

Welcome

Mr. NIRAJ YADAV

VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402
 VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402
 VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402
 SALEMPUR
 UTTAR PRADESH India - 274402
 9648*****

**From here on,
 you're our responsibility.**

Welcome on board.

Your Reliance Two Wheeler Policy-Stand-alone Own Damage - Policy Schedule, with Policy Number 131522423080019229 is now live to access your policy anytime, anywhere download our Reliance Selfi App and enjoy a host of special features.



Download Now |  



My Policy

Attach, Access or Download your policy



Claim Status

Register, Track or Submit claim documents



Locator

Go cashless, Tap and spot from amongst 5000+ network garages.



Video Claim Assistance

Intimate claims instantly through live video streaming.

Now *Live Smart*
 With Reliance general Insurance.

Tech+ 

Best Regards,



reliancegeneral.co.in



022 4890 3009 (Paid)



74004 22200 (WhatsApp)



Reliance Two Wheeler Policy-Stand-alone Own Damage - Policy Schedule

Important

- 1) The validity of this certificate of Insurance cum policy is subject to realization by the company of the premium cheque paid by the Insured.
- 2) Except as provided in GR 27 Rule (g) of Erstwhile Indian Motor Tariff (i.e. Sale of Vehicle), No NCB will be allowed when a policy is not renewed within 90 days of its expiry.

Policy Number : 131522423080019229	Proposal/Covernote No: R18112446647
Insured Name : Mr. NIRAJ YADAV	Period of Insurance : From 00:00 Hrs on 21-Nov-2024 to Midnight of 20-Nov-2025
Communication Address & Place of Supply : VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402 VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402 VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402 SALEMPUR, DEORIA, UTTAR PRADESH, India, 274402.	Policy Issuing Branch : C-1, 3rd Floor, New Krishna Park, Adjustant to Janakpuri Metro Station West , NEW DELHI, DELHI, 110018.
Mobile No : 9648*****	Tax Invoice No. & Date: R18112446647 & 2024-11-18 13:09:55.0
Email-ID : b*****@gmail.com	GSTIN/UIN & Place of Supply : UTTAR PRADESH
Insured's Blood Group :	

Insured Vehicle Details			
Registration No.	UP57BL9729	Mfg. Month & Year	MAY-2023
Make / Model & Variant	HERO MOTOCORP SPLENDOR + SELF CAST	CC / HP / Watt	97
Engine No. / Chassis No.	HA11E8PHE51568 / MBLHAW232PHE89896	Seating Capacity Including Driver	2
Type of Body	NA	Total Premium	548
RTO Location	UTTAR PRADESH - Padrauna	IDV	34,632.00
Hypothecation/Lease	SHRI RAM FINANCE CORPORATION PVT LTD / KUSHINAGAR		

Insured Declared Value (IDV)	
Year	1
Vehicle IDV	34,632.00
Electrical / Electronic Accessories	0.00
Non Electrical Accessories	0.00
Bi Fuel kit	0.00
Total IDV	34,632.00

Premium Summary			
Own Damage - Section I	Amount (`)	Liability - Section II	Amount (`)
Basic OD including Add-on	464.35	PA Benefits - Section III	
Total Basic Own Damage Premium	464.35	TOTAL PREMIUM (Sec I)	464.00
		IGST (18.00%)	83.00
TOTAL OWN DAMAGE PREMIUM	464		
TOTAL PREMIUM PAYABLE (`)			548.00

GSTIN : 07AABCR6747B1ZI HSN : 997134, Subject to I.M.T.Endt.Nos. IMT 22,7
 Description of services : Motor vehicle Insurance Service
 "As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year."

Add-on for Total Cover : Provides cover for registration charges, road tax and insurance premium (Total Cover Sum Insured - ` 0)

Consolidated Stamp duty Paid vide Letter of Authorization "NO LOA/ENF-1/CSD/62/2024-25/(Validity Period Dt. 01/10/2024 to Dt. 01/12/2025)/4634 Date 25-09-2024" at General Stamp Office, Mumbai.** Not Applicable for the State of Jammu & Kashmir

21BRG642 / POLICYBAZAAR INSURANCE BROKERS PVT LTD	1800258597	care@policybazaar.com	
Intermediary Code/Name	Intermediary Contact No.	Intermediary E-mail ID	POS UID Aadhaar No. / PAN No.

