



THE NEW INDIA ASSURANCE COMPANY LTD.

Regd. Office: 87, M.G.Road, Fort, Mumbai 400001

PROPOSAL FORM FOR TWO WHEELERS/PRIVATE CAR/COMMERCIAL/MISC. & SPL. TYPE OF VEHICLES - PACKAGE POLICY

IRDAI Registration.No: 190

(The queries made/details stated below are the minimum requirements to be furnished by a proposer.
The Insurer may seek any other information as desired for underwriting purpose.)

Business Channel: Name: Name of Principal officer:		Phone Number: Land / Fax Number: Email ID:
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1. Insured details:

Proposer's (Owner's) Full Name:	Gender: Male / Female	Occupation:
Tel / Mobile No:	Nationality:	Date of Birth:
Email Address:	PAN No:	GST No:
Address (Where Vehicle is normally kept and used): PIN No:	Permanent Address: PIN No:	

Period Proposed for Insurance: From _____ AM / PM of _____ to Mid Night of _____

2. Particulars of the Vehicle:

2.1. Type of Vehicle (Two Wheeler, Private Car or Commercial Vehicle):	2.2 Is Vehicle Brand New: Yes / No
2.3. Date of Purchase of Vehicle by Proposer:	2.4. Is Vehicle New or Second Hand at the time of Purchase: New / Second Hand
2.5. Vehicle Used for Private, Social, domestic, pleasure, professional purpose: Yes / No	2.6. Is Vehicle in Good Condition: Yes / No
2.7. Current Ownership: New / Used	2.8. Obsolete Vehicle: Yes / No
2.9. Year Of Manufacture:	2.10. Vehicle Invoice Value:
2.11. Cost of Body Building (If Available):	2.12. Insured Declared Value:
2.13. Registration No:	2.14. Date of Registration:
2.15. Registration Validity Date:	2.16. Name and Address of Registration Authority:
2.17. Engine No:	2.18. Chassis No:
2.19. Make:	2.20. Model:
2.21 Variant:	2.22. Color of the Vehicle:
2.23. Cubic Capacity:	2.24. Seating Capacity:
2.25. Gross Vehicle Weight:	2.26. Type of Body:
2.27. Type of Fuel:	2.28. If Available, Value of CNG / LPG Fuel Kit:
2.29. Vehicle Zone (A / B / C):	2.30. Whether Vehicle is used for Driving Tution: Yes / No
2.31. Whether Vehicle use is limited to Own Premises: Yes / No	2.32. Vehicle Designed for Blind / Handicapped / Mentally challenged Persons and endorsed by RTA: Yes / No
2.33. Whether vehicle belongs to foreign embassy or consulate or Imported vehicle without Custom Duty: Yes / No	2.34. Whether vehicle is certified as Vintage car by Vintage and Classic Car Club of India: Yes / No

