



THE ORIENTAL INSURANCE COMPANY LIMITED
Regd.Office : Oriental House, P.B.No.7037,A-25/27, Asaf Ali Road, New Delhi- 110 002

PROPOSAL FORM FOR “NAGRIK SURAKSHA INDIVIDUAL POLICY”
(PERSONAL ACCIDENT WITH HOSPITALISATION EXPENSES INSURANCE POLICY)

1. Full Name of the proposer :
2. Full Name & address of the person to be insured & relation with the proposer :
3. Occupation/Profession of the person to be insured :
4. Annual Income of the person to be insured :
5. Date of Birth of the person to be insured :
6. Particulars of disablement/injury/sickness , if any, of the person to be insured :
7. Details of the similar other Insurance policy(ies)held ,if any, by the person to be insured
8. Sum Insured
(I) Personal Accident Section : Rs. _____
(II) Hospitalisation Section : Rs. _____
(III)Total SUM INSURED (I+II) : Rs. _____
9. Nationality :
10. Proposed Period of Insurance : From _____ to _____

DECLARATION

1. I hereby declare, on my behalf and on behalf of all persons proposed to be insured, that the above statements, answers and/or particulars given by me are true and complete in all respects to the best of my knowledge and that I am authorized to propose on behalf of these other persons.
2. I understand that the information provided by me will form the basis of the insurance policy, is subject to the Board approved underwriting policy of the insurance company and that the policy will come into force only after full receipt of the premium chargeable.
3. I further declare that I will notify in writing any change occurring in the occupation or general health of the life to be insured/proposer after the proposal has been submitted but before communication of the risk acceptance by the company.
4. I declare and consent to the company seeking medical information from any doctor or from a hospital who at anytime has attended on the life to be insured/proposer or from any past or present employer concerning anything which affects the physical or mental health of the life to be assured/proposer and seeking information from any insurance company to which an application for insurance on the life to be assured/proposer has been made for the purpose of underwriting the proposal and/or claim settlement.
5. I authorize the company to share information pertaining to my proposal including the medical records for the sole purpose of proposal underwriting and/or claims settlement and with any Governmental and/or Regulatory authority.

Signature of the proposer/insured

Place _____

Date: _____

NOMINATION

I _____ hereby *nominate* the moneys payable, in the event of my death, arising out of accident payable under the policy, by The Oriental Insurance Company Limited, to Mr./Ms. _____ (relation with the insured) _____ and I further declare that his/her receipt shall be final and sufficient to the Insurance Company.

Signature Name and address of the witness _____

Place: _____ Date: _____

Signature of the Proposer/Insured

PROHIBITION OF REBATE

1. Section 41 of the Insurance Act 1938 provides as follows:
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 except such rebate as may be allowed in accordance with the published prospectus 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.