Form No

STANDARD PROPOSAL FORM FOR "LIABILITY ONLY" POLICY (For Commercial Vehicles other than Motor Trade Internal Risks Policies)

A. Questions that are necessarily to be listed for granting the cover as per the Motor Vehicles Act-1988.

A (I). Personal Details of Proposer/Owner: Proposer's (Owner's) Full Name (In capital letters) 2 Address (where the vehicle is normally kept) Personal Details (In capital letters, with pin code) PIN: Telephone: Fax: Mobile No: Mail Id: Occupation / Business Type of Cover Liability Only Policy 4 5 Period of Insurance Hrs on ___/__/ From: ____

To: Hrs on / /

A (II). Vehicle Details 6 Registration Number of the Vehicle Date of Registration of the Vehicle 7 8 Registering Authority & Location Year of Manufacture 9 10 Engine Number Chasis Number 11 Make of the Vehicle 12 13 14 Type of Body Vehicle Specifications 15 Gross Vehicle Weight (GVW) & Cubic Capacity (C.C) Max. licensed carrying capacity (No.of Passengers) in case of Passenger Carrying Vehicles? 17 Whether the vehicle is driven by non-conventional source of power / CNG / LPG / Bi-Fuel ? If 'YES', please give details Whether the use of vehicle is limited to own premises? YES 18 NO Whether the commercial vehicle is also used for private YES NO purposes (excluding use for hire or reward)? 20 Whether the vehicle is used for driving tuitions? (GR-44) YES NO Details of Hire Purchase / Hypothecation / Lease 21 (IMT-5) a) Is the vehicle proposed for insurance is: (i) Under Hire Purchase? NO (ii) Under Lease Agreement? YES NO 1 (iii) Under Hypothecation? YES NO 1 b) If 'YES", give name and address of concerned party/parties: (Note: Copies of R.C Book, Permit & Fitness Certificate should be submitted along with the proposal form)

A (III). LIABILITY SECTION: COVERAGE

	22	Coverage for liability against Third Party Risks (Death or Bod in respect of:	ily Inju	ry) r	equired			
		(i) Owner Driver only	YES	/	NO			
eath		(ii) Any person other than Paid Driver	YES	/	NO			
cs: D jury		If 'YES", give details of such other persons:						
oarty Risks: D Bodily Injury		1.						
Party		2.						
Third Party Risks: Death/ Bodily Injury		3.						
Ė		[Note: 1. Section146 of Motor Vehicles Act-1988 makes it mandator the vehicle to ensure that he or any other person authorized vehicle in public place has insurance against third party risks. Section146 exempts the paid driver.) 2. As per Section 147 (2)(a) The liability is 'as incurred' in the bodily injury of a third party]	by hir The ex	m to cplan	drive a ation to			
	23	Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs.6000/- only?						
Third Party Risks: TPPD (IMT-20)		[For additional TPPD limits, please see Q.No.25]	YES	/	NO			
ks: n' under oulsorily Act-1988)	24	Legal liability to persons employed in connection with operation of the vehicle who are 'workmen'. [The liability of the Employer under the Workmens' Compensation Act-1923 is covered under the Motor Vehicles Act-1988.						
Ses		1) Drivers (No.of persons:)						
Third Party R ility to 'Workm Act-1923 (Cor covered by M.		2) Employees (Workmen) (No.of persons:)						
		(Note: The Motor Vehicles Act-1988 under Sec.147(1)(ii)(i) employees who are workmen within the meaning of Compensation Act-1923.)						
Liabi W.C. to be	§ 4	For additional coverage, please refer to Q.No.26]						