2.35. Is Fibre Glass Tank Fitted:	Yes / No	2.36. If Yes, then Value of Fibre glass fuel tank:	
2.37. Are you a member of Automobile Association of India:	Yes / No	2.38. If Yes, then name of Association:	
2.39. Membership No:		2.40. Date of Expiry of Membership:	
2.41. Is the Vehicle Fitted with Anti - Theft Device:	Yes / No	2.42. If Yes, Details (Type and Model) of Anti - Theft Device:	
2.43. Is Vehicle in Road Worthy Condition and free from damage:	Yes / No	2.44. If No, Details of Vehicle Condition:	
2.45. Extension of Geographical Area required:	Yes / No	2.46. If Yes, Extension to (Bangladesh, Bhutan, Nepal, Sri-Lanka, Maldives, Pakistan):	
2.47. Whether Rally extension required for Motor Racing / Speed Test	Yes / No	2.48. No.of days for Rally:	
2.49. Vehicle Requisitioned by Government	Yes / No	2.50. Whether trailer attached to the vehicle (For Commercial Vehicle):	Yes / No
2.51. If Yes, No. of Trailers attached:		2.52. Total IDV of Trailers attached:	
2.53. Is the vehicle proposed for insurance Under Hire Purchase / Under Lease Agreement / Under Hypothication Agreement:	Yes / No	2.54. If Yes, Name and Address of Concerned Parties:	
2.55. Extra Electrical/ Electronic fittings:	Yes / No	2.56. If Yes, value of Music System:	
		2.57. If Yes, value of AC / Fan:	
		2.58. If Yes, Value of Lights:	
		2.59. If Yes, Value of Other Fittings:	
		2.60. Total Value of Extra Electrical / Electronic Fittings:	
2.61. Non-Electrical/ Electronic fittings:	Yes / No	2.62. If yes, Value of Non - Electrical / Electronic Fittings:	
2.63. Additional Towing Coverage Required:	Yes / No	2.64. If Yes then Additional Towing Coverage Amount:	
2.65. Value of Side Car (In case of Two Wheeler):			
<u>3. Previous / Expiring Insurance Particulars</u>			
3.1 Name of Previous / Expiring Insurer:		3.2. Address of Previous / Expiring Insurer:	
3.3. Previous / Expiring Policy Number:		3.4. Expiry date of Policy:	
3.5. NCB (%) in Expiring Policy:		3.6. Any Claim lodged in Previous / Expiring Policy:	Yes / No
3.7. If yes, Amount of Claim:		3.8. Whether Claim Settled / Outstanding / Rejected:	
<u>4A. Compulsory Personal Accident for Owner Driver</u>			
4.1. Do you have a valid Driving Licence:	Yes / No	4.2. If Yes, Licence Type of Owner Driver:	
If No, Please refer to declaration by the proposer*			
4.3. Age of Owner Driver:		4.4. Owner Driver Licence No:	
4.5. Owner Driver Licence Issue Date:		4.6. Owner Driver Licence Expiry Date:	
4.7. Name of Licensing Issuing Authority:		4.8. Name of Nominee:	
4.9. Age of Nominee:		4.10. Relationship with Nominee:	
<u>4B. Personal Accident Cover</u>			
4.11. Do you want to include PA Cover for Named persons:	Yes / No	4.12. If Yes, No. of Named Persons:	
4.13. Names of Named Persons:			

4.14. Individual CSI for Named Persons:		4.15. Capital SI for All Named persons:	
4.16. Nominee details for Unnamed Person/(s): (Please Provide Nominee Name, Age and Relation to nominee)			
4.17. Do you wish to include PA Cover for Paid Drivers:		Yes / No	4.18. If Yes then No of Paid Drivers:
4.19. Individual CSI for Paid Driver:		4.20. Capital SI for Paid Drivers:	
4.21. Nominee details for Unnamed Person/(s): (Please Provide Nominee Name, Age and Relation to nominee)			
4.22. Do you want to include PA cover for unnamed person:		Yes / No	4.23. If Yes then No of unnamed Persons:
4.24. Individual CSI for unnamed Person:		4.25. Capital SI for unnamed Persons:	
4.26. Nominee details for Unnamed Person/(s): (Please Provide Nominee Name, Age and Relation to nominee)			
5. Legal Liability (LL) / Third Party Coverage			
5.1. Do you wish to opt LL to paid drivers, cleaner employed for operation and/or maintenance of vehicle under WCA		Yes / No	5.2. If Yes, Provide No.of Paid drivers / Cleaners / Conductors Legally Liable.
5.3. LL to Employees of Insured traveling and / or driving the Vehicle:		Yes / No	5.4. If Yes then Number of employees Legally Liable:
5.5. LL to Soldiers / Sailors / Airmen employed as Drivers		Yes / No	5.6. If Yes then Number of Soldiers / Sailors / Airmen Legally Liable:
5.7. Do You want to reduce TPPD cover to the statutory limit of Rs.6000		Yes / No	
INSTRUCTIONS ON INSURED'S DECLARED VALUE			
The Insured's Declared Value (IDV) of the vehicle will be deemed to be the 'SUM INSURED' for the purpose of this tariff and it will be fixed at the commencement of each policy period for each insured vehicle.			
The IDV of the vehicle is to be fixed on the basis of manufacturers' listed selling price of the brand and model as the vehicle proposed for insurance at the commencement of insurance /renewal, and adjusted for depreciation (as per schedule specified below). The IDV of the side car(s) and / or accessories, if any, fitted to the vehicle but not included in the manufacturer's listed selling price of the vehicle is / are also likewise to be fixed.			
The schedule of age-wise depreciation as shown below is applicable for the purpose of Total Loss/ Constructive Total Loss (TL/ CTL) claims only. A vehicle will be considered to be a CTL where the aggregate cost of retrieval and / or repair of the vehicle subject to terms and conditions of the policy exceeds 75% of the IDV.			
SCHEDULE OF DEPRECIATION FOR ARRIVING AT IDV			
AGE OF VEHICLE		% OF DEPRECIATION FOR FIXING IDV	
Not exceeding 6 months		5%	
Exceeding 6 months but not exceeding 1 year		15%	
Exceeding 1 year but not exceeding 2 years		20%	
Exceeding 2 years but not exceeding 3 years		30%	
Exceeding 3 years but not exceeding 4 years		40%	
Exceeding 4 years but not exceeding 5 years		50%	
Note.: IDV of vehicles beyond 5 years of age and of obsolete models of the vehicles (i.e. models which the manufacturers have discontinued to manufacture) is to be determined on the basis of an understanding between the insurer and insured.			
DECLARATION BY THE PROPOSER			
I / We hereby declare that the statements made by me / us in this Proposal Form, including document(s) attached, are true and correct, to the best of my / our knowledge and belief and nothing materially affecting the risk has / have been concealed by me / us. I / We hereby agree that this declaration shall form the basis of the contract between me / us and "The New India Assurance Co. Ltd." and shall form part of the insurance contract.			

