



Long Term Two Wheeler Package Policy- Schedule

Policy Number :	920221923691021596	Proposal/Covernote No:	R07071924933
Insured's Name : MR.M NARASIMHULU	Period of Insurance : 3 Years From 00:01 Hrs on 11-Jul-2019 to 23:59 Hrs of 10-Jul-2022		
Communication Address: 10-178 3 RD CROSS BRINDAVANAM COLONY,,NEAR CHINMAY NAGAR 4 TH CROSS ANANTHAPURAM,CUDDAPAH, ANDHRA PRADESH, INDIA,516001	Policy Servicing Branch : RELIANCE CENTRE, SOUTH WING, 4TH FLOOR, OFF. WESTERN EXPRESS HIGHWAY, SANTACRUZ (EAST), MUMBAI MAHARASHTRA 400055		
Mobile No : 9701748321	Tax Invoice No. & Date : R07071924933 & 07/07/2019		
Email-ID : MALAVATHULAM@GMAIL.COM	GSTIN/UIN & Place of supply:		
Geographical Area: INDIA	Hire Purchase / Lease / Hypothecation:		

Insured Vehicle Details

Registration No.	AP04BV4390	Mfg. Month & Year	JUL-2018
Make / Model	HONDA / CB UNICORN / 150	CC / HP	150
Engine No. / Chassis No.	KC31E80330151 / ME4KC311GJ8330211	Seating Capacity Including Driver	2
Type of Body	BIKES	Total Premium ₹	6062.00
RTO Location	Andhra Pradesh - Kadapa		

Insured's Declared Value (IDV)

Year	1	2	3
Vehicle IDV ₹	55993.00	48994.00	41995.00
Electrical / Electronic Accessories ₹	0.00	0.00	0.00
Non Electrical Accessories ₹	0.00	0.00	0.00
Bi Fuel Klt ₹	0.00	0.00	0.00
Total IDV ₹	55993	48994	41995

Premium Summary

Own Damage - Section I	Amount (₹)	Liability - Section II	Amount (₹)
Basic OD	2195.34	Basic Liability (TPPD 1)	2256.00
Total Basic Own Damage Premium	2195.34	Total Basic Liability Premium	2256.00
Less		PA Benefits - Section III	
Deduct 20 % for NCB	-439.07	Compulsory PA cover to Owner driver***	1125.00
Sub Total of Deductions	-439.07	Total PA Premium	1125.00
TOTAL OWN DAMAGE PREMIUM	1756.27	TOTAL LIABILITY PREMIUM	3381.00
		TOTAL PACKAGE PREMIUM (Sec I + II + III)	5137.00
		IGST (@18.00 %)	925.00
TOTAL PREMIUM PAYABLE (₹)			6062.00

GSTIN : 27AABCR6747B1ZG , HSN : 9971
Description of services : Financial and related services

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

PA-Nominee details	Name	Age	Relation
1	M THOLISAMMA	68	Mother

Consolidated Stamp duty Paid vide Letter of Authorisation No. CSD/10/2019/1896/19 dated 23rd Apr 2019**Not Applicable for the State of J&K

Minimum Total Own Damage Premium : ₹ 300/- for 2 Year Policy & ₹ 500/- for 3 Year Policy

Direct

Intermediary Code/Name	Intermediary Contact No.	Intermediary E-mail ID
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 - ₹ 1,00,000 /- ,TPPD 2 Sum Insured - ₹ 6,000 /-) (iii) PA cover for owner driver under section III CSI ₹ 1500000.0/-	
Limitations as to use	: The Policy covers use for any purpose other than: (a) Hire or Reward (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	

Driver's Clause

- : Any person including the Insured Provided that a person driving holds a valid driving license at the time of the accident and is not disqualified from holding of such a license. Provided that the person holding a valid Learner's License may drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.
****When the vehicle is used for transport of passenger add the following words:** when not used for the transport of passenger at the time of accident.

No claim Bonus

- : The insured is entitled for a no claim bonus (NCB) on own damage section of the policy basis number of claims made during the tenure of the policy as mentioned in below table:

No claim Bonus Discount		% of Discount on Own Damage Premium	
Number of Claim during policy	NCB at inception of the policy	2 Year Policy	3 Year Policy
No claim	0%	30%	40%
	20%	35%	45%
	25%	45%	50%
	30%	45%	50%
	35%	50%	50%
	40%	50%	50%
	45%	50%	50%
	50% or more	50%	50%
1 claim	NA	20%	30%
2 claim	NA	0%	20%
3 or more claim	NA	0%	0%

Deductible under Section-1 : (i) compulsory Deductible ₹100 /- (ii) voluntary Deductible ₹ 0.0 /-

"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."

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.

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 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. 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 Two Wheeler Package 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 Co. 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

Important: 1) The validity of this certificate of Insurance cum policy is subject to realization by the company of the premium cheque paid by the Insured.

2) No claim Bonus will only be allowed if the policy is renewed within 90 days of its expiry.

