THE ORIENTAL INSURANCE CO. LTD.

PROPOSAL FORM FOR PRIVATE CARS AND MOTORISED TWO WHEELERS

Name of Proposer(Owner) : NISHA KUSHWAHA

Address(Owner) : VILL-BHATHAHI KHURD, POST & THANA - RAMKOLA KUSHINAGAR, KUSHINAGAR

:

PIN: 274305 Phone: 8542076838

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 : PADRAUNA (KUSHINAGAR)

Make of Vehicle: HF DELUXE Colour of Vehicle: SBK

Year of Manufacture: 2025 Date of Registration:

Engine No. : HA11F4SHL11449 Chassis No. : MBLHAW430SHL14646

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.58142.85 New Invoice Value:Rs.61203

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 Georgraphical 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 explicity agree to receive one page Motor Policy & give my consent hereby."

P.T.O

(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 forefeit 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