



Universal Sampo General Insurance Co. Ltd.

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

Registered and Corporate Office : Unit No. 401, 4th Floor, Sangam Complex, 127, Andheri Kurla Road, Andheri (East), Mumbai - 400 059, Maharashtra. Fax# 022 - 29211844, Email : contactus@universalsampo.com

MOTOR DEALERS PACKAGE POLICY - PROPOSAL FORM

Important: This proposal for insurance will be the basis of underwriting your proposal and policy issuance. It is mandatory to provide any material information regarding the risks proposed that is known to you/ deemed to be known to you, accurately. All of the questions contained in this proposal must be answered in good faith by the proposer. Any non-disclosure or misdescription can make this policy null and void ab initio. Any doubt should be clarified taking help of company representatives. If there is insufficient space in this proposal for you to provide relevant information, whether as requested or otherwise, please attach a separate sheet to this proposal and return it to us. The property proposed for insurance is not covered until the proposal is accepted and premium paid in full.

1) Agent/Broker Name	
2) Agent/Broker Code	
3) Name of the Dealer	
4) Address of the Dealer:	(Showroom)
	(Workshop)
	(Bodyshop)
5) Phone Number	
6) Email id	
7) Bank Account No.	
8) Occupation/ Business Activity	
9) Do you wish to cover the interest of any financial institution if yes, give the names of all financial institutions?	
10) District in which the risk is located	
11) State in which the risk is located	
12) Pin code of the location of risk	
13) Period of Insurance: Start Date (DD/MM/YYYY)	
14) Period of Insurance: End Date (DD/MM/YYYY)	
Note: Please ensure that the policy date and time is on or after the date of payment of premium to us.	

Coverage Proposed (Please fill the relevant sections required, Minimum covers is 3)

Section 1: Fire and allied Perils (Building and Contents)

1. BUILDING			
1. Nature of construction (Showroom/Workshop/Bodyshop)	Wall	Brick/Concrete/Others (Specify) (_____)	
	Roof	Concrete/AC Sheet/Metallic sheet/Tiles/Others (Specify) (_____)	
2. Occupancy (Showroom, Workshop, Bodyshop)	Occupancy: Is the building solely occupied by You	Showroom	Yes/No
		Workshop	Yes/No
		Bodyshop	Yes/No
	If the answer is 'NO' Please provide complete details of other occupancies.		
	Do you own the building	Yes/No	
	If you own the Building, please provide the details of Sum to be insured (Reinstatement value)	Super Structure	Rs
		Plinth and Foundation	Rs
2. CONTENTS			
1.3 Sum to be insured for contents	Saleable Vehicles/Vehicles in custody (Market Value i.e. Procurement value) (For Vehicles in custody SI according to IDV)	Showroom	Rs
		Workshop	Rs
		Bodyshop	Rs
		Stockyard (open)	Rs
	Furniture, Fixure, Fittings (Reinstatement Value)	Showroom	Rs.
		Workshop	Rs.
		Bodyshop	Rs.
		Stockyard (open)	Rs.
	Business Equipment/ Electronic equipment (Reinstatement Value)	Accessories Showroom	Rs.
		Plant and machinery, tools, special tools, Spares (Workshop)	Rs.
		Plant and machinery, tools, special tools, Spares (Bodyshop)	Rs.
		Lifts and AC at showroom	Rs.

Values given above should include the values of all assets (belonging to you) lying within the premises. This should include such assets as Compound walls/fence/entrance gates etc.

The sum insured of all items above (other than those of stock) can be either "RV (Reinstatement Value)" - that is new replacement value or "MV (market value)" - that is new replacement value less depreciation. For stocks, the sum insured should represent the market value.

Additional Coverage/s/ Clauses/ Optad	Do you wish to opt for these coverage/s	Sum Insured	Remarks
1.4 Earthquake	Yes/No	Rs. _____	The sum insured as already described above will be considered. Separate values need not be given here.
1.5 Terrorism	Yes/No	Rs. _____	
1.6 Architects, Surveyors and Consulting engineer's fees. (in excess of 3 % of claim amount).	Yes/No	Rs. _____	
1.7 Removal of Debris (in excess of 1 % of the claim amount).	Yes/No	Rs. _____	It needs to be ensured that the sum insured selected shall be less than or equal to 7.5 % of the total sum insured under the policy.
1.8 Rent for alternative accommodation	Yes/No	Rs. _____	It needs to be ensured that the sum insured selected shall be less than or equal to 10 % of the total sum insured under the policy.
1.9 Omission to insure additions/alterations	Yes/No	Rs. _____	
1.10 Escalation Clause	Yes/No	Rs. _____	5 % of the sum insured (other than stocks) as already described above will be considered. Separate values need not be given here.
1.11 If yes, please state the percentage of escalation opted for (maximum percentage that can be opted for being 25 %). This clause is not applicable for stocks.	Yes/No	Rs. _____	Percentage Escalation opted for: _____

