Applicable for policies booked without Registration No of vehicles).

**IMPORTANT NOTICE:** The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. For legal interpretation, English version will hold good. In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change.

As per National Highways Authority of India, kindly ensure to affixed FASTag on your vehicle.

#### Grievance Clause :

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

Office of the Insurance Ombudsman,3rd Floor,Jeevan Seva Annexe,S. V. Road,Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@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.

For Reliance General Insurance Co. Ltd.

**Authorised Signatory** 

Reliance General Insurance Company Limited.

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# **POS - A Policy for Act Liability Insurance**

# (Commercial Vehicle-Liability Insurance proposal Form)

(The liability of the Company commences only when this proposal is accepted by the Company and the premium is received.)

PCV	✓ GCV	MISC D	.0	
For Office Use Only				
Policy Number 1107224	423490003065	00	Date 24-07-2024	dillo
Intermediary Details (To be	filled in BLOCK LETTER	RS)		
Intermediary Name PROBL	JS INSURANCE BROKER PVT	r LTD	Code 13BRG050	104
Branch Name Ghatkop	oar	9. 18	Code 1107	000
Sales Manager Name Kavita T	Fanaji Khedekar	00	Code 71004719	
*POS PAN No. HMWPS	S2092M	*POS UID	Aadhaar No. 79105837066	2
Proposer's/Owner Details (To	be filled in BLOCK LE	TTERS)		
1. Proposer/Owner's Full Name	✓ Mr. Mrs. Ms.	SHE JAMIR SHE USMAI	V S	118
2	and the same of th		100	11/1/
2. Address (where the Vehicle is r	iormally kept)		1111	4
Flat/Building/Door/Block No.	00	Road /S	treet/Sector DHANKI TA	UMBERKHEDA DHANKI
Area	100	City	UMARKHED	65
Pin Code	445207 State MAHAR	ASHTRA Country	200	
Phone	The same of the sa	Mobile	9422*****	
Emergency Contact No.	(7)	Blood G		
Email	i*******@gmail.com	Fax	All a	die
Occupation / Business	-Oller			110
4. Type of Cover	Liability Only Po	olicy	Marie Contraction of the Contrac	A. W.
5. Period of Insurance	From 25/07/2024	To	24/07/2025	J 3
6. UID Aadhaar No.	30	7. PAN	No.	5. 65
8. Fast Tag ID	Charles of the same of the sam	G	CO.	
9. Do you have a GST Registration	Number Yes V	0	0	
If Yes, please specify	(III)	A COLOR	alle	
10. Source of Funds	Business	ofession Salary	Agricultural Income	Savings Others
11. Monthly Income	Upto `20,000	`20,001 to `50,000 \( \tag{50}	0,001 to `1,00,000	`1,00,001and above
Details of the Vehicle			7.4	- 4
11. Registration Number	MH01BR0469	12 Date of	f Registration	27/10/2014
13. Registering Authority & Location	MAHARASHTRA - Mur		Registration	21/10/2014
14. Year & Month of Manufacture	JUL-2014	15. Engine	Number	275IDI07GVYS70452
16. Chassis Number	MAT445553EZG30535	17. Make o		TATA
18. Type of Body/Model	Truck/ACE	200	The same	100
19. Gross Vehicle Weight (GVW)	1550	20. Cubic (	Capacity	702
21. Max. Licensed carrying capacity	(No. of Passangers) in case of	Passenger carrying vehicles	1100	100
<ul><li>21. Wax. Elderised dairying capacity</li><li>22. Seating capacity Including Driver</li></ul>	1/2	i accorage carrying veriloies	(D)	TON THE
Coaming capacity including Differ				.50.75

