



Universal Sampo General Insurance Co. Ltd.

(A joint venture of Allahabad Bank, Indian Overseas Bank, Karnataka Bank Ltd; Dabur Investment Corp. Sampo Japan Nipponkoa Insurance Inc.)

Regd. Office : Unit No 401, 4th Floor, Sangam Complex, 127, Andheri Kurla Road, Andheri (E),
Mumbai - 400059, Maharashtra. Fax# 022-29211844. Email: contactus@universalsampo.com

IMD Name	IMD Code
Sub IMD name	Sub IMD Code
USGI Branch	Marketing Official Name
Location	

STANDARD PROPOSAL FORM FOR "LIABILITY ONLY" POLICY

(Commercial Vehicles other than Motor Trade Internal Risk Policies)

A. Questions that are necessarily to be listed for granting the cover as per the Motor Vehicle Act – 1988

A(i). Personal Details of the Proposer/Owner

1	Proposer's (Owner's) Full Name (IN CAPITAL LETTERS)	
2	Address (where the vehicle is normally kept) (IN CAPITAL LETTERS, WITH PIN CODE)	Telephone PIN Mobile FAX Email Id: _____
3	Occupation/Business	PAN Card Number: _____
4	Aadhaar Card Number: _____	Liability Only Policy From: _____ His on _____ To: _____ His on _____
5	Period Of Insurance	

A(ii). Vehicle Details

6	Registration Number of the Vehicle	
7	Date of registration of the Vehicle	
8	Registering Authority & Location	
9	Year of Manufacture	
10	Engine Number	
11	Chassis Number	
12	Make of the vehicle	
13	Model	
14	Type of Body	
15	Gross Vehicle Weight (GVW) & Cubic Capacity of the Vehicle	
16	Max. licensed carrying capacity (No. of Passengers) in case of Passenger Carrying Vehicles?	
17	Whether the vehicle is driven by non conventional source of power /CNG/LPG/BI-Fuel? If "YES" please give details	
18	Whether the use of the vehicle is limited to own premises?	YES NO
19	Whether the vehicle is used for commercial purpose?	YES NO
20	Whether the vehicle is used for driving tuitions? (GR-44)	YES NO
	Details of Hire Purchase / Hypothecation / Lease	(IMT-5)/(IMT-7)/(IMT-6)
	a) Is the vehicle proposed for insurance is	Under Hire Purchase? YES NO Under Lease Agreement? YES NO Under Hypothecation? YES NO
	b) If "YES" give name and address of the concerned party/parties	YES NO

A (iii). LIABILITY SECTION- COVERAGE

22	Coverage of liability against Third Party Risks (Death or Bodily Injury) required in respect of:	
	i. Owner Driver only	YES NO
	ii. Any other person other than paid driver	YES NO
	If "YES" give details of such other person	
	1. _____	
	2. _____	
	3. _____	
	NOTE) Section 146 of Motor Vehicle Act-1988 makes it mandatory for the owner of the vehicle to ensure that he or any other person authorized by him to drive the vehicle in public place has insurance against third party risk. The explanation to Section 146 exempts the paid driver. 2. As per Section 147 (2) (a) the liability is "as incurred" in the case of death/bodily injury of the third party.	
23	Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6000/- only? <input type="checkbox"/>	YES NO
24	For Additional TPPD limits please see Q.No. 25 Legal liability to persons employed in connection with operation of the vehicle who are "workmen". The liability of the employer under the Employees Compensation Act-1923 is covered under the Motor Vehicle Act – 1988 Drivers Employees (Workmen) (No. of persons: _____) (No. of persons: _____) (Note: The Motor Vehicle Act 1988 under Section 147(1)(ii)(i) covers liability to the employees who are Employees within the meaning of the Employees' Compensation Act 1923.) For additional coverage, please refer to Q. No. 26	(No. of persons: _____) (No. of persons: _____) YES NO

B. Questions that provide additional covers as per IMT Endorsements

25	The policy provides additional Third Party Property Damage liability limits of Rs. 750,000 for Commercial vehicles. Do you wish to cover additional limit? <input type="checkbox"/>	YES NO
26	Ref to Q. No. 23 Do you wish to cover wider legal liability to employees who are "workmen". [This information is sought to cover in addition to liability under the Employee Compensation Act 1923, also liability under the Fatal Accidents Act – 1855 and the Common Law] <input type="checkbox"/>	YES NO
	Additional Liability to Workmen IMT-28 (Note: The additional Liability under Common Law and Fatal Accidents Act in respect of employees who are workmen is covered under this endorsement). Refer to Q. No. 24 <input type="checkbox"/>	YES NO

Liability to Employees who are NOT Employee	27	Do you wish to cover wider legal liability to employees who are NOT "workmen"?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	IMT-29	(Note 1: The liability under Common Law and Fatal Accident Act 1855 in respect of employees who are not "Employees" can be covered under this endorsement.)		