I/We further declare that I/We do not hold an effective Driving License to drive the insured vehicle and therefore I/We am/are ineligible for Compulsory Owner Driver Personal Accident cover. (Please refer point 4.1 of proposal form)*		
I / We further declare that any addition(s) or alteration(s) or modification(s) is / are carried out in the vehicle or in the document(s), during the currency of the policy, furnished / forming part of this Proposal Form, shall be intimated in writing to the Insurer immediately, failing which, the same shall be construed as breach of the Contract and my / our rights shall be forfeited thereunder, irrespective of whether or not, the same is material to the losses / Liabilities.		
I / We also declare that I / we shall comply with the requirements of M. V. Act, 1988, and subsequent amendments thereto from time to time and rules made there under.		
I / We also declare that I / we shall inform this insurer, in case, the Government requisitions this vehicle during the currency of the Policy (GR-38 of IMT).		
I/We hereby declare that the vehicle proposed for insurance has a valid PUC & Fitness Certificate(in case of transport vehicles) on the date of fresh issuance/renewal of the policy		
I / We also declare that this vehicle shall be handed over to the Driver only after due verification of genuinity and effectiveness of his Driving Licence to drive this vehicle		
I / We hereby also declare that I / we am / are willing to accept a policy of insurance in this company's usual Form.		
Place:	Left Thumb Impression / Signature of Proposer:	
Date & Time	Name of the Witness with Signature:	
N. B.: I / We am / are putting my / our signature(s) after understanding the above contents, incorporated in this Proposal Form , read over to me / us, are true and in accordance with my / our version		
Vehicle Inspection report in case of Break in Insurance		
(For Office Use Only)		
Reg.No:	Place of inspection:	Odometer Reading:
Chassis.No:	Engine No:	Color Of vehicle:
Specify the condition of the Vehicle and damages , if any:		
N. B. : Whether Photograph(s) of the Vehicle is/ are attached for ready reference? If yes, specify Nos. of Photographs:		
Date & Time:	Signature:	
Place:	Name:	
	Designation:	
	S.R.No:	
Recommendation(s) of Development Official:	Signature & Date with Name and S.R.No	
Nominated Underwriter:	Signature & Date with Name and S.R.No	
INSURANCE ACT 1938, SECTION 41 - PROHIBITION OF REBATES		
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 or 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 prospectus or tables of the Insurer.		
2. Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to five hundred rupees.		