

PROPOSAL FORM

Proposer Details

1. Name of proposer _____
Principal address _____

2. Please indicate your predominant business activity
Manufacturing Retail Wholesale Other

3. Please provide an outline of the activities under taken by the business

4. Annual gross turnover / sales Rs. _____

5. Total number of employees _____

6. Total number of locations _____

Cover Requested

7. Please indicate a combined limits for employee dishonesty, third party computer and funds transfer fraud and also separately for each of the above sections.

8. Have you been in business continuously for at least 3 years? Yes No
If no, please attach details to this form

9. Are your accounts independently audited? Yes No

10. Are your latest Statutory Accounts clear from audit Qualification(s)? Yes No

11. Did you make a net profit before tax at your last audit? Yes No

12. Did current assets exceed current liabilities at your last audit? Yes No
If no, please attach details to this form

13. Is your stock independently checked, (at least annually) by an employee not responsible for daily stock handling or ordering? Yes No
If no, please attach details to this form

14. Can you confirm there is no precious metal stock (platinum, Silver or gold) at any one location exceeding Rs.10,000 Yes No

15. Please confirm that cheque requisition/payment instructions and payment authorisation are segregated functions undertaken by separate people? Yes No
If no, please attach details to this form

17. Do you require two signatures on all cheque and payment Instructions over Rs.10,000 in value? Yes No
If no, please attach details to this form

18. Do you perform monthly reconciliations on
a) all bank account(s) Yes No
b) debtors accounts Yes No
If no to either (a) or (b) please attach details to this form

19. Is access to your computer system controlled by passwords and does the system regularly enforce password changes? Yes No

Fidelity Guard Policy UIN: IRDAN108CP0033V01201819

20. Do you obtain and check written references for all new employees covering at least the last 2 years of continuous employment? Yes No
If no, please attach details to this form

21. Has your business been free of losses as a result of Theft or fraud over Rs.5,000 over the last 3 years? Yes No
If no, please attach details to this form

Additional Information

Nationality: Indian Non-Indian If Non-Indian, please specify Country: _____

Type of Organization

Corporations Governments Non Governmental Organizations Society International Organization
 Trust Partnership Cooperatives Section 25 Company

PAN card number (10 character number): _____

Sources of funds: Please tick appropriate box Salary Business Others (please specify) _____

Section 41 of Insurance Act 1938 (Prohibition of rebates)

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 premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer."

2. Any person making default in complying with the provisions of this section shall be liable for penalty which may extend to ten lakh rupees.

Section 64 VB of the Insurance Act 1938

Commencement of risk cover under the policy is subject to receipt of premium by Tata AIG General Insurance Company Limited.

AML declaration

1. I/we hereby confirm that all premiums paid / payable in future will be from bonafide sources and not paid out of proceeds of crime and that such premiums are not disproportionate to my/our income. I / we understand that the Company has the right to call for documents to establish sources of funds and to cancel the insurance policy in case I / we are found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering law in India.

2. I/we are not Politically Exposed Persons * nor are their close relatives. I / we shall keep the company informed if we subsequently become a Politically Exposed Person.

"Politically Exposed Persons" shall have the meaning assigned to it under sub clause (xii) of 3(b) of Chapter I of Master Direction - Know Your Customer (KYC) Direction, 2016 issued by Reserve Bank of India (RBI), as amended from time to time

Contact details of TAGIC and TAGIC CIN

Tata AIG General Insurance Company Limited

Registered Office: Peninsula Business Park, Tower A, 15th Floor, G.K. Marg, Lower Parel, Mumbai - 400 013, Maharashtra, India.
24x7 Toll Free No: 1800 266 7780 | Visit us at www.tataaig.com | IRDA of India Registration No: 108 | CIN:U85110MH2000PLC128425

IRDA Approved Product Name & Product UIN no. IRDAN108P0003V01200102

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Declaration

I declare that the statements and particulars in this proposal are true and that no material facts have been mis-stated or suppressed after enquiry. I agree that this proposal, together with any other information supplied shall form the basis of any contract of insurance effected thereon. I undertake to inform the Insurers of any material alteration of those facts occurring before completion of the contract of insurance. A material fact is one which would influence the acceptance or assessment of the risk.

For and on behalf of all Insureds:

Signed: _____ Title: _____
(to be signed by a director of the Company)

Company: _____ Date: _____

Please enclose with this Proposal Form

Your latest audited Annual Report & Accounts or audited Financial Statement

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