





Do You wish to opt for Personal Accident cover for unnamed passengers? Yes  No

If Yes, No. of persons \_\_\_\_\_ Sum Insured per person \_\_\_\_\_

Do You wish to cover Non-Fare Paying Passengers? Yes  No

Do You wish to cover Legal Liability to person employed in connection with Operation/Maintaining and/or Loading/Unloading? Yes  No

Whether geographical area extension to the following countries is required?

Bangladesh  Bhutan  Maldives  Nepal  Pakistan  Sri lanka  (please tick whichever applicable)

**Details of Hire Purchase / Hypothecation / Lease:**

a) Is the vehicle proposed for insurance:

Under Hire Purchase: Yes  No

Under Lease Agreement: Yes  No

Under Hypothecation Agreement: Yes  No

b) If yes, give name and address of concerned parties: \_\_\_\_\_

**ADD ON COVER: PLEASE CHOOSE YOUR ADD-ON COVERS:**

Depreciation Protect  Invoice Value Protect  Consumable Expenses Protect  NCB Protect

EMI Protect  EMI Amount Rs: \_\_\_\_\_ due on - | D D | M M | Y Y Y Y |

Do you have any other CPA or individual PA cover (24 hours basis)? Yes / No

If Yes, please provide the Policy Number, Name of the Insurance Company, Sum Insured and Period of Insurance

**Co-Insurance Details: Insured by someone else too? Please tell us who we're sharing this ride with!**

Sr. No.	Policy Number	Name of the Insurance Company	Sum Insured	Period of Insurance
1				
2				
3				
4				

Amount of Sum Insured required – ₹

(This amount should be ₹15 Lakh if you do not have any other PA cover, or if you do, the total cover of all your policies should be ₹15 Lakh.)

If there is any other disclosure to be made, please write the same in a separate sheet, sign the sheet and attach it to this proposal.

**PAYMENT DETAILS:**

1) Mode of Payment: Cheque  \*Cash  Credit/Debit Card  Others \_\_\_\_\_

\*copy of PAN card to be provided where the amount equals or exceeds ₹50,000

Cheque No.: | | | | | | | | | | | | | | | | | | | | | | | Cheque Date: | D D | M M | Y Y Y Y |

2) Documents attached: Cover note  Renewal notice  Policy copy  Inspection report  Registration Certificate  Declaration

**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. "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."

Signature of Proposer(s)/  
Authorized Signatory

Date: 

D	D	M	M	Y	Y	Y	Y
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Place: \_\_\_\_\_

Stamp, where proposer is a juristic person

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

Vehicle No.: 

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 Chassis No.: 

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Engine No. 

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Odometer Reading: 

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

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

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

Date: 

D	D	M	M	Y	Y	Y	Y
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 Time: 

H	H
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 : 

M	M
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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 Passenger Carrying 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