

# Welcome

Mr. DHIRAJKUMAR VITTHALD PATEL  
22 VRUNDAVAN PARK SOCIETY  
AT AND TA VIJAPUR DIST MEHSANA  
VISNAGAR  
GUJARAT India - 384001  
9426\*\*\*\*\*

**From here on,  
you're our responsibility.**

Welcome on board.

Your Number 110722423470033224 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.



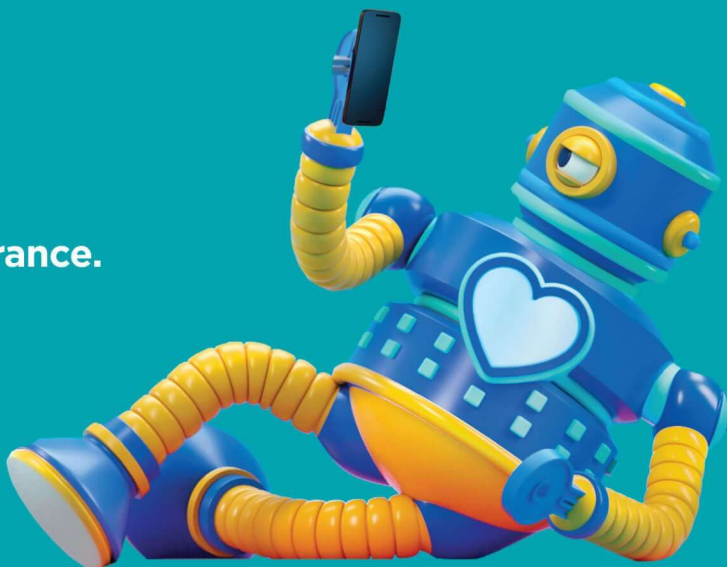
#### Video Claim Assistance

Intimate claims  
instantly through  
live video streaming.

**Now *Live Smart*  
With Reliance general Insurance.**

**Tech+ **

Best Regards,



[reliancegeneral.co.in](https://reliancegeneral.co.in)



022 4890 3009 (Paid)



74004 22200 (WhatsApp)



Intermediary Code/Name	Intermediary Contact No.	Intermediary E-mail ID
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"It is hereby declared and agreed that all pre-existing damages to the vehicle having occurred prior to the commencement of cover are excluded from the scope of the policy."

The policy wording with detailed terms, conditions and exclusions are available on our website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in)

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.

This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017.

#### 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.

Subject to Reliance General Insurance Endorsement Numbers printed herein/attached hereto. NA

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.

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](mailto: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](mailto: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](mailto: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](http://www.irda.gov.in) or on company website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in) or on [www.gbci.co.in](http://www.gbci.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](mailto: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.

For Customer service, please call along with your Policy No. on 022 48903009 (Paid) or visit [www.reliancegeneral.com](http://www.reliancegeneral.com)

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

For Reliance General Insurance Co. Ltd.

Authorised Signatory



## A Policy for Act Liability Insurance (Private Car) - Proposal Form

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

☒ **Private Car**
☐ **Two Wheeler**

### For Office Use Only

Policy Number 110722423470033224 Date 24-07-2024

### Intermediary Details (To be filled in BLOCK LETTERS)

Intermediary Name	PROBUS INSURANCE BROKER PVT LTD	Code	13BRG050
Branch Name	Ghatkopar	Code	1107
Sales Manager Name	Kavita Tanaji Khedekar	Code	71004719

### Proposer's/Owner Details (To be filled in BLOCK LETTERS)

1. Proposer's Full Name ☒ Mr. ☐ Mrs. ☐ Ms. **DHIRAJKUMAR VITTHALD PATEL**

2. Address (where the Vehicle is normally kept)

Flat/Building/Door/Block No.	22 VRUNDAVAN PARK SOCIETY	Road /Street/Sector	AT AND TA VIJAPUR DIST MEHSANA
Area		City	VISNAGAR
Pin Code	384001 State GUJARAT	Country	India
Phone		Mobile	9426*****
Emergency Contact No.		Blood Group	
Email	m*****@gmail.com	Fax	
UID Aadhaar No		PAN	
Fast Tag ID			

