

Universal Sampo General Insurance Co. Ltd.

Regd. Office : 103, 1st Floor, Ackruti Star, MIDC Central Road, Andheri (East), Mumbai - 400093.
Tel : 41659800/900, Email: contactus@universalsompo.com

Agents/Brokers Code

PROPOSAL FORM- MOTOR TWO WHEELER INSURANCE POLICY

A (I). Personal Details of Proposer/Owner:

Proposer's (Owner's) Full Name: Mr/Mrs			
Address for Communication			
Address (Address where vehicle is normally kept and used):	Pin Code : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
	Telephone No. :	Fax :	
	Mobile No. :	Mail Id:	
Occupation / Business:			
Date of Birth:			
Year of issuance of first driving license:			
Type of Cover required	Liability Only Policy / Package Policy / Others (specify)		
Period of Insurance	From	To	

1.	Registration No. and Date of Registration of the Vehicle:		
2.	Registering Authority & Location :		
3.	Engine No :		
4.	Chassis No. :		
5.	Make and Model of Vehicle :		
6.	Year of Manufacture :		
7.	Type of Body/Model :		
8.	Cubic Capacity :		
8(A)	Colour of the Vehicle		
9.	Seating capacity including Driver :		
10.	Whether the vehicle is driven by non-conventional source of power If yes, please give details.	YES	NO
11.	Whether the vehicle is used for driving tuitions.	YES	NO
12.	Whether extension of geographical area to the following countries required ? Bangladesh, Bhutan, Maldives, Nepal, Pakistan and Sri Lanka. If 'Yes' state the name of the countries.	YES	NO
		1. _____	
		2. _____	
		3. _____	
13.	Whether use of vehicle is limited to own premises?	YES	NO
14.	Whether vehicle is used for Commercial purposes ?	YES	NO
15.	Whether vehicle belongs to foreign embassy / consulate ?		
16.	Whether vehicle is designed for use of Blind/ Handicapped/ mentally challenged persons and duly endorsed as such by RTA ?	YES	NO
17.	Whether the vehicle is fitted with fibre glass tank ?	YES	NO
18.	Do you wish to opt for higher deductible over and above the compulsory deductible (Rs.50/- for Two Wheeler) If yes, please specify the amount Rs. 500/750/1000/1500/3000	YES	NO
19.	Are you a member of Automobile Association of India? If yes, please state	YES	NO
		a. Name of Association _____	
		b. Membership No. _____	
		c. Date of expiry _____	
20.	Are you entitled to "No Claim Bonus "? If yes, please submit proof thereof.	YES	NO
21.	Is the vehicle fitted with the any Anti-theft device approved by the AARI? If Yes, attach Certificate of Installation in the vehicle issued by AARI.	YES	NO
22.	Liability to Third Parties. <i>The policy provides Third Party Property Damage(TPPD)of Rs. 1.0 lakhs</i> Do you wish to restrict the above limits to the statutory TPPD Liability limit of Rs.6000/- only? (In case if you opt for lower TPPD limits of Rs.6000/- you shall be entitled for a discount of Rs,50/-)	YES	NO
23.	Do you wish to cover Legal Liability to ?		
	A) Driver (No. of persons _____)	YES	NO
	B) Other employees (No. of persons _____)	YES	NO
	C) Unnamed Passengers (No. of Persons _____)	YES	NO
24.	Do you wish to include Personal Accident (P.A.) Cover for Named persons ? If yes, give name and Capital Sum Insured (CSI) opted for. The maximum CSI available per person is Rs. 1 lakhs.		
	Name	CSI opted (Rs.)	
	1. _____		
	2. _____		
	3. _____		
25.	Do you wish to include P.A. Cover for pillion rider If yes, give the number of persons as per seating capacity and Capital Sum Insured (CSI) opted. NB: The maximum CSI available per person is Rs. 1 lakhs.	YES	NO
	Number of persons	CSI opted (Rs.)	

26. Insured's Declared Value (Please fill up the following table:)

Insured's Declared Value of vehicle	For Side Car	Non-electrical accessories fitted to the vehicle	Electrical & electronic accessories fitted to the vehicle	Value of CNG Kit	Total IDV
Rs.	Rs.	Rs.	Rs.	Rs.	Rs.

Note: The Insured's Declared Value (IDV) of the vehicle will be deemed to be the 'SUM INSURED' for the purpose of this insurance 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 THE 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 obsolete models of vehicles (ie. Models which the manufacturers have discontinued to manufacture) and vehicles beyond 5 years of age will be determined on the basis of an understanding between the insurer and the insured.

27. Previous History

a. Date of Purchase of the vehicle by the proposer _____

b. Whether the vehicle was New or Second Hand at the time of Purchase _____

c. Will the vehicle be used exclusively for

A. private, social, domestic, pleasure & professional purposes Yes No

B. carriage of goods other than samples or personal luggage Yes No

d. Is the vehicle in good condition? Yes No

If "No" please give full details _____

e. Name and address of the previous insurer _____

f. Previous Policy Number _____
 Period of Insurance from ____/____/____ to ____/____/____

g. Type of cover: Liability Only Cover / Package Cover /Others(specify)

h. Claims lodged during Year Number Amount (Rs.)
 the preceding 3 years _____

i. Has any insurance company ever :

a) declined the proposal Yes No

b) cancelled & refused to renew Yes No
 (if yes, reasons there for).....

c) imposed special condition or excess Yes No
 (if yes, reasons and details thereof)

j) The total Kilometers run by the vehicle:kms

k) The approx. running done by the vehicle annually? -----kms

l) Whether the vehicle is parked in own/Society premises at night? Yes No

28. Details of Hire Purchase / Hypothecation / Lease

a) Is the vehicle proposed for insurance :-
 Under Hire Purchase
 Under Lease Under Hypothecation Agreement

b) If yes, give name and address of concerned parties _____

29. Details of Driver:

(a) Age Owner Driver _____ Others _____

(b) Does the driver suffer from defective vision or hearing or any physical infirmity. Yes No
 If "Yes" please give details.

(c) Has the driver ever been involved/convicted for causing any accident or loss? Yes No
 If yes, please give details as under including the pending prosecution, if any :-

Driver's Name	Date of Accident	Circumstances of Accident/ Claim	Loss/Cost Rs.

30. Any other relevant information :

Declaration by Insured

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 the "Universal Sampo General Insurance Co. Ltd."

I/We also declare that any additions or alterations are carried out after the submission of this proposal form then the same would be conveyed to the insurers immediately.

Place :

Date :

Signature of Proposer

INSURANCE ACT 1938, SECTION 41 - PROHIBITION OF REBATES

- 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.
- Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to Ten Lakhs rupees.

Universal Sampo General Insurance Co. Ltd.

Unit No 601/602, A Wing, 6th Floor, Reliable Tech Park, Cloud City Campus, Gut No 31, Mouje Elthan, Thane Belapur Road, Airoli, Navi Mumbai - 400708
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CIN: U66010MH2007PLC166770, VERSION : USGI13_NH001

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