



Long Term Two Wheeler Package Policy- Schedule

Policy Number :	920221823690632855	Proposal/Covernote No: R23	3091828218
Insured's Name : MR.RAGHAVENDRA RA	AO KARANAM	Period of Insurance : 3 Years From 00:01 Hrs on 06-Oct-2018 to 23:	59 Hrs of 05-Oct-2021
	s & Place of supply : TAT SPLENDOR APTS, KUNDALAHALLI,NEAR CMR RE SOUTH, BANGALORE, KARNATAKA,	Policy Servicing Branch: RELIANCE CENTRE, SOUTH WING, 4 EXPRESS HIGHWAY, SANTACRUZ (E 400055	
Mobile No: 9980677521		Tax Invoice No. & Date : R2309182821	18 & 23/09/2018
Email-ID: CPADMAJA2	2003@YAHOO.COM	GSTIN/UIN of the Insured :	
Geographical Area: INDI	A	Hire Purchase / Lease / Hypothecation	n:

Insured Vehicle Details					
Registration No.	KA01HM3642	Mfg. Month & Year	OCT-2015		
Make / Model	TVS / SCOOTY / ZEST	CC / HP	109		
Engine No. / Chassis No.	CG4HF2120558 / MD626CG46F2H04181	Seating Capacity Including Driver	2		
Type of Body	SCOOTERS	Total Premium ₹	3278.00		
RTO Location	KARNATAKA - K R Puram Blore				

insured's Declared Value (IDV)							
Year	1	2	3				
Vehicle IDV ₹	29610.00	25380.00	21150.00				
Electrical / Electronic Accessories ₹	0.00	0.00	0.00				
Non Electrical Accessories ₹	0.00	0.00	0.00				
Bi Fuel KIt ₹	0.00	0.00	0.00				
Total IDV ₹	29610	25380	21150				

Premium Summary			
Own Damage - Section I	Amount (₹)	Liability - Section II	Amount (₹)
Basic OD	719.55	Basic Liability (TPPD 1)	2160.00
Total Basic Own Damage Premium	719.55	Total Basic Liability Premium	2160.00
Less		PA Benefits - Section III	
Deduct 35 % for NCB	-251.84	Compulsory PA cover to Owner Driver	150.00
Sub Total of Deductions	-251.84	Total PA Premium	150.00
TOTAL OWN DAMAGE PREMIUM	467.71	TOTAL LIABILITY PREMIUM	2310.00
		TOTAL PACKAGE PREMIUM (Sec I + II + III)	2778.00
		IGST (@18.00 %)	500.00
TOTAL PREMIUM PAYABLE (₹)			3278.00

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	PADMAJA CHUNDUPALLI	45	Other

Consolidated Stamp duty Paid vide Letter of Authorisation No. CSD/89/2018/2910-11/18 dated 25th July 2018**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	requirements of the Motor Ve property belonging to the ins 1 Sum Insured - ₹ 1,00,000 /	the Policy-Death of or bodily injury to any person so far as it is necessary to meet the chicle Act, 1988. (b) Under Section II (1)(ii) of the Policy-Damage to property other than ured or held in trust or in the custody of control of the insured up to the limits specified- (TPPD -, TPPD 2 Sum Insured - ₹ 6,000 /-) under section III CSI ₹ 100000.0/-
Limitations as to use	 The Policy covers use for ar personal luggage), (c) Organ connection with Motor Trade 	y purpose other than: (a) Hire or Reward (b) Carriage of goods (other than samples or nized racing, (d) Pace making, (e) Speed testing, (f) Reliability trials, (g) Any Purpose in



reliancegeneral.co.in

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

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) on and register your claim immediately within

7days from the date of loss.
This document shall be trated 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

Special Conditions : NA

For Reliance General Insurance Co. Ltd.