Existing TP Policy Details		
Existing TP Policy No	Existing TP Policy Company Name	Existing TP Policy Period
P002420000/4113/595484	Magma HDI General insurance Company Ltd	From : 29/05/2023 To : 28/05/2028

The Customer Information Sheet (CIS) for this product is available on our website

Reliance General Insurance Company Limited. IRDAI Registration No. 103 **An ISO 9001:2015 Certified Company**
Registered & Corporate Office: Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063

Corporate Identification No. U66603MH2000PLC128300 **UIN:** IRDAN103RP0002V01201920 Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under. License RGI/MCOM/CO/MOT-02/PVT-CAR-TWO-WHELLER-PF/Ver.1.3/300117

<https://www.reliancegeneral.co.in/insurance/about-us/downloads.aspx>

- Special Conditions** : Policy has been issued with reference to vehicle inspection report, reference lead no. & special conditions. The inspection report remarks can be viewed on company's website by the lead no.
- Limitations as to use** : The Policy covers use for any purpose other than: (a) Hire or Reward other than for the purpose of driving tuition, (b) Carriage of goods (other than samples or personal luggage), (c) Organized racing, (d) Pace making, (e) Speed testing, (f) Reliability trials, (g) Any Purpose in connection with Motor Trade .
- Persons/Classes of persons entitled to drive:** : Any person including insured:
 Provided that a person driving holds a valid driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided that the person holding a valid learner's license may drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.
- Deductible under Section-I :** : (i) Compulsory deductible 100/- (ii) Additional compulsory deductible 0/- (iii) Voluntary deductible 0/-

Compulsory PA cover for owner driver :

Insured is not eligible for compulsory PA cover for owner driver in the policy as the same has not been opted for the reasons allowed as per motor tariff and/or basis insured's declaration given below:

"I/ we hereby declare that I/ we hold an effective personal accident insurance policy covering death and permanent disability (total & partial) and/ or compulsory personal accident (CPA) for owner driver in other vehicles; whereby the Sum Insured limit is of Rs 1,500,000 or more in all such above mentioned conditions."

In case you have missed it, please opt for the compulsory PA cover by payment of an additional premium as applicable. Liability of insurance company shall commence from the date of issuance of endorsement.

"It is hereby declared and agreed that all pre-existing damages to the vehicle having occurred prior to the commencement of cover are excluded from the scope of the policy"

Except as provided in GR 27 Rule (g) of Erstwhile Indian Motor Tariff (i.e. Sale of Vehicle), No NCB will be allowed when a policy is not renewed within 90 days of its expiry. "It is hereby declared and agreed that any damages pre-existing, any losses occurred & any Liability having been incurred, prior to the commencement of cover under this policy are excluded from the scope of this policy."

Payment of premium under Liability Section (Section II) of bundled policy to other insurer is sole responsibility of policy holder.

Period of Insurance	% of Discount on Own Damage Premium	
	% of NCB on OD Premium	
The Preceding Year	20%	
Preceding Two Consecutive Years	25%	
Preceding Three Consecutive Years	35%	
Preceding Four Consecutive Years	45%	
Preceding Five Consecutive Years	50%	

The policy wording with detailed terms, conditions and exclusions are available on our website www.reliancegeneral.co.in.

Statutory Provisions:

"As per Section 146 of the Motor Vehicle Act, 1988 it is Mandatory to have your vehicle insured against third party risk. As per Section 196 of the Motor Vehicle Act, 1988 driving an uninsured vehicle is punishable with fine or Rs. 2000 and/or imprisonment up to 3 months for the first offence and fine of Rs. 4000 and/or imprisonment up to 3 months for the second offence."
 I/We hereby certify that the Policy to which the certificate relates as well as this certificate of insurance are issued in accordance with the provision of Chapter X and Chapter XI of M.V. Act, 1988.