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.

In the unfortunate event of a claim, please call quoting your Policy No. 1800 3009 (toll free) or (022) 48903009 on and register your claim immediately within 7 days from the date of loss.

This document shall be treated as a Tax Invoice as per Rule 9(2) of the Goods and Services Tax Invoice Rules

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.

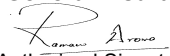
Grievance Clause : For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 1800 3009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the 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@gbic.co.in | Shri. A. K. Sahoo Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune - 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@gbic.co.in

*** Compulsory PA cover to Owner driver is opted for 3 year term with effective from 11/07/2019 to 10/07/2022.



Special Conditions : NA

For Reliance General Insurance Co. Ltd.


Authorised Signatory

Reliance General Insurance Company Limited

Long Term Two Wheeler Package Policy Proposal Form

Long Term Two Wheeler Package Policy ☐ 2 year Plan ☒ 3 year Plan

For Office Use Only

Policy Number 920221923691021596

Date

Savvion Reference No.

Inspection Lead No.

Intermediary Details (To be filled in BLOCK LETTERS)

Intermediary Name	Direct	Code	Direct
Branch Name	Corporate Office(Servicing)	Code	9202
Sales Manager Name	Reliable Bpo	Code	D9202163

Details (To be filled in BLOCK LETTERS)

1. This Proposal is for ☐ A new Policy ☒ Renewal of Policy ☐ Rollover Policy ☐ Used Policy
- 2a. Proposer's Full Name ☒ Mr. ☐ Mrs. ☐ Ms. M NARASIMHULU
- 2b. Address
- | | | |
|------------------------------|--|---|
| Flat/Building/Door/Block No. | Address for Communication | Address where vehicle is normally kept and Used |
| Road /Street/Sector | 10-178 3 RD CROSS BRINDAVANAM COLONY,,NEAR CHINMAY NAGAR 4 TH CROSS ANANTHAPURAM | |
| Nearest Landmark | | |
| Area | | |
| City | CUDDAPAH, | |
| Pin Code | 516001 | |
| State | ANDHRA PRADESH, | |
| Country | India | |
| Phone | 09493393610 | Mobile 9701748321 |
| Emergency Contact No. | | Blood Group |
| Email | MALAVATHULAM@GMAIL.COM | Fax |
3. Period of Insurance From 11/07/2019 To 10/07/2022
4. Source of Funds ☐ Business ☐ Profession ☐ Salary ☐ Agricultural Income ☐ Savings ☐ Others
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. Do you have GST Registration Number ☐ Yes ☒ No
If Yes, Please Specify
9. Related Party ☐ Yes ☐ No

An ISO 9001:2015 Certified Company

IRDAI Registration No. 103. Reliance General Insurance Company Limited. Registered Office: H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai -400710. Corporate Office: Reliance Centre, South Wing, 4th Floor, Off. Western Express Highway, Santacruz(East), Mumbai-400 055. Corporate Identity Number U66603MH2000PLC128300. 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/MOT-02/PVT-CAR-TWO-WHELLER-PF/Ver. 1.3/300117.

Details of the Vehicle

10. Registration Number AP04BV4390 11. Date of Registration 11-Jul-2018
12. Registering Authority & Location Andhra Pradesh - Kadapa
13. Year & Month of Manufacture JUL-2018 14. Cubic Capacity 150
15. Engine Number KC31E80330151
16. Chassis Number ME4KC311GJ8330211
17. Make & Model of Vehicle HONDA /CB UNICORN
18. Type of Body ☒ Bike ☐ Scooter 19. Seating Capacity including Driver 2
20. Where the vehicle being used ☐ Metro Usage ☐ Rural Usage ☐ Semi-Urban Usage ☐ Hilly Terrain
☐ Off Road Usage
21. Where the vehicle is generally parked during Night
☐ Road Side Parking ☐ Pay & park ☐ Own Parking Garage ☐ Open within residential compound
☐ Stilt Parking

Details of the Vehicle Type and Use

22. Whether the Vehicle is driven by Non-conventional source of power ? ☐ Yes ☐ No If yes ☐ Bi Fuel

Insured declared value (IDV) of the Vehicle	Age of the vehicle	Depreciation
<p>The insured's declared (IDV) Of the vehicle will be deemed to be the 'SUM INSURED' For the purpose of this policy and shall be fixed for each year of the policy at the commencement of the policy period for the insured vehicle</p> <p>The IDV of the vehicle (and side car/accessories if any fitted to the vehicle) is to be fixed on the basis of the manufacturer's listed selling price of the brand and model of the insured vehicle at the commencement of insurance /renewal and adjusted for depreciation (as per schedule alongside).</p> <p>The schedule of the age-wise depreciation as shown alongside is applicable for the purpose of Total Loss/ constructive Total Loss(TL/CTL) claims only.</p> <p>IDV of Vehicles beyond 5 years of age and of obsolete models of vehicles is to be determined on the basis of understanding between the insurer and insured</p>	Not exceeding 6 months	5%
	Exceeding 6 month but not exceeding 1 year	15%
	Exceeding 1 year but not exceeding 2year	20%
	Exceeding 2 year but not exceeding 3year	30%
	Exceeding 3 year but not exceeding 4year	40%
	Exceeding 4 year but not exceeding 5year	50%