Section 2: Burglary

2.1 What protection is provided to: Doors, Windows, Skylights, ventilators, exhaust fans, lights, air conditioners, trap doors NB: Mention any specific precautions you have adopted for safeguarding your Property	
2.2 Are the premises guarded by Watchmen? If so by how many and during what Time?	
2.3 Are all valuables secured in a safe(s) outside business hours?	
2.4 How many keys are there to the safe (s) and with whom are they kept?	
2.5 Is the insured location protected by a Burglar alarm system? If yes, please specify.	
2.6 Sum Insured for contents: Salable Items (Market Value) (First loss basis of 25%)	
2.7 Furniture, Fixture, Fitting (Reinstatement Value) (First loss basis of 25%)	
2.8 Business Equipment/Electronic Equipment (Reinstatement Value) (First loss basis of 25%)	
2.9 Business equipment/Electronic equipment (Reinstatement Value) (First loss basis of 25%)	
2.10 Cash in safe Showroom and workshop (Restricted to one day's collection) (First loss basis of 25%)	
2.11 Other Valuables (please specify) (First loss basis of 25%)	

Section 3: Neon Sign/Glow Sign

3.1 Neon Sign/Glow Sign (Fixed at premises only)	Description/location/Make	
	Dimensions	
	Year of installation	
	Insured Value (Reinstatement value)	

Section 4: Business Interruption

4.1 What was your turnover for last 12 months?	Rs. _____
4.2 What is the estimated turnover for next 12 months?	Rs. _____
4.3 What is the estimated net profit for next 12 months?	Rs. _____
4.4 What is the Sum Insured? (The sum to be insured is estimated Gross Profit for next 12 months which is Turnover less purchases and other variable business expenses)	Rs. _____
4.5 Do you keep proper books of accounts? Are the books of accounts audited by a Chartered Accountant?	Yes for both/Yes for first question/No
4.6 If yes, give the name and address of the Chartered Accountant.	
4.7 What is the indemnity period opted?	
4.8 Gross Profit To be Covered	Rs. _____

NOTE: Gross Profit is the sum of Net Profit and Standing Charges. All the fixed expenses are to be considered as standing charges.

Additional Perils to be covered/Extensions to policy	Do you wish to cover the same by payment of additional Premium	Sum Insured	Remarks
4.9 Losses due to accidental failure of Public electricity/gas/water supply (Please clearly understand the coverage, limitations and price before opting for this extension).	YES/NO		If your answer is yes, further questions will be put forth by us to enable us understand your requirements and appropriately price this extension.
4.10 Do you wish to cover Wages under "Dual Wages Basis". Dual Wages basis means that you don't cover 100 % of your wages for the entire indemnity period. Instead, you cover 100 % of the wages for the initial part of the indemnity period and another selected percentage (say 10%) of the wages for the remaining part of the indemnity period.	YES/NO		If your answer is yes, further questions will be put forth by us to enable us understand your requirements and appropriately price this extension.

4.11 Do you wish to cover the auditor's fees?	YES/NO		
4.12 Do you wish to opt for terrorism cover extension (You can opt for terrorism extension for this section, only if	YES/NO		
4.13 Do you wish to cover your property located at other situations	YES/NO		If your answer is yes, further questions will be put forth by us to enable us understand your requirements and appropriately price this extension.
4.14 Customers Extension	YES/NO		If your answer is yes, further questions will be put forth by us to enable us understand your requirements and appropriately price this extension.
4.15 Suppliers Extension	YES/NO		If your answer is yes, further questions will be put forth by us to enable us understand your requirements and appropriately price this extension.

Section 5: Money Insurance

5.1 Limit Per Transit (Please Indicate the limit required per transit)	Rs. _____
5.2 Estimated Annual Turnover	Rs. _____
5.3 Is there a daily written record of Money in transit and is it updated everyday	YES/NO

Section 6: Plate Glass

6.1 Plate Glass (Fixed at premises only)	Description and Location	
	Insured value of plain glass (Provided replacement value)	
	The cost of tinting, lettering, Painting, embossing, silvering or any other ornamental work, if proposed to be insured.	

Section 7: Fidelity Guarantee

7.1	Name of the Person	Designation	Nature of Work/activity	Monthly Salary	Amount of cash/stock held by the employee
7.2 Has there been any occasion to question the honesty or conduct of any person proposed for coverage? If yes, please provide details					
7.3 How often are the employees required to account for the money?					
7.4 Are books of accounts balanced every day?					
7.5 Detail the system in place to check that all sums received by employees are accounted for.					
7.6 Have there been any reported losses (whether insured or not) due to fraud or dishonesty of employees, partners during the last 5 years.					

Section 8: Public Liability

8.1 Limit of Liability (Any one Accident and Any one Year) (Maximum amount of Liability is 10 Lakhs)	Rs. _____
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Section 9: Workmen Compensation

9.1 Category of Workers/Nature of Work	Number of workers	Annual Wage for all workers in this Category	Security measures to prevent accident Details
9.2 Do you want to include legal liability for contract workman for additional premium?	Number of such workers _____	Nature of work of such workers _____	Provide the Sum Insured Rs. _____
9.3 Do you want to cover medical expense (subject to limit 50000 for each workman)	Number of such workers _____	Nature of work of such workers _____	Provide the Sum Insured Rs. _____