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etails o	of the Vehicle Type	and Use				
	ether the Vehicle is drive		al source of nower?	7 11	Vo	s 🗸 No
	please give	in by Non-convention	ai source or power?		Bi Fuel CNG	LPG
II 165,	piease give	200			CNG	LI LFG
b. Do y	you have a valid PUC?	✓ Yes	No	CS.	-00	
<b>*</b>				Illution Under Control (PUC) Certific		1.1
		*		lid and effective PUC and/or fitness		he subsistenc
		- 20		ase of any discrepancy in the PUC of	or niness certificate.)	
	ner use of Vehicle is limit			(6)	Ye	s V No
		, and (1)	rivate purposes (excluding	use for hire or reward)?	Ye	
Wheth	ner the Vehicle is used for	or Driving Tuitions?			Ye	s V No
iability	Coverage					
Cover	age for liability against T	Third Party Risks (De	ath or Bodily Injury) require	ed in respect of:	The same of the sa	80
400	ner Driver Only		a 5. 25ayjay) .69a		Ye	s No
	person other than Paid	Driver	120	200	Ye	_
	s', give details of such oth			Aldi.		J 110
a.	, give details of such of	ici personis		9,	S. S	
h	60	70		15	110	
C	20	G		70	3	
Note:	9	-28		350	ale a	
		e Act-1988 makes it r	mandatory for the owner of	the vehicle to ensure that he or any	v other person authorized by him	o drive a
				to Section 146 exempts the paid of		o anvo a
	14/2		P. Herri	-0		
2. As p	per Section 147 (2)(a) th	ne liability is 'as incurr	ed' in the case of death/bo	dily injury of a third party	AGO A	
Do you	u wish to restrict the abo	ve limits to the statut	ory TPPD Liability limit of	6000/- only?	Yes	✓ No
_			th operation of the vehicle v		Yes	No No
		der the Workmen's C	Compensation Act 1923 is o	covered under the		
	Vehicles Act 1988	Nia af namana		0		
a. Drive	ers oloyees (Workmen)	No. of persons No. of persons		- B	000	
	* * * * * * * * * * * * * * * * * * * *	V-C2-		nployees who are workmen within	the meaning of the	100
	nen's Compensation Act		T)(II)(I) COVETS liability to en	iployees who are workmen within	the meaning of the	
			Damage liability limits of .	1,00,000/- for Two Wheelers and	.7,50,000/- Yes	No No
for other	er classes of vehicles. D	o you wish to cover t	he additional limit?	William 6	500	
	Alo.	200	- 0	0,		
			ees who are 'workmen'?	O	Yes	No No
			bility under the Workmen's 1855 and the Common La		14	
					deman in anyonad	
Note:	under this endorsemen		and Fatal Accidents Act in	respect of employees who are wor	rkmen is covered	
25			The same of the sa	G.	C.O.	_
Do you	u wish to cover wider leg	gal liability to employ	ees who are NOT 'workme	en'?	Yes	No No
Note:		under Common Law	and Fatal Accidents Act 18	55 in respect of employees who a	re NOT workmen is covered under	er this
	endorsement					
Persor	nal Accident Cover for C	Owner Driver is comp	ulsory in the Liability Only	Cover. Please give details of nomi	nation:	
	Name of the Nominee	Age	Relationship	Name of the Appointe	Relationship to the	
	(C)	Age	Relationship	Name of the Appoint	Nominee	1.0
-03	MRS	58	6,1	100	Spouse	08
Note:		Çe	alle	Co	= OF	
				15,00,000/- for Two Wheeler, Priv		
				owned by a company, a partnersl	hip firm or a similar body corporat	e or
where	the owner-driver does no	ot hold an effective d	riving license	110	100	
Doug	u wich to include Desce	al Appidant Carray (a)	Named paragra	io.	□ v.	, DA
	u wish to include Person			100	Ye	S No
IT YES	', give name and Capital	Sum insured (CSI) (	·		87	
100	Name	C.C.	CSI Opted( )	Nominee	Relationship	- 25
550		10	0	MRS	Spouse	0.5
				1.70		

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	Ti : 001 1111 : 000 000/:			177	
	Note: The maximum CSI available per person is .2,00,000/- in case of				
35.	Do you wish to include Personal Accident cover for Un-named Passenç Wheelers)?	gers/hirer/pillion passengers(Two	OPal	Yes	No
	If 'Yes', give number of persons and Capital Sum Insured (CSI) opted:	G.	-01		
	No of persons:	CSI (per person):			
	Note: The maximum CSI available per person is .2,00,000/- in case		Carlo Carlo	6.	
36.	Do you wish the Geographical Area of the coverage by the policy to be ex	xtended to the following countries?	That.	dillo	
	Please tick relevant boxes.			The.	
	Bangladesh				
	Bhutan	200			- Fills
	71. M. 160.	-010	The same		800
-8	Maldives	0	CO.		
	Nepal	200	-6		
		4100		Do.	
	Pakistan	vol.	1000	All Property	
	Sri Lanka	A9		110	
	Note: Presently the territory covered is geographical area of India. Exte	ension of geographical area cover ca	an be availed by use of this	endorsement.	
De	etails of Previous History				
37.	Date of purchase of the Vehicle by the Proposer	0.00	aller.		560
38.	Whether the vehicle was new or second hand at the time of purchase		New	Second Ha	and
39.	Will the vehicle be used exclusively for:	20		Cooona na	a ra
	i) Private, Social, Domestic, Pleasure & Professional Purpose?	10	William .	Yes	No
	ii) Carriage of goods other than samples or personal language?	00	The same of the sa	Yes	No
40.	Is the vehicle in good condition?	200		Yes	No
	If 'No' please give	di			
	details				-011
	alle alle	-00	Chill.		85
41.		.6	00.		
42.	Address of previous insurer	400	-0		
	Flat Building	Road /Street/Sect	or		
	'You'	City	No.	The same	
	Area Pin Code State	Country		The same	
	Phone	Mobile	- 23		
	Email	Fax	200		110
	112	Tax			8500
43.		6	00		
44.	Period of Insurance From 01-01-1900	To 01-01-1900	_0		
45.	Claim lodged during the preceding 3 years	100		- 6	
	Year	No. of claims	Claim Amo	ount ( )	
	- OF	100	7	16	
D.	river Details	7.4		~	
וט		.00	0.00		- 21
46.	Date of Birth of the Owner:	Age:	(42)		85
47.		Age:	CO.		
48.	Does the driver suffer from defective vision or hearing or any physical in	nfirmity?	.8	Yes	No
	If 'Yes', please give details of such infirmity	The state of the s	All Co	.00	
40	Has the Driver over been involved/convicted for sourcing any assident of	loss?	37		□ No
49.	Has the Driver ever been involved/convicted for causing any accident of If 'Yes', give details as under including the pending prosecutions:	1055 !		Yes _	No
	P300		3		
	Driver's Name:	010			a oll
	Date of Accident:	Loss / Cost ( )	This		Sycan
		100	2-50		