Policy Tenure	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)	Total Value
1 Year	55993.00	0.00	0.00		55993
2 Year	48994.00	0.00	0.00		48994
3 year	41995.00	0.00	0.00		41995

23. How many person in your family can use this vehicle?
24. Are you an employee of Reliance ADA Group? If Yes Please provide Employee ID. ☐ yes ☐ No
25. Is the vehicle fitted with any Anti-theft device approved by the ARAI ? ☐ yes ☒ No
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. ☐ yes ☒ No
- a. Name of Association b. Membership Number
- c. Date of Expiry

27. Will the Vehicle be used exclusively for
 a. Private,social,domestic,pleasure and professional purposed ? ☐ Yes ☐ No
 b. Carriage of goods other than samples or personal luggage? ☐ Yes ☐ No
28. whether the Vehicle is used for Driving Tuitions ? ☐ Yes ☒ No
29. Whether use of Vehicle is limited to Own Premises ? ☐ Yes ☐ No
30. Whether the Vehicle is fitted with Fibre Glass Tank ? ☐ Yes ☒ No
31. Whether the Vehicle belongs to the Embassy/Consulate of a Foreign Country ?
 If so,is the duty element included in the IDV ? ☐ Yes ☐ No
32. Whether the Vehicle is design for the use of Blind/Handicapped/Mentally Challenged Person ? ☐ Yes ☒ No
33. Date of purchase of the Vehicle by the Proposer 11-Jul-2018
34. Whether the vehicle at the time of the purchase was ☐ New ☐ Second Hand
35. Are you an existing reliance general insurance Customer : If yes please provide , policy number ☐ Yes ☒ No

Risk Inclusions

36. Please Select the higher deductible if you wish to opt for over and above the compulsory deductible ₹ 100 for Two Wheeler
 Two Wheeler : ☐ 500 ☐ 750 ☐ 1000 ☐ 1500 ☐ 3000
37. Liability to third parties : The policy provides Third Party Property Damage(TPPD) of ₹ 1 lakh (Two wheelers)
 Do you wish to restrict the above limits to the statutory TPPD Liability limit of ₹ 6000/- only ? ☐ Yes ☐ No
38.

Legal Liability	No. of Persons
Driver	
39. Personal Accident Cover for Owner Driver. Please give details of nomination
- | Name | Name of Nominee | Age of Nominee | Name of Appointee (If Nominee is Minor) | Relationship | Address |
|------|-----------------|----------------|---|--------------|---------|
| | M THOLISAMMA | 68 | | Mother | |
- (Note : 1. Personal Accident cover for Owner driver is compulsory for sum insured of ₹ 1500000.0/-
 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 licence)
40. Extension of Geographical Area
 Whether the 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

41. Please state if the vehicle is under ☐ Hire Purchase ☐ Lease Agreement ☐ Hypothecation Agreement
 If so give name and address of concerned parties
42. Full Name
43. Address

Details of Previous Insurance

44. Full Name of Previous Insurer Reliance General Insurance Company Ltd.
45. Address 13-2-275, Sri Sai Jewels, 2nd Floor, Rf Road, Anantpur - 515001
46. Policy Number 181021823120015235 Previous policy Expiry 10-Jul-2019
47. Type of Cover ☒ Package Policy ☐ Liability only ☐ others (To be describe)
48. NO CLAIM BONUS allowed under previous policy (%) 0.00
49. Claims taken in previous policy ☐ Yes ☒ No
 If yes no. of Claims Claims Amount ₹
50. Are you entitled to no claim bonus ☒ Yes ☐ No
 If yes, please submit/ attached proof thereof

Payment Details

Cheque DD / Cheque/ DD No.

Cheque/ DD Date

Credit Card

Others

Cash

Proposer's Bank Details

51. Name of the Bank Account Holder
52. Bank Account Number
53. Name of the Bank
54. Account: ☐ Saving ☐ Current
55. Branch
56. MICR Code (9 digit MICR code number of bank and branch appearing on cheque issued by the bank)
57. IFSC Code (11 character code appearing on your cheque leaf)

☐ 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.

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 status, 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 ☐ Society ☐ Trust
☐ Partnership ☐ International Organization ☐ Corporatives ☐ Section 25 Companies

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/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 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 to 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.

This proposal form was completed by

Name _____ Place _____

Date _____

Signature of Proposer & Company seal

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 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.

Supporting Confirmation of Agent/Broker/SM/CSO

I confirm the above signature to be of the registered owner of the vehicle proposed for insurance

Name of IRDAI Agent/ Broker ☐ Mr. ☐ Mrs. Direct

Place _____

Date _____

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

Signature of IRDAI Agent/ Broker