



THE ORIENTAL INSURANCE CO. LTD.

PROPOSAL FORM FOR PRIVATE CARS AND MOTORISED TWO WHEELERS

Name of Proposer(Owner)	: MOHAMMAD. SAQUIB
Address(Owner)	: R/O 400/103 WAKEEL UNANI ABDUL AZIZ ROAD, JHAWAI TOLA, AKBARI GATE
	: PIN: 226003 Phone: 8299119310
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	: LUCKNOW
Make of Vehicle: VIDA	Colour of Vehicle: BLACK
Year of Manufacture: 2025	Date of Registration:
Engine No. : ECD001S6J08027	Chassis No. : MBLCEW076S6J00800
Type of Body	: SOLO
Cubic Capacity/GVW: 6.0kWh	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.90003	New Invoice Value:Rs.94740
Excess Clause Vol/Compulsory Accepted Amount:Rs.	
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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