

EDELWEISS MISCELLANEOUS VEHICLE PACKAGE INSURANCE PROPOSAL FORM

1. Please answer all questions in CAPITAL LETTERS 2. The Liability of the Company does not commence until this Proposal has been accepted by the Company and premium has been paid 3. This Proposal will be the basis of any subsequent policy that We issue to You. It is therefore essential that You provide all the information in this Proposal FULLY AND ACCURATELY and that You provide us with any and all additional information relevant to risk to be insured or our decision as to acceptance of the risk or the terms upon which it should be accepted

\*Servicing Branch Name: Servicing Branch Code:

INTERMEDIARY DETAILS
Intermediary Name: Intermediary Contact No.: Intermediary Reference Code:
Intermediary Email: Intermediary Sales Person's Name:
Intermediary Sales Person's Contact: Intermediary Sales Person's Code: Source Code:
POS UID Aadhaar No./PAN:

PROPOSER DETAILS
Customer ID: \*PAN:
\*Copy of PAN card to be provided if (i) premium paid in cash equals or exceeds ₹50,000 or (ii) premium equals or exceeds ₹1,00,000
Title: Mr. Mrs. Ms. M/s. Dr. Name: FIRST NAME MIDDLE NAME LAST NAME
Date of Birth: Age (in completed years): Gender: Male Female Third Gender
Correspondence Address:
City: State: Pin Code:
Office Address:
City: State: Pin Code:
Contact Details: Mobile: Telephone (Res.):
Telephone(Office): E-mail ID: Occupation / Business:
Proposed period of insurance: From: To:

VEHICLE DETAILS
Registration No.: Date of Registration: Registration Authority (RTO):
Location of the Vehicle: Year of Manufacture: Date of purchase of the vehicle by You:
Vehicle Purchased is: Brand New Used Vehicle Type: Indigenous Imported Does the Sum Insured include customs duty?
Engine No.: Chassis No.:
Make: Model: Subtype: Colour:
Cubic Capacity/GVW/HP: Seating capacity: Driver (1) + Fuel used: Petrol Diesel CNG/LPG Electric Others
Tyres used: Tubeless With tube Transmission Type: Manual Automatic
Kilometre reading as on: Average monthly use (in Kms):
Whether the vehicle is fitted with fibre glass tank? Yes No
Type of Vehicle/Risk: Goods Carrying Passenger Carrying Miscellaneous Type of Vehicles Type of Carrier: Private Carrier Public Carrier
Trailer details if applicable: Make:
Trailer 1: Registration No.: Chassis No.:
Trailer 2: Registration No.: Chassis No.:
PUC details: Number Valid From: Valid Till:
Fitness certificate details: Valid up to:
Whether any modifications/conversions has been done on the maker's standard specification? Yes No If yes, please give details
Is the vehicle fitted with anti-theft device: Yes No a) Manufacturer and type of device:
b) Is it approved by Automobile Research Institute, Pune? Yes No
Is the vehicle in good state of repair? Yes No If no, give damage details:

USAGE
Where will the vehicle be generally used: Expressway National highways State highways City roads Town Village roads
Private roads (Indicate more than one if used)
Vehicle Usage: As Bus/Taxi/Auto Maxi cab Towing Purpose By Schools for students Other purpose
Nature of Permit: National State Interstate City Limits
Will use of vehicle be restricted to own premises? Yes No
During night, the vehicle is parked at: Covered parking Uncovered parking Road side
Is the vehicle maintained by a company? Yes No
Is the vehicle being used for driving tuitions? Yes No
Are You a member of Automobile Association of India? Yes No
If yes, Name of Association: Membership No.: Date of expiry:
Annual Mileage: 0-10,000km 10,000- 20,000km More than 20,000km

**PAST INSURANCE DETAILS**

Name and address of the previous insurer: \_\_\_\_\_

Previous policy number: | | | | | | | | | | | | | | | | | | | | | |

Policy expiry date: | D | D | | M | M | | Y | Y | Y | Y |

Type of cover: Package  Liability only  Fire and Theft Only  Fire Only  Theft Only 

Claims lodged during the preceding 3 years:	Year	Number of claims	Amount (₹)

Status of No Claim Bonus (NCB) (Please attach renewal notice/ NCB Confirmation letter)

**NCB Declaration:**

I/ We hereby declare that the rate of NCB claimed by me/us is correct and that no claim has arisen in the expiring policy period (copy of policy enclosed). I/We further undertake that if this declaration is found to be incorrect, all benefits under the policy in respect of Section 1 of the policy will stand forfeited.

Date: | D | D | | M | M | | Y | Y | Y | Y |

Signature

**Has any company, in respect of the risk to which this Proposal relates, ever:**Declined a proposal, refused renewal or terminated insurance? Yes  No Required an increased premium or imposed special conditions? Yes  No 

If "Yes" in either case, please give details: \_\_\_\_\_

**DRIVER DETAILS AND NOMINATION DETAILS**The vehicle would be driven by: (a) You, the insured only  (b) You and Your Spouse  (c) You, Your Spouse and any other person named below 

Please give details of main drivers/ named drivers referred above:

Sr. No.	Name in Full	Relationship with the Proposer	Date of Birth	Occupation	No. of Driving Years	Suffering from any disease/infirmity (Please see note below)
			D   D     M   M     Y   Y   Y   Y			
			D   D     M   M     Y   Y   Y   Y			
			D   D     M   M     Y   Y   Y   Y			

In case of additional Driver kindly attach a separate sheet

Note: Please mention whether the person suffers from Diabetes, epilepsy, heart condition or any other disease or infirmity (including uncorrected defective vision or a hearing or mental defect) that could affect his/ her ability to drive

**Details of nomination**

Name of Nominee: \_\_\_\_\_ Age: | | | Relationship with Insured: \_\_\_\_\_

Name of Appointee (If Nominee is minor): \_\_\_\_\_ Relationship of Appointee with Nominee: \_\_\_\_\_

**Have You or any of the above drivers**

Been prosecuted or convicted for any offence or motor insurance / been refused or imposed any special condition by any insurer / had any accident during the last 3 years?