Note : In the event of dishonor of cheque, this policy document automatically stands cancelled from inception irrespective of whether a separate communication is sent or not.
 The policy has been issued based on the information provided by you and the policy is not valid if any of the information provided is incorrect. Subject otherwise to the terms, conditions and exclusions of the Reliance Miscellaneous and Special Types of Vehicles Package Policy Certificate Cum Policy Schedule. In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Proposal/Covernote No. as mentioned in the policy.

Safeguard your transaction by paying your premium via crossed cheque/DD in favour of Reliance General Insurance Co. Ltd.

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Call centre/Policy issuing Branch (Applicable for policies booked without Registration No of vehicles).

IMPORTANT NOTICE: The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. For legal interpretation, English version will hold good.
 In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change.
 As per National Highways Authority of India, kindly ensure to affixed FASTag on your vehicle.

Grievance Clause : For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 02248903009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located.

Smt. Sandhya Baliga Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 - 23230858 Email: bimalokpal.delhi@cioins.co.in

Note: Kindly acknowledge the receipt of this policy. In case you find any variations against your proposal or any discrepancy in the policy, kindly contact us immediately. This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017.

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under subrule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule

Fast Tag ID -

The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)

In the unfortunate event of a claim, please call quoting your Policy No. 022 48903009(Paid) on and register your claim immediately within 7days from the date of loss.

In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal.

Special Conditions :

Policy has been issued with reference to vehicle inspection report, reference lead no. InspectionID_HIDE & special conditions. The inspection report remarks can be viewed on company's website by the lead no.

For Reliance General Insurance Co. Ltd.



Authorised Signatory

Proposal Form For Reliance Two Wheeler Policy-Stand-alone Own Damage

Is the vehicle made in India? Yes No Type of vehicle: Two Wheeler Three Wheeler Four Wheeler

For Office Use Only

Policy Number 131522423080019229 Date
Savvion Reference No. Inspection Lead No.

Intermediary Details (To be filled in BLOCK LETTERS)

Intermediary Name POLICYBAZAAR INSURANCE BROKERS PVT LTD Code 21BRG642
Branch Name Janakpuri Code 1315
Sales Manager Name Lokesh Kumar Code 71000721

Details (To be filled in BLOCK LETTERS)

- This Proposal is for A new Policy Renewal of Policy Endorsement Others (Please specify)
- Proposer's Full Name Mr. Mrs. Ms. NIRAJ YADAV
- Address

Address for Communication	Address where vehicle is normally kept and Used
VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402	VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402
Flat/Building/Door/Block No. Road /Street/Sector	VILL- MATHAULI PO- KASYA Kushinagar Uttar Pradesh, 274402
Nearest Landmark	
Area	
City	SALEMPUR
Pin Code	274402
State	UTTAR PRADESH
Country	India
Phone	09648399336
Emergency Contact No.	
#Email	b*****@gmail.com
	Mobile 9648*****
	Blood Group
	Fax
- Period of Insurance From 21/11/2024 To: Midnight of 20/11/2025
- Source of Funds Business Profession Salary Agricultural Income Savings Others
- Monthly Income Upto `20,000 `20,001 to `50,000 `50,001 to `1,00,000 `1,00,001 and above
- UID Aadhaar No.
- Fast Tag ID
- Do you have a GST Registration Number Yes No
If Yes, please specify
- Related Party Yes No

#The Policy copy and all related documents shall be sent to the email ID provided above. If you wish to receive Policy copy and related documents in physical form to the aforesaid communication address, please drop us an email at [RGI email address]