3. Do you have a GST Registration Number ☐ Yes ☒ No  
If Yes, please specify \_\_\_\_\_

4. Related Party

Source of Funds	<input type="checkbox"/> Business	<input type="checkbox"/> Profession	<input type="checkbox"/> Salary	<input type="checkbox"/> Agricultural Income	<input type="checkbox"/> Savings	<input type="checkbox"/> Others
Monthly Income	<input type="checkbox"/> Upto ` 20,000	<input type="checkbox"/> ` 20,001 to ` 50,000	<input type="checkbox"/> ` 50,001 to ` 1,00,000	<input type="checkbox"/> ` 1,00,001 and above		

5. Occupation / Business

6. Type of Cover Liability Only Policy

7. Period of Insurance From 25/07/2024 To 24/07/2025

### Details of the Vehicle

8. Registration Number	GJ02AP0701	9. Date of Registration	13/08/2009
10. Registering Authority & Location	GUJARAT - Mehsana	12. Engine Number	028168
11. Year & Month of Manufacture	JUL-2009	14. Make of Vehicle	TATA
13. Chassis Number	F54515		
15. Type of Body/Model	NA/INDICA VISTA		
16. Cubic Capacity	1248		
17. Seating capacity including Driver	5		

### Details of the Vehicle Type and Use

18. a. Whether the Vehicle is driven by Non-conventional source of power? ☐ Yes ☒ No  
If Yes, please give details ☐ Bi Fuel ☐ CNG ☐ LPG

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.)

19. Whether the use of Vehicle is limited to Own Premises? ☐ Yes ☒ No

20. Whether the commercial vehicle is also used for Private purposes (excluding use for hire or reward)? ☐ Yes ☐ No

21. Whether the Vehicle is used for Driving Tuitions? ☐ Yes ☒ No

### Details of Hire Purchase / Hypothecation / Lease

22. Please state if the vehicle is under ☐ Hire Purchase ☐ Lease Agreement ☐ Hypothecation Agreement

If so, give name and address of concerned party/parties.

Full Name M/s

Address

Pin Code

### Liability Coverage

23. Coverage for liability against Third Party Risks (Death or Bodily Injury) required in respect of:

i) Owner Driver Only

☒ Yes ☐ No

ii) Any person other than Paid Driver

☐ Yes ☐ No

If 'Yes', give details of such other persons

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

#### Note:

1. Section 146 of Motor Vehicle Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive a vehicle in public place has insurance against third party risks. The explanation to Section 146 exempts the paid driver

2. As per Section 147 (2)(a) the liability is 'as incurred' in the case of death/bodily injury of a third party

24. Do you wish to restrict the above limits to the statutory TPPD Liability limit of 6000/- only?

☐ Yes ☒ No

25. Legal liability to persons employed in connection with operation of the vehicle who are 'workmen'.

☐ Yes ☐ No

The liability of the Employer under the Workmen's Compensation Act 1923 is covered under the Motor Vehicles Act 1988

a. Drivers

No. of persons:

b. Employees (Workmen)

No. of persons:

Note: The Motor Vehicles Act 1988 under Sec.147(1)(ii)(I) covers liability to employees who are workmen within the meaning of the Workmen's Compensation Act 1923

26. The Policy provides additional Third Party Property Damage liability limits of 1,00,000/- for Two Wheelers and 7,50,000/- for other classes of vehicles. Do you wish to cover the additional limit?

☐ Yes ☐ No

27. Do you wish to cover wider legal liability to employees who are 'workmen'?

☐ Yes ☐ No

(This information is sought to cover in addition to liability under the Workmen's Compensation Act 1923, also liability under the Fatal Accidents Act 1855 and the Common Law)

**Note:** The additional liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement

28. Do you wish to cover wider legal liability to employees who are NOT 'workmen'?

☐ Yes ☐ No

**Note:** The additional liability under Common Law and Fatal Accidents Act 1855 in respect of employees who are NOT workmen is covered under this endorsement

29. Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of nomination:

Name of the Nominee	Age	Relationship	Name of the Appointee	Relationship to the Nominee
LEGAL HEIR	61			Spouse