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Los	S:	Co.		110		
Details	of Hire Purchase / Hypo	othecation / Lease				
- 4.0	se state if the vehicle is under	Hire Purch	ase	Lease Agreement	Hypothecation Ag	reement
If so	, give name and address of cond	cerned party/parties.	_	G	C.01	
Full	Name M/s	T. I.		0	.0	
Addı	ress	(6)		Pin Code	0.50	6.
(Not	e: Copies of R.C.Book, Permit 8	& Fitness Certificate should be	submitted along wi	th the Proposal Form)	(B)	110
Paymen	t Details	200				
	Cheque	0.	DD	21		
	Cheque or DD Amount	9 %	Amour	nt in words		all s
- Alle	Bank Name	1000	Amou	it iii words	ALL STATES	85
600		(HI)	Chagu	o/DD Doto	CO	
	Cheque/DD No.	11	Criequ	e/DD Date	0	and the same
	er's Bank Details					
	e of the Bank Account Holder	Mr. Mrs	s. Ms.	3.30	S	
	Account No.:	-01		53. Account:	Saving	Current
	e of the Bank	O		01.70	les .	
<ul><li>55. Bran</li><li>56. MICI</li></ul>	cn R Code (9 digit MICR code num	har of the bank and branch appe	paring on the chag	10	000	- 6/11
	ed by the bank)	ber of the bank and branch appr	earing on the chequ		The same	800
57. IFSC	Code (11 character code appe	aring on your cheque leaf)			Co	
Declara	1117	N. N.		E		
a policy su expiring pothe policy vinsurers. Pliable to relibe incorrect survey arraprejudice to acknowled General Intupon the revoidable at knowingly of misleadidiscretion at than that mact, 2015. I/We here I/We hereb		by the company. I/We declare d). I/We further undertake that, if understand and agree that REL firmation, I/We agree that, though claims under section I of the policy from the energy of the motor was available to RELIANCE General Insurance of the motor was available to RELIANCE General I/We also shall endeavour topic ode of Payment: Secure yourpaine event of mis-representation, surance Company or other person the professional surface and undertaken benefits. I further agree and undertaken in accordance with the professional surface and declared address shall be taken as address shall	that the rate of NC f this declaration is IANCE General Insigh coverage under licy only after a coron the date of commence and Insurance as corration from my/our rocure the renewal ayment by cheque/misdescriptionof not ons, files aproposato, commits afraudindertake not to recivisions Section 41 dress on record for documents have bette Policy kit, Renewalts	B stated above by me/of found to be incorrect, a surance will seek confinithe policy will be availated firmation in this regard mencement of the policy of the declarate and the previous insurers, the body of the declarate and pass on the DD favouring Reliance on-disclosure of any male to insurance containing ulent act which will render the Insurance Act, 19 of the Insurance Act, 19 of the purpose of GST.	us is correct and that no claim all benefits under the policy in a mation of above stated details able to me/us, RELIANCE Ger is received. In the event this cay shall stand automatically for ation from my/our previous inser the relevant laws and regular cash-less repair facility" provius ame to RELIANCE General General Insurance CO.Ltd. Thaterial particulars by the Propog any false information, or corder the policy voidable at the canceral Insurance Company Limbar as a mended by Insurance (e/us and I/We have fully under	has arisen in the respect of section I of a from my/our previous heral Insurance will be declaration is found to feited. Further, any surers, shall be without attions. I/We ded by RELIANCE Insurance immediately his policy shall be ser. Any person who, inceals for the purpose company's sole ited any rebate other Laws (Amendment)
Date :	24 07 2024 12:04				Signature of Proposer	190
Prohibit	ion of Rebates - Section	n 41 of the Insurance Ac	t, 1938 as ame	ended by Insuranc	ce Laws (Amendment)	Act, 2015
	person shall allow or offer to all					

- 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. Note: Denial of "Third Party Liability Only Cover" by Insurer, for reasons other than fraud/misrepresentation by Proposer, will entail Regulatory action

IMPORTANT NOTICE

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- 1. In the event of a claim, please immediately call our 24 hour call centre only. Improper intimation or delay in intimating claim to call centre can lead to delay in settlement/denial of claim.
- 2. For preferred cashless garage list, please logon to our website or speak to customer care executive. RGICL cannot provide cashless claim settlement at garages other than those in our network list\*.
- 3. Please intimate us your mobile number and we shall keep you updated of the status of the claim by way of SMS periodically . You can download our claim form and claim procedure.

Also view claim status on our website.

Insurance is the subject matter of solicitation.

\* conditions apply.

The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)