Details of the Vehicle

- | | | | |
|--------------------------------------|--------------------------|---------------------------------------|---------------|
| 11. Registration Number | UP57BL9729 | 12. Date of Registration | 01/06/2023 |
| 13. Registering Authority & Location | UTTAR PRADESH - Padrauna | 15. Cubic Capacity | 97 |
| 14. Year & Month of Manufacture | MAY-2023 | 18. Make of Vehicle | HERO MOTOCORP |
| 16. Engine Number | HA11E8PHE51568 | 19. Type of Body/Model | NA/SPLENDOR + |
| 17. Chassis Number | MBLHAW232PHE89896 | 20. Seating Capacity including Driver | 2 |

Details of the Vehicle Type and Use

21. a. Whether the Vehicle is driven by Non-conventional source of power? Yes No If yes Bi Fuel CNG LPG

Insured declared value (IDV) of the Vehicle	Non-electrical Accessories fitted to the Vehicle	Electrical & Electronics accessories fitted to the vehicle	Slide Car(Two wheeler) Trailer(Pvt. Cars)	Value of CNG/ LPG Kit Bi Fuel	Total Value
34632	0	0	0	0	34632

b. Do you have a valid PUC? Yes No

(Note-Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.)

22. Age of Owner Driver _____ 23. D.O.B. _____

24. Add On Covers (Subject to availability and eligibility)

- a. Assistance Covers No
- b. Nil Depreciation Cover No
- c. NCB Retention Cover (Applicable only for Annual Policy) No
- d. Easy Monthly Instalment (EMI) Protection Cover: No
 If Yes, please choose any one option;
 Plan I - 1 EMI, EMI Amount : _____
 Plan II - 2 EMIs, EMI Amount : _____
 Plan III - 3 EMIs, EMI Amount : _____
- e. Total Cover No
- f. Daily allowance benefits No
 Per Day Allowance: _____
 Coverage Days : _____
- g. Helmet cover: Sum Insured No
 Number of Helmet Covered _____
- h. Daily allowance benefits Plus No
 Per Day Allowance: _____
 Coverage Days : _____
- i. Voluntary Deductible No
 Voluntary Deductible amount opted: _____
- j. Hospital Cash Cover (Applicable only for Annual Policy) No
 Sum Insured: _____
 No of Days: _____
 Convalescence Benefit St: _____
- k. Emergency Hotel Accommodation No
 Benefit Amount: _____
- l. Additional limit of TPPD No
 Additional amount opted: _____
- m. Tyre Protector(Applicable only for annual Policy) No
 Specifications of Tyres and Tubes: _____
 For Tyre : Width in mm: _____ Aspect Ratio: _____
 Tyre Serial Number 1 _____ 2 _____
- n. Rim Protector(Applicable only for annual Policy) No
 Specification of Rims: _____
 For Rim : Width in mm: _____ Aspect Ratio: _____

Rim Serial Number 1 _____ 2 _____

- o. Consumable Expenses No
- p. Engine Protector No
- q. Return to Invoice (Applicable only for Annual Policy) No
- r. Loss of Personal belongings (Applicable only for annual Policy) No
- Sum Insured:
- s. Any other Details _____
- t. Battery Protection Cover No
- u. Electric Motor Protection Cover No
- v. EV Charger Cover No
- w. Assistance Cover (Two Wheeler Shield) No
- x. Assistance Cover - Two Wheeler Shield No

- 25. Is the vehicle fitted with any Anti-theft device approved by the ARAI ? Yes No
 If Yes, please attach certificate of installation in the vehicle, issued by automobile Association of India.
- 26. Are you a member of Automobile Association of India ? If Yes, please submit membership copy. Yes No
- 27. Will the Vehicle be used exclusively for
 - a. Private, social, domestic, pleasure and professional purposed ? Yes No
 - b. Carriage of goods other than samples or personal luggage? Yes No
- 28. Whether the Vehicle is used for Driving Tuitions? Yes No
- 29. Whether use of Vehicle is limited to Own Premises? Yes No
- 30. Whether the Vehicle is fitted with Fibre Glass Tank? Yes No
- 31. Whether the Vehicle belongs to the Embassy/Consulate of a Foreign Country? Yes No
 If so, is the duty element included in the IDV?
- 32. Whether the Vehicle is design for use of Blind/Handicapped/Mentally Challenged Person? Yes No
- 33. Date of purchase of the Vehicle by the Proposer 01/06/2023
- 34. Whether the Vehicle at the time of purchase was New Second Hand

