



# THE ORIENTAL INSURANCE CO. LTD.

## PROPOSAL FORM FOR PRIVATE CARS AND MOTORISED TWO WHEELERS

Name of Proposer(Owner)	:	NISHA PARAVIN	
Address(Owner)	:	MUKHRA	
	:		
	:	PIN: 209728	Phone: 9559919570
Occupation	:		
Name & address of Hirer/Hyp/Lease	:	Self Finance	
Type of Cover required	:	Liability Policy/Package Policy/Liability & Theft/ Liability & Fire/Liability, Fire & Thief Policy	
Period of Insurance:Time:	:	From	To
Registration No. of Vehicle	:	NEW	
Registration Authority Address	:	KANNAUJ	
Make of Vehicle: HF DELUXE	:	Colour of Vehicle: SIL BLK	
Year of Manufacture: 2025	:	Date of Registration:	
Engine No. : HA11F4S9F16251	:	Chassis No. : MBLHAW432S9F70588	
Type of Body	:	SOLO	
Cubic Capacity/GVW: 100	:	Registered Seating Capacity: 1+1	
Previous Policy Details	:		
Policy Year & No.	:		
Name of Insurance Company	:		
Expiry of previous Insurance	:		
Previous years NCB% enjoyed	:		
Any claim on previous policy	:		
Insured's Declared Value(IDV):Rs.59209.7	:	New Invoice Value:Rs.62326	
Excess Clause Vol/Compulsory Accepted Amount:Rs.	:		
Excess Clause Vol/Compulsory Accepted Amount:Rs.	:		
Value for electrical/electronic items(inbuilt Items):	:		
CNG/LPG fuel used(Y/N):	:	Any Geographical Ext., if yes, state Country:	
Usage of Vehicle:Hire or Reward/Driving Tuition/Limited to own premises:	:		
Optional PA cover, state No.& sum Insured:Rs	:		
No.of Employees for Legal Liability:	:	No of Driver/Cleaner for WLL:	
Any,anti theft device used(Y/N):	:		

### Declaration

(1) "I explicitly agree to receive one page Motor Policy & give my consent hereby."

(2) "I/we declare that the rate or NCB claimed by me / us is correct and that no claim has arisen in the expiring policy period(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".

(3) **(UNDERTAKING(in case of Break-in-insurance or Coverage from Act to Package))**

"The Vehicle is neither damaged nor any third party injury to person or property is there and in case it is found that statement is false the proposer shall be liable to all liability arising out of such damages/injuries and the company may also forfeit all my / our claims under this policy."

(4) I/We hereby declare that the statements made by me/us in this proposal from are true to the best of my / our knowledge and belief and I/We hereby agree that this declaration shall from the basis of the contract between me / us and "The Oriental Insurance Co.Ltd."

I/We also declare that any additions or alternations are carried out after the submission of this proposal form then the same would be conveyed to the insurers immediately.

**\*Customer is covered under PA Policy No-OG-23-9999-9960-00000030 of 15 lakhs.**

**\*TPPD is restricted in this policy on customer request.**

**Place:**

**Date:**

**Signature of Proposer/Insured**