Arone **Authorised Signatory**

Reliance General Insurance Company Limited. IRDAI Registration No. 103. An IS 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 No.U66603MH2000PLC128300. UIN:IRDAN103P0001V01201718.RGI/MCOM/CO/2369/PS/VER.1.0/310118 An ISO 9001:2008 Certified Company

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Long Term Two Wheeler Package Policy Proposal Form

Long Term Two Wheeler Package Policy ☐2 year Plan ☑ 3 year Plan						
F	or Office Use Only					
	Policy Number 920221 Savvion Reference No.	823690632855	Date Inspection Lead No.	J		
li	ntermediary Details (To be filled	in BLOCK LETTERS)				
	Intermediary Name Direct		Code	Direct		
	Branch Name Corpo	prate Office(Servicing)	Code	9202		
	Sales Manager Name Web S	Sales	Code	D9202162		
D	etails (To be filled in BLOCK LE	ETTERS)				
1. 2a.	This Proposal is for A new Proposer's Full Name	Policy	, ,			
2b.	Address	Address for Communication	Address where vehicle is normal	ly kept and Used		
	Flat/Building/Door/Block No. Road /Street/Sector Nearest Landmark Area	HM12, Gopalan Habitat Splendor Apts, Kundalahalli,Near CMR IT College				
	City	BANGALORE SOUTH,				
	Pin Code	560068				
	State	KARNATAKA,				
	Country	India				
	Phone Emergency Contact No. Email CP.	ADMAJA2003@YAHOO.COM	Mobile 99806775 Blood Group Fax	21		
3.	Period of Insurance	From 06/10/2018	To 05/10/2021			
4.	Source of Funds	Business Profession Salary		Savings Others		
5.	Monthly Income	Upto ₹ 20,000	₹50,001 to ₹ 1,00,000	 ₹1,00,001 and above		
6.	UID Aadhaar No.		7. PAN No.			
8.	Do you have GST Registration Numl If Yes, Please Specify	ber Yes No				
9.	Related Party	☐Yes ☐ No				

An ISO 9001:2008 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 Hightway,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.



D	Details of the Vehicle								
10.	Registration Numl	per KA01	HM3642	11. Date of Registration 07-Oct-2015					
12.	Registering Autho	rity & Location KARN	IATAKA - K R Puram Blore						
13.	Year & Month of N	& Month of Manufacture OCT-2015			14. Cubic Capacity	109			
15.	Engine Number	CG4H	IF2120558						
16.	Chassis Number	MD62	6CG46F2H04181						
17.	Make & Model of	Vehicle TVS /	SCOOTY						
18.	Type of Body	□В	ike Scooter		19. Seating Capacit	y including Driver	2		
20.	Where the vehicle	being used N	letro Usage Rural L	Jsage	Semi-Urban Usage	Hilly Terrain			
			ff Road Usage						
21.	Where the vehicle	is generally parked during	g Night						
	Road	Side Parking P	ay & park Ov	vn Parkin	g Garage Dpen wi	thin residential compo	und		
	Stilt P	arking							
D	etails of the Ver	nicle Type and Use							
22	Whether the Vehi	cle is diven by Non-conve	ntional source of power?	Yes	No If yes	Bi Fuel			
Г					\bigcirc				
L	Insured declared v	value (IDV) of the Vehicle			Age of the veh	icle	Depriciation		
	INSURED' For the	purpose of this policy and	will be deemed to be the 'SUN d shall be fixed for each yaer of	of the	Not exceeding 6	months	5%		
	policy at the comm	nencement of the policy pe	eriod for the insured vehicle		Exceeding 6 month but not exceeding 1 year		15%		
			ories if any fitted to the vehicle isted selling price of the brand		-				
	model of the insure	ed vehicle at the commen reciation (as per schedule	cement of insurance /renewal	and	Exceeding 1 year but not exceeding 2year		20%		
		, ,			Exceeding 2 year but not e	eveneding 3voor	30%		
	The schedule of the the purpose of Tot	le age-wise depreciation a al Loss/ constructive Tota	s shown alongside is applicat I Loss(TL/CTL) claims only.	ole for	Exceeding 2 year but not e	xceeding Syear	30 /6		
	IDV of Vehicles be	eyond 5 years of age and	of obselete models of vehicles	is to be	Exceeding 3 year but not e	xceeding 4year	40%		
	determined on the	basis of understanding be	etween the insurer and insured	d			500/		
			.07		Exceeding 4 year but not e	xceeding 5year	50%		
Г	D	learned declared value	New alastrian		antical O algebranica	Cide	Total Value		
	Policy Tenure	Insured declared value (IDV) of the Vehicle	Accessories fited to the		ectrical & electronics sories fited to the Vehicle	Side Car(Two_wheeler)	Total Value		
			Vehicle						
	1 Year	29610.00	0.00		0.00		29610		
\vdash	2 Year								
-		25380.00	0.00	0.00			25380		
L	3 year	21150.00	0.00		0.00		21150		
23.	23. How many person in your family can use this vehicle?								
24.	24. Are you an employee of Reliance ADA Group? If Yes Please provide Employee ID yes No								
25.	25. Is the vehicle fitted with any Anti-theft device approved by the ARAI?						es 🗸 No		
	If Yes,please attach certificate of installation in the vehicle,issued by automobile Association of India.								
26.	Are you a membe	r of Automobile Association	on of India ? If Yes,please sub	omit mem	bership copy.	☐ ye	es 🗸 No		
	a. Name of Asso	ociation		b.	Membership Number				
	c. Date of Expiry	,							