Risk Inclusions

- 35. Please select the higher deductible if you wish to opt for over and above the compulsory deductible
 Two wheeler
- 36. Liability to third parties : The policy provides Third Party Property Damage(TPPD) of ` 1 lakh (Two wheelers) and ` 7.5 lakhs (Private car)
 Do you wish to restrict the above limits to the statutory TPPD Liability limit of 6000/- only? Yes No
 Legal Liability No of Person
 Driver:
- 37. Personal Accident Cover for Owner Driver. Please give details of nomination

Name	Name of the Nominee	Age of Nominee	Name of the Appointee (if Nominee is Minor)	Relationship	Address
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(Note: 1. Personal Accident cover for owner driver is compulsory for Sum Insured of 15,00,000/- for Two Wheeler, Private Car, GCV, PCV and Misc-D
 2. Compulsory PA cover for owner driver cannot be granted where a vehicle is owned by a company, a partnership firm or a similar body corporate or where the owner-driver does not hold an effective driving license)

- 38. Extension of Geographical Area
 Whether extension of Geographical Area to the following Countries required ?
- 1. Bangladesh
- 2. Bhutan
- 3. Maldives
- 4. Nepal

- 5. Pakistan
- 6. Sri Lanka

Details of Hire Purchase / Hypothecation / Lease

39. Please state if the vehicle is under Hire Purchase Lease Agreement Hypothecation Agreement
If so, give name and address of concerned parties.
40. Full Name M/s SHRI RAM FINANCE CORPORATION PVT LTD
41. Address KUSHINAGAR

Details of Previous Insurance

42. Full Name of previous insurer
43. Address -
44. Policy Number
45. Type of Cover Package Policy Liability only others (to be describe) Previous Policy Expiry
46. Claims taken in previous policy Yes No
If yes, No. of Claims Claims Amount
47. Are you entitled to No Claim Bonus Yes No
If yes, please submit/attached proof thereof
48. No Claim Bonus allowed under previous policy (%) 0
- 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 undertake that if this declaration is found incorrect, all benefits under this policy in respect of Section 1 of the policy will stand forfeited.

Signature of the Proposer _____

Existing TP Policy Details

Existing TP Policy Details : P002420000/4113/595484
Existing TP Policy Company Name : Magma HDI General insurance Company Ltd
Existing TP Policy Period From : 29/05/2023 To : 28/05/2028

Payment Details

- Cheque/ DD Cheque/ DD No. Cash Credit Card Others
Cheque/ DD Date

Proposer's Bank Details

49. Name of the Bank Account Holder
50. Bank Account No.: 51. Account: Saving Current
52. Name of the Bank
53. Branch
54. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)
55. IFSC Code (11 character code appearing on your cheque leaf)
- I understand that any refund due on the premium payment / any payment / claims to be directly credited to my aforesaid Bank Account.*

* As per IRDAI, its mandatory that all payments made to the insured are only through electronic mode.

GENERAL DECLARATION:

I understand that as per the new AML/CFT Guidelines issued Reliance General Insurance Co. Ltd will be verifying my details pertaining to KYC and PAN provided at the time of proposal.

I further, do hereby agree and consent that in the case of the event of a mismatch of information provided by me in the proposal form, identification proof, and address proof at the time of issuance of the policy. I request Reliance General Insurance Company Limited to issue the policy with the details appearing as per my proposal form. I will be solely responsible for any consequences arising out of the difference in detail given by me during the verification of supporting documents provided by me at the time of issuance of the policy or otherwise.

AML Guidelines

"I/ We hereby confirm that all premiums have been/ will be paid from bonafide sources and no premium have been/ will be paid out of the proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act 2002. I understand that the company has the right to call for the documents to establish source of funds. The insurance company has the right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly/ indirectly governing the prevention of Money Laundering in India.