Yes  No 

If You have answered Yes to any of questions above please give details: \_\_\_\_\_

**PROPOSED COVERAGE**

Insured's Declared Value of the vehicle (₹)	Non-Electrical accessories fitted to the vehicle (₹)	Electrical and electronic accessories fitted to the vehicle (₹)	Trailer (₹)	Value of CNG/LPG kit (₹)	Total Value (₹)

Type of cover required: Package  Theft and Third Party  Any other (please explain) \_\_\_\_\_Do you want to cover for lamps, tyres/tubes, mudguards, bonnet/side parts, bumper, headlights and paintwork of the damaged portion up to 50% (IMT 23)? Yes  No Do you wish to cover against Overturning? Yes  No 

(Applicable for mobile cranes, drilling rigs, mobile plants, excavators, navies, shovels, grabs, rippers, wheel order back hose) – (IMT 47)

Do you wish to cover Negligence of the Owner or Driver? – (IMT 44) Yes  No Theft and Conversion Risk: Yes  No Use of commercial type vehicles for both commercial and private purpose. Yes  No Do You wish to limit Third Party Property Damage cover to the statutory limit of ₹ 6,000 Yes  No Do You wish to opt for legal liability to : (a) Paid Driver: Yes  No  (b) Cleaner: Yes  No  (c) Other employees: Yes  No  (if Yes, No. of persons \_\_\_\_\_)Do You wish to opt for Personal Accident cover for named persons? Yes  No 

If Yes, please give the name of the persons (other than Yourself or paid driver /cleaner)



**DECLARATION**

I/We, hereby, further declare, on my behalf and on behalf of all persons proposed to be insured, that I/We have fully understood the product features, including its suitability, the contents of this proposal form and all other connected documents significant and incidental to availing the insurance policy from the Company

I/We, the undersigned, hereby declare and warrant that the insurance contract and policy to be issued by Edelweiss General Insurance Company Limited [Company] is subject to the declarations, warranties, statements and particulars given in this proposal form. The statements and particulars given in this proposal form are complete, true and accurate to the best of my/our personal knowledge and belief.

I/We have clearly understood the terms and conditions [T & C] applicable to the proposed insurance contract and agree that the statements and particulars given in this proposal form shall be held to be promissory and shall be the basis of the insurance contract between me/us and the Company; and the Company shall have no liability under the insurance contract if it is found that any of my/our statements or particulars or declarations in this proposal form or other documents are incorrect and or untrue or there has been suppression of any information or provision of misleading or false information, in any respect, on any matter regarding the grant of a cover.

I/We hereby agree to receive the policy schedule only and understand that the T & C of the proposed insurance contract are available on the website of the Company, [www.edelweissinsurance.com](http://www.edelweissinsurance.com). "I/We agree to receive service related information from Edelweiss General Insurance Co. Ltd. and its service providers from time to time, through electronic and telecommunication mode including WhatsApp, and understand that no unsolicited information will be sent to me/us.

I/We state that the salient features and terms and conditions of the proposed insurance contract have been explained to me/us in vernacular language, and I/We agree to the same."

Date:

Place: \_\_\_\_\_

Signature of Proposer(s)/  
Authorized Signatory

Stamp, where proposer is a juristic person

**VEHICLE INSPECTION REPORT (For Break-In Insurance/Roll Over Cases)**

Vehicle No.:                    Chassis No.:

Engine No.

Odometer Reading:         Colour: \_\_\_\_\_ Photographs Attached: Yes  No

Damage Details: \_\_\_\_\_

Inspected By: \_\_\_\_\_ Place: \_\_\_\_\_

Date:    Time:  :

Signature of surveyor

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

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 or 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 table 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 10 lakh rupees.

As a go-green initiative, Edelweiss General Insurance Co. Ltd. shall be sending the policy documents to your e-mail address, as provided by you in this proposal form.

I do not want the physical copy of my policy documents.

I want the physical copy of the policy documents to be sent to my address, as mentioned in the proposal form.

**ACKNOWLEDGEMENT**

We acknowledge with thanks the receipt of your proposal dated \_\_\_\_\_ towards Edelweiss Miscellaneous Vehicle Package Insurance for the vehicle bearing reg. no. \_\_\_\_\_.

We also acknowledge receipt of premium amount by way of cash/ cheque/ demand draft/ others, vide instrument no. \_\_\_\_\_, for an amount of ₹ \_\_\_\_\_.

Please note that neither the submission to us of a completed proposal for insurance nor any payment for any policy sought obliges us to agree to issue a policy, which decision is and always shall be in our sole and absolute discretion.

If we accept the proposal, it shall be subject to the policy terms and conditions and we shall have no liability to make any payment if the appropriate premium amount is not received by us in full and in time, or is not realised or any necessary requirement is not fulfilled.

If we do not accept the proposal, we will inform you within 15 days from the date of receipt of this proposal and refund any payment received from you without interest.

Signature of the Receiver  
and Official Seal