27.	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? Yes No							
28.	whether the Vehicle is used for Driving Tuitions?							
29.	Whether use o	f Vehicle is limited to Ov	vn Premises?			Yes	No	
30.	Whether the V	ehicleis fitted with Fibre	Glass Tank?			Yes	✓ No	
31.		ehicle belongs to the En element included in the	•	of a Foreign Country?		Yes	No	
32.	Whether the V	ehicle is design for the u	ise of Blind/Handi	capped/Mentally Challenged	Person ?	Yes	✓ No	
33.	Date of purcha	ase of the Vehicle by the	Proposer			07-Oct-2015		
34.	Whether the ve	ehicle at the time of the	purcahse was			New Secon	nd Hand	
35.	Are you an exi	sting reliance general in	surance Custome	er: If yes please provide, po	licy number	Yes	✓ No	
Ri	isk Inclusion	S						
36.	Please Select	the higher deductible if y	ou wish to opt for	r over and above the compuls	sory deductible ₹ 100 for	Two Wheeler		
	Two Wheeler:	500	750	1000	1500	3000		
07	Liability to thire	I narties : The nolicy pro	wides Third Party	Property Damage(TPPD) of	 ₹ 1 lakh (Two wheelers)	_		
37.						☐ Yes	□ No	
38.	1		to the statutory i	PPD Liability limit of ₹ 6000/	- only ?			
00.	Legal Liabil	ity		No. of Persons				
	Driver			(<u>/</u>)				
39.	Personal Accid	dent Cover for Owner Dr	iver. Please give	details of nomination				
	Name	Name of Nominee	Age of Nominee	Name of Appointee (If Nominee is Minor)	Relationship	Address		
		Padmaja Chundupalli	45		Other	560068,HM12, Gopalan Ha	bitat	
40. I	Compuls corporate Extension of Gehether the exter 1. Banglade	eary PA cover for owner or where the owner drivers ographical Area atton of Geographical Ares 2. Bhutan	driver cannot be over does not hold ea to the following 3. Mal	an effective driving licence) g Countries required ?		s partnership firm or a similar bo	dy	
Def	tails of Hire F	Purchase / Hypothec	ation / Lease					
42. F		ne vehicle is under e and address of conce	rned parties	Hire Purchase	Lease Agreement	Hypothecation Agreement		
Det	ails of Previo	ous Insurance						
44. Full Name of Previous Insurer Reliance General Insurance Company Ltd. 45. Address 46. Policy Number 9202217231208235 Previous policy Expiry 05-Oct-2018 47. Type of Cover Package Policy Liability only others (To be describe)								
48.	NO CLAIM BO	NUS allowed under pre-	vious policy (%)	25.00	_		_	
49.		previous policy				Yes	/ No	
50	If yes no. of (Claims A	Amount ₹		
5 U.		I to no claim bonus submit/ attached proof	thereof			✓ Yes	No	
Pay	ment Details	-						
Che	eque DD / Cheq	ue/ DD No.						
	que/ DD Date	-		Cash				
Cre	dit Card							
Oth	ers							