Personal Accident Cover For Owner Driver	28	Personal Accident Cover for Owner Driver is compulsory in the Liability Only Cover. Please give details of the nomination: a) Name of the Nominee and Age b) Relationship c) Name of the Appointee (if Nominee is a Minor) d) Relationship to the Nominee	:	:	:
	29	Do you wish to include Personal Accident cover for named persons? <input type="checkbox"/> YES <input type="checkbox"/> NO	YES	NO	

PA Cover for Named Occupants	30	Do you wish to include Personal Accident cover for Un-named Passengers / Hirer / Pillion passengers (Two wheelers)? <input type="checkbox"/> YES <input type="checkbox"/> NO	YES	NO															
	IMT-15	If YES, give names and CAPITAL SUM INSURED (CSI) opted for <table border="1"> <tr> <th>Name</th> <th>CSI Opted (Rs.)</th> <th>Nominee</th> <th>Relationship</th> </tr> <tr> <td>1)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3)</td> <td></td> <td></td> <td></td> </tr> </table> Note: (The maximum CSI available per person is Rs. 2 Lacs in case of Commercial Vehicles)	Name	CSI Opted (Rs.)	Nominee	Relationship	1)				2)				3)				
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3)																			

PA Cover For Un-Named Occupants	31	Whether extension of geographical area to the following countries required. <table border="1"> <tr> <td>1</td> <td>Bangladesh</td> <td>YES</td> <td>NO</td> <td>2</td> <td>Bhutan</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>3</td> <td>Maldives</td> <td>YES</td> <td>NO</td> <td>4</td> <td>Nepal</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>5</td> <td>Pakistan</td> <td>YES</td> <td>NO</td> <td>6</td> <td>Sri Lanka</td> <td>YES</td> <td>NO</td> </tr> </table> (Note: Presently the territory covered is geographical area of India. Extension of geographical area COVER can be availed by use of this endorsement.)	1	Bangladesh	YES	NO	2	Bhutan	YES	NO	3	Maldives	YES	NO	4	Nepal	YES	NO	5	Pakistan	YES	NO	6	Sri Lanka	YES	NO		
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IMT-16	No. of persons _____ If YES, give no of persons and Capital Sum Insured (CSI) opted (Note: The maximum CSI available per person is Rs. 2lacs in the case of Commercial Vehicles)			YES	NO																							

Geographical Extensions	32	Do you wish to include Personal Accident cover for Un-named Passengers / Hirer / Pillion passengers (Two wheelers)? <input type="checkbox"/> YES <input type="checkbox"/> NO	YES	NO
C. Questions that are elicited from information and data collection purposes	32	Previous History a Date of purchase of the vehicle by the Proposer b Whether the vehicle was New or Second hand at the time of purchase c Will the vehicle be used exclusively for • Private, Social, Domestic Pleasure & Professional Purpose? • Carriage of goods other than samples or Personal luggage?	<input type="checkbox"/> NEW <input type="checkbox"/> SECOND HAND	<input type="checkbox"/> YES <input type="checkbox"/> NO

Previous History	33	Is the vehicle in good condition? If NO please give details	YES	NO							
	33	Details of the driver a. Age and Date of Birth of the Owner b. Age and Date of Birth of the Driver c. Does the driver suffer from defective vision or hearing or physical infirmity If YES, please give details of such infirmity d. Has the driver ever been involved / convicted for causing any accident or loss If YES, give details as under including the pending prosecutions <table border="1"> <tr> <td>Age:</td> <td>Yrs</td> <td>DOB:</td> <td>DOB:</td> </tr> <tr> <td>Age:</td> <td>Yrs</td> <td>DOB:</td> <td>DOB:</td> </tr> </table> 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 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 provided in the policy, nor shall any person taking out the renewing or continuing a policy accept any rebate except such rebate as may be allowed in favour of the insured or his/her family. 2. Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lakhs rupees.	Age:	Yrs	DOB:	DOB:	Age:	Yrs	DOB:	DOB:	YES
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	Age:	Yrs	DOB:	DOB:								
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Driver Details	33	Name and Address of the previous insurance company f Previous policy number g Period of Insurance : From _____ to _____ h Claims lodged during the preceding 3 years YEAR _____ NO OF CLAIMS _____ CLAIM AMOUNT (RS) _____										

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 the Universal Sompo General Insurance Company Limited.
I/We also declare that any addition or alterations are carried out after the submission of this proposal form then the same would be conveyed to the Insurance Company immediately.
Place: _____ Signature of the Proposer/s
Date: _____
GST Number _____

PROHIBITION OF REBATES (Insurance Act – 1938, Section 41)
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2. Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lakhs rupees.
Note: Denial of "Third Party Liability Only Cover: by the Insurer, for any reason other than fraud / misrepresentation by proposer, will entail Regulatory action.