#### Note:

i) 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

ii) Compulsory PA Cover to 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

30. Do you wish to include Personal Accident Cover for Named persons?

☐ Yes ☐ No

If 'Yes', give name and Capital Sum Insured (CSI) opted for:

Name	CSI Opted ( )	Nominee	Relationship
	0	LEGAL HEIR	Spouse

**Note:** The maximum CSI available per person is 2,00,000/- in case of private car and Commercial Vehicle and 1,00,000/- in case of Motorized Two Wheelers

31. Do you wish to include Personal Accident cover for Un-named Passengers/hirer/pillion passengers(Two Wheelers)?

☐ Yes ☐ No

If 'Yes', give number of persons and Capital Sum Insured (CSI) opted:

No of persons:

CSI (per person):

**Note:** The maximum CSI available per person is 2,00,000/- in case of private car and Commercial Vehicle and 1,00,000/- in case of Motorized Two Wheelers

32. Do you wish the Geographical Area of the coverage by the policy to be extended to the following countries ?

Please tick relevant boxes.

☐ Bangladesh

☐ Bhutan

☐ Maldives

☐ Nepal

☐ Pakistan

☐ Sri Lanka

Note: Presently the territory covered is geographical area of India. Extension of geographical area cover can be availed by use of this endorsement.

### Details of Previous History

33. Date of purchase of the Vehicle by the Proposer.

13-Aug-2009

34. Whether the vehicle was new or second hand at the time of purchase?

☐ New

☐ Second Hand

35. Will the vehicle be used exclusively for:

i) Private, Social, Domestic, Pleasure & Professional Purpose?

☐ Yes

☐ No

ii) Carriage of goods other than samples or personal language?

☐ Yes

☐ No

36. Is the vehicle in good condition?

☐ Yes

☐ No

If 'No' please give details

37. Name of the previous insurer M/s.

38. Address of previous insurer -

Flat Building

Road /Street/Sector

Area

City

Pin Code

State

Country

Phone

Mobile

Email mahadevinsurance20@gmail.com

Fax

39. Previous Policy Number

40. Period of Insurance From 01-01-1900 To 01-01-1900

41. Claim lodged during the preceding 3 years

Year	No. of claims	Claim Amount ( )

### Driver Details

42. Date of Birth of the Owner:

Age:

43. Date of Birth of the Driver:

Age:

44. Does the driver suffer from defective vision or hearing or any physical infirmity?

☐ Yes

☐ No

If 'Yes', please give details of such infirmity

45. Has the Driver ever been involved/convicted for causing any accident of loss?

☐ Yes

☐ No

If 'Yes', give details as under including the pending prosecutions:

Driver's Name:

Date of Accident:

Loss / Cost ( )

Circumstances of Accident / Loss:



### Payment Details

☐ Cheque

☐ DD

Cheque or DD Amount \_\_\_\_\_

Amount in words (\_\_\_\_\_)

Bank Name \_\_\_\_\_

Cheque/DD No. \_\_\_\_\_

Cheque/DD Date \_\_\_\_\_

### Proposer's Bank Details

46. Name of the Bank Account Holder

☐ Mr. ☐ Mrs. ☐ Ms.

47. Bank Account No.:

48. Account:

☐ Saving

☐ Current

49. Name of the Bank

50. Branch

51. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)

52. IFSC Code (11 character code appearing on your cheque leaf)

### 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

☐ Indian

☐ Non-Indian, If Non Indian Please specify the country

Type of organization

☐ Corporation

☐ Government

☐ Non Government Organization

☐ Society

☐ Trust

☐ Partnership

☐ International Organization

☐ Corporatives

☐ Section 25 Companies

### Declaration

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 document 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/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, misdescription or non-disclosure 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 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 further agree and undertake not to receive from Reliance General Insurance Company Limited any rebate other than that mentioned in the published prospectus in accordance with the provisions Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.

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.

You can support our Go Green Initiative by saying "No" to Policy kit, Renewal Notice and Other Communications hard copy. We will be sending you a digitally signed soft copy on your registered Email ID & Mobile number.

Hard copy required

☐ Yes

☐ No

Place : \_\_\_\_\_ Date: 24 Jul 2024 06:50

Signature of Proposer \_\_\_\_\_

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

1. 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.

2. 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

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 login 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)