Proposer's Bank Details				
51. Name of the Bank Account 52. Bank Account Number 53. Name of the Bank 55. Branch 56. MICR Code (9 digit MICR 57. IFSC Code (11character I understand that any reference in the standard i	code number of bank and code appearing on your o und due on the premium p	cheque leaf) payment / any payment / clair	ns to be directly credited	Saving Current d to my aforesaid Bank Account .*
AML Guidelines				
related to any of the offence lis	ted in Prevention of Mone nsurance company has tl	y Laundering Act 2002. I und ne right to cancel the insuran	lersand that the compar ce contract in case I am	een/ will be paid out of the proceeds of crime ny has the right to call for the documents to // have been found guilty by any competent court
Nationality:	Indian	Non-Indian , If Non Indian	Please specify the cou	intry
Type of organization:	Corporation	_		Society Trust
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Partenership	International Organization	Corporatives	Section 25 Companies
	T ditorioromp	mtomational organization	corporatives	coston zo companies
Declaration by Proposer				
this declartion shall form the ba additions or alterations are carrideclare that the contents of the contract. I/We agree to accept a and that no claim has arisen in benefits under the policy in resp. confirmation of above stated de policy will be available to me/us a confirmation in this regard is reflected to the confirmation of the declaration of the declaration of I/We also shall endeavour to present the company in the event of mis-regintent to defraud thr Insurance.	sis of the contract betwee ed out after the submissic form and documents have a policy subject to the conthe expiring policy (copy clect of section I of the politails from my/our previous, RELIANCE General Insueceived, In the event this che policy shall stand autoration of the declaration from my our previous insuecure the renewal notice are your payment by chequoresentation, mis-description concerning any fact in the submission concerning any fact in the submission concerning any fact in the contract of the submission concerning any fact in the contract of the submission concerning any fact in the contract of the	n me/us and RELIANCE Ger on of this proposal form, there e been fully explained to me/us dition prescribed by the comp of the policy enclosed) I/We fucy insurers. Pending receipt of urance will be liable to release declaration is found to be incomatically forfeited. Further, and my/our previous insurers nder the relevant laws and refers, the "cash-less repair fact and pass on the same to REL le/DD favouring Reliance Geonof non-disclosure of any non files a proposalto insurance	peral Insurance Ćompan the same would be cor us and that I/We have fur hany. I/We declare that the understand and ag necessary confirmation to the payment towards a prect, any and all coverny survey arranged/ allowshall be without prejudingulations. I/We acknow contain Insurance Insurance Insurance Insurance CO. Ltd. Laterial particulars by the containing any false information and the same that I in the same information is the same in the same i	owledge and belief and I/We hereby agree that, by Limited . I/We also declare that , if any inveyed to the insurers immediately. I/ We hereby sully understood the significance of the proposed the rate of NCB stated above by me/us is correct this declaration is found to be incorrect, all gree that RELIANCE General Insurance will seek , I/We agree that, though coverage under the any claims under section I of the policy only after age available under section I of the policy from wed by RELIANCE General Insurance of the ice to any of the rights and remedies available to ledge and agree that, Pending receipt of sunce immediately upon the receipt of such renewal This policy shall be voidable at the option of the e Poposer. Any person who knowingly and with ormation, or conceals for the purpose of render the policy voidable at the company's sole
This proposal form was compl Name	etea by	Place		
Name		Place		
		Date		
			Signatur	re of Proposer & Company seal
Prohibition of Rebates - Se	ection 41 of the Insura	ance Act, 1938 as amen	ded by Insurance La	ws (Amendment) Act, 2015
No person shall allow or offe kind of risk relating to livesor pr shall any person taking out or r insurer	r to allow, either directly o operly in India, any rebate enewing or continuing a p in complying with the prov	r indirectly as an inducement of the whole or part of the colicyaccept any rebate as ma isions of this section shall be	to any person to take o ommission payableor ar ay be allowed in accorda	ut or renew or continue an insurance in respect of any rebate of the premium shown on the policy, nor ance with the published prospectuses or tables of the ch may extend to ten lakh repees.
Leonfirm the above signature to	ohe of the registered owns	or of the vehicle proposed for	incurance	
I confirm the above signature to Name of IRDAI Agent/ Broker			insurance	
	Mr. M	rs. Direct		
Place Date				
(In case of Direct Business, N	ame & Signature of CSO	(SM to be taken)	_	Signature of IRDAI Agent/ Broker
(iii case of bilect business, N	anic a dignature of CSO /	OW TO DE TAKETI)		9