- Nationality Indian Non-Indian, If Non Indian Please specify the country

Type of organization Corporation Government Non Government Organization Society Trust
 Partnership International Organization Corporatives Section 25 Companies

PEP Declaration:

Are you a Politically Exposed Person (PEP)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please mention the position held	
Is any of your close relation or family member a PEP?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please mention the name and relation and the position held by such close relative/family member.	
I hereby declare that in future if me, any of my close relatives or any of my family member attains a position of PEP then I shall confirm the same to Reliance General Insurance Co. Ltd as a mandate. I understand that this is a crucial information under the PMLA Rules and AML/ CFT Guidelines and shall confirm that the answers given by me is true. In case the company comes to know that this is a misrepresentation and concealment of information then the policy shall be put on hold for scrutiny by the company and I shall be solely responsible for the same.	
Note : "Politically Exposed Persons" (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States/Governments, senior politicians, senior government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc (As per sub clause (xii) of 3(b) of Chapter I of Master Direction – Know Your Customer (KYC) Direction, 2016 issued by Reserve Bank of India (RBI).	

Declaration by Proposer

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 RELIANCE General Insurance Company Limited. I/We also declare that, if any additions or alterations are carried out after the submission of this proposal form, then the same would be conveyed to the insurers immediately. I/We hereby declare that the contents of the form and documents have been fully explained to me/us and that I/We have fully understood the significance of the proposed contract. I/We agree to accept a policy subject to the condition prescribed by the company. • I have read and understood the brochure, prospectus, sales literature & Policy wordings and confirm to abide by the same. • I/We declare that the rate of NCB stated above by me/us is correct and that no claim has arisen in the expiring policy (copy of the policy enclosed). • I/We further undertake that, if this declaration is found to be incorrect, all benefits under the policy in respect of section I of the policy will stand forfeited. • I/We further understand and agree that RELIANCE General Insurance will seek confirmation of above stated details from my/our previous insurers. Pending receipt of necessary confirmation, I/We agree that, though coverage under the policy will be available to me/us, RELIANCE General Insurance will be liable to release the payment towards any claims under section I of the policy only after a confirmation in this regard is received. In the event this declaration is found to be incorrect, any and all coverage available under section I of the policy from the date of commencement of the policy shall stand automatically forfeited. Further, any survey arranged/allowed by RELIANCE General Insurance of the motor vehicle, pending confirmation of the declaration from my/our previous insurers, shall be without prejudice to any of the rights and remedies available to RELIANCE General Insurance as contained herein and under the relevant laws and regulations. • I/We acknowledge and agree that, Pending receipt of confirmation of the declaration from my/our previous insurers, the "cash-less repair facility" provided by RELIANCE General Insurance shall stand suspended. • I/We also shall endeavour to procure the renewal notice and pass on the same to RELIANCE General Insurance immediately upon the receipt of such renewal notice. Mode of Payment: Secure your payment by cheque/DD favouring Reliance General Insurance CO.Ltd. This policy shall be voidable at the option of the Company in the event of mis-representation, mis-description of nondisclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other persons, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information, information concerning any fact material thereto, commits a fraudulent act which will render the policy voidable at the company's sole discretion and result in a denial of insurance benefits. • I/We here by state that the above mentioned address shall be taken as address on record for the purpose of GST. • I/We hereby confirm that the contents of the proposal form and connected documents have been fully explained to me/us and I/We have fully understood the significance of the proposed contract.

This proposal form was completed by

Name _____

Date : 18 Nov 2024 01:09

Place : _____

Date : 18 Nov 2024 01:09

Signature

Signature of Proposer & Company Seal

Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015

- 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 prospectuses or tables of the insurer.
- 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.

Supporting Confirmation of Agent/Broker/SM/CSO

I confirm the above signature to be of the registered owner of the vehicle proposed for insurance

Place

Date
(In case of Direct Business, Name & Signature of CSO /SM to be taken)

Signature of IRDAI Agent/ Broker

The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)