



Universal Sampo General Insurance Co. Ltd.

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

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

STANDARD PROPOSAL FORM FOR "LIABILITY ONLY" POLICY (For Private Cars / Two Wheelers)

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)																																
		Telephone	PIN																														
2	Address (where the vehicle is normally kept) (IN CAPITAL LETTERS, WITH PIN CODE)	Mobile	FAX																														
		Email Id:																															
3	Occupation/Business																																
4	Identification Proof/Number PAN Card Number/Form 60 Aadhar Card Number	<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>																															
5	Type of Cover	Liability Only Policy																															
6	Period Of Insurance	From: _____ Hrs on _____ To : _____ Hrs on _____																															
7	Period of Insurance for Third Party Long Term Two Wheeler	2 years _____ 3 years _____																															

A(II). Vehicle Details

8	Registration Number of the Vehicle	
9	Date of registration of the Vehicle	
10	Registration Authority & Location	
11	Year of Manufacture	
12	Engine Number	
13	Chassis Number	
14	Make of the vehicle	
15	Model	
16	Type of Body	
17	Cubic Capacity of the vehicle	
18	Seating capacity including driver	
19	Whether the vehicle is driven by non conventional source of power /CNG/LPG/Bi-Fuel?, If "YES" please give details	

Vehicle Specifications

20	Whether the use of the vehicle is limited to own premises?	YES	NO
21	Whether the vehicle is used for commercial purpose?	YES	NO
22	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
23	Under Hypothecation?	YES	NO
	b) If "YES" give name and address of the concerned party/parties		
	(Note: Copies of R.C. & Fitness Certificate should be submitted along with the proposal form)		

A (III). LIABILITY SECTION: COVERAGE

24	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)		
	1. 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.		
25	Do you wish to have the statutory Third Party Property Damage (TPPD) liability of Rs. 6000/- <u>only</u> ?	YES	NO
	For Additional TPPD limits please see Q.No. 25		
26	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	(No. of persons: _____)	
	Drivers	(No. of persons: _____)	
	Employees (Workmen)	(No. of persons: _____)	
	(Note: The Motor Vehicle Act 1988 under Section 147(1)(ii)(f) covers liability to the employees who are workmen within the meaning of the Employees Compensation Act 1923.)		
	For additional coverage, please refer to Q. No. 26		
	Third Party Risks: Liability to "Employees" under E.C. Act 1923 (Compulsorily to be covered by M.V. Act – 1988)		
	Third Party Risks: TPPD (IMT-20)		

B. Questions that provide additional covers as per IMT Endorsements

27	The policy provides additional Third Party Property Damage liability limits of Rs. 750,000 for Private cars & Rs. 1,00,000 for motorized Two- wheelers (private & commercial) Do you wish to cover additional limit?	YES	NO
	Ref to Q. No. 23		
28	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]	YES	NO
	(Note: The additional Liability under Common Law and Fatal Accidents Act in respect of employees who are Employees is covered under this endorsement). Refer to Q. No. 24		
	Additional Liability to Employee		
	IMT-28		

Liability to Employees who are NOT Employees

29 Do you wish to cover legal liability to employees who are **NOT** "Employees"? YES NO

(Note: 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

30 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 : _____

(Note: (1) Personal Accident cover for Owner Driver is compulsory for Sum Insured of Rs. 100,000/- for Wheelers and Rs. 200,000/- for Private Cars.
(2) Compulsory PA cover to 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.

PA Cover for Named Occupants

31 Do you wish to include Personal Accident cover for named persons? YES NO

If YES, give names and CAPITAL SUM INSURED (CSI) opted for

Name	CSI Opted (Rs.)	Nominee	Relationship
1)			
2)			
3)			
4)			
5)			

(Note: The maximum CSI available per person is Rs. 2 Lakhs in the case of Private Cars and Rs. 1 Lakhs in the case of Motorized Two Wheelers.)

PA Cover For Un-Named Occupants

32 Do you wish to include Personal Accident cover for Un-named Passengers / Hirer / Pillion passengers (Two Wheelers)? YES NO

If YES, give no of persons and Capital Sum Insured (CSI) opted

No. of persons _____ C.S.I. (Per Person): _____

(Note: The maximum CSI available per person is Rs. 2,00,000/- in case of Private Cars and Rs. 100,000 in the case of Motorized Two Wheelers.

Geographical Extensions

33 Whether extension of geographical area to the following countries required.

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

(Note: Presently the territory covered is geographical area of India. Extension of geographical area covered can be availed by use of this endorsement.

C. Questions that are elicited for information and data collection purposes

Previous History

34 **Previous History**

	DD	MM	YYYY
a) Date of purchase of the vehicle by the Proposer			
b) Whether the vehicle was New or Second hand at the time of purchase	NEW		SECOND HAND
c) Will the vehicle be used exclusively for			
<ul style="list-style-type: none"> Private, Social, Domestic Pleasures & Professional Purpose? Carriage of goods other than samples or Personal Luggage? 	YES		NO
	YES		NO

d		Is the vehicle in good condition?	YES	NO
If NO please give details				
e 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)		

35

Details of the driver

a. Age and Date of Birth of the Owner	Age: _____ Yrs	DOB: ____/____/____
b. Age and Date of Birth of the Driver	Age: _____ Yrs	DOB: ____/____/____
c. Does the driver suffer from defective vision or hearing or physical infirmity	YES	NO
If YES, please give details of such infirmity		
d. Has the driver ever been involved / convicted for causing any accident of loss	YES	NO
If YES, give details as under including the pending prosecutions		
<ul style="list-style-type: none"> • Driver Name • Date of Accident • Loss / Cost (Rs.) • Circumstances of the Accident 		

Declaration by the Insured

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 Insurance Company.

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: _____

Date: _____

GST Number _____

Do you have e/A account No. Yes No

e/A Account Number: _____

If NO, please fill the form attached with the PF

PROHIBITION OF REBATES (Insurance Act – 1938, Section 41)

- 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 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 accordance with the prospectus or tables of the Insurer.
- 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.