B. Questions that provide additional covers as per IMT Endorsements

ГРР		Rs.7,50,000/- for commercial vehicles. Do you wish to cover the ac	aaiti	onal	iimit?
Addl. TPPD	(GR-39)	[Refer to Q.No.23]	ES	/	NO
Additional Liability to Workmen	26 (1MT-28)	Do you wish to cover wider legal liability to employees who are 'wo information is sought to cover in addition to liability under Compensation Act-1923, also liability under the Fatal Accidents Ac Common Law] (Note: The additional liability under Common Law and Fatal Accidence of the common Law a	the ct-18	Wor 855 a	nd the
		respect of employees who are workmen is covered under this en	idors	seme	nt).
		[Refer to Q.No.24]			
ou nen	27	Do you wish to cover wider legal liability to employees who are NO)T 'W	vorkr	nen'?
rkm v		YE	ES	/	NO
Liability to Employees who are not Workmen	(IMT-29)	(Note: The liability under Common Law and Fatal Accidents Act- of employees who are not workmen can be covered under this e			
Personal Accident Cover For Owner Driver	28	Personal Accident Cover for Owner Driver is compulsory in the Cover. Please give details of nomination: (a) Name of the Nominee & Age : (b) Relationship : (c) Name of the Appointee (If Nominee is a Minor) : (d) Relationship to the Nominee : (Note: 1. Personal Accident cover for Owner Driver is compulsored of Rs.2,00,000/- for Commercial Vehicles 2. Compulsory PA cover for owner driver cannot be givenicle is owned by a company, a partnership firm or a similar bowhere the owner-driver does not hold an effective driving license)	ulsor	ry fo	r Sur
	29	Do you wish to include Personal Accident cover for named persons	?		
PA Cover for Named Occupants	(IMT-15)	If YES, give name and Capital Sum Insured (CSI) opted for: Name CSI Opted Nominee	YES Rela	/ ation	ship

1	30	Do you wish t Passengers/hirer/pill	o include Pers		cover for	Un-named	
PA Cover for Un-Named Occupants	(IMT-16)	If YES, give number No.of Persons:	of persons and Ca	oital Sum Insured (
		(Note: The maxim Commercial Vehicles		per person is r	(S.Z Lakiis	o iii case oi	
=	31	Whether extension of geographical area to the following countries required?					
Geographica Extension	(IMT-1)	(1) Bangladesh (3) Maldives (5) Pakistan	YES / NO YES / NO YES / NO	(2) Bhutan (4) Nepal (6) Sri Lanka	YE	S / NO S / NO S / NO	
(Note: Presently the territory covered is geographical area cover can be availed by use of this						Extension of	

C. Questio	ns tha	at are elicited for information and data collection purposes				
	32	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? : New / Second Hand				
		c. Will the vehicle be used exclusively for				
		(i) Private, Social, Domestic, Pleasure & Professional Purpose? (ii) Carriage of goods other than samples				
ory.		or personal luggage? YES / NO				
Previous History		d. Is the vehicle is in good condition? YES / NO If NO, please give details:				
Previo	e. Name and Address of the previous insurance company:					
f. Previous policy number:						
		g. Period of Insurance : From:To:				
		h. Claims lodged during the preceding 3 years:				
		YEAR NO.OF CLAIMS CLAIM AMOUNT (Rs.)				
	39					
	33	Details of the Driver:				
Driver Details	e: 3	a. Age & Date of Birth of the Owner: Age:Yrs DOB:/				
_		d. Has the driver ever been involved / convicted for causing any accident of loss?				

If YES, give details as under including the pending prosecutions:

- Driver's Name :
- Date of Accident:
- Loss / Cost (Rs.):
- Circumstances of Accident / Loss:

Declaration by	the 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 Insurance Company 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 Insurance Company immediately.						
Place:						
Date :	Signature of the Proposer/s.					

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 in the policy, nor shall any person taking out of 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.

PROHIBITION OF REBATES (Insurance Act-1938, Section 41)

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.

<u>Note:</u> Denial of "Third Party Liability Only Cover" by Insurer, for reasons other than fraud/misrepresentation by proposer, will entail Regulatory action.