TRADE CONTRACT REPUDIATION INSURANCE UIN: IRDAN108P0012V01200102



PROPOSAL FORM

1. PROPOSER				
a. Name of P	roposer			
b. Name and	nationality of Propo	oser's Parent		
c. Business o	f Proposer			
d. Years Prop	ooser has been in bu	isiness		
e. Proposer's	total sales		_ Proposer's net v	worth
2. BUYER				
a. Name of B	uyer			
b. Address				
				nt?
a. Please cor this count	mplete the following	g if Proposer has pr	ior experience w	rith () this Buyer, or in ()
Month/Year	Sale Amount	High Credit	Terms	Days Payment Delay
	Proposer currently f yes, provide expla	•	payments from () this buyer or in () this
4. CONTRACT				
a. Total Contra	ct Value			
	tract: From		To	

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c. Briefly describe the nature of the contract						
d. Currency of the Contract						
e. Is contract a sales contract or a service contract?						
If it is a sales contract, please answer the following:						
 i) Is the subject of the contract standard or custom made?						
f. Does the Contract contain the following clauses?						
i) Termination Clause						
ii) Arbitration Clause if yes, where is the arbitration to take place?						
iii) Force Majeure Clause						
g. The Contract shall be governed by the laws of which country?						
h. Have all required export/import licenses and permits been obtained?						
i) Briefly describe the Contract's impact on the Host Country (Provide employment, help generate foreign exchange, provide high priority goods, etc.)						
5. PAYMENT						
a. Identify form and term of payment (i.e. sight letter of credit, 180 day letter of credit, 60 days open account, 3 years semi-annual promissory notes, etc.						
b. If payment is by letter of credit, identify opening bank						
i) Is this a private or government bank?						
ii) Term of letter of credit: From To						
c. Is there a guarantor of payment? If so, identify						

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d. Please clarify the amount and timing of payments as per below:				
Date	Event (signing, delivery, Acceptance, etc.)	Amount	Percent of Contract Total	
	al funding being obtained for this con World Bank, U.S.A.I.D., Eximbank, etc.)	tract?		
6. INSURAN	CE REQUIREMENTS			
a. Term of co	overage requested: From	To		
b. Limit of L	iability requested			
If available	e, please attach cash flow schedule show contract based on timing c		sure over the life of the	
7. WARRAN	ТҮ			
	Proposer have knowledge of any facts the proposed policy? If yes, attach expla			
_	that if such knowledge or information of the control of the contro			
8. ATTACHM	1ENTS			
Please attac	h copies of the following documents:			
a) Copy of th	ne Contract			
b) Copy of th	ne debt instrument (letter of credit, pror	nissory notes, etc.),	if applicable	
c) Copy of ar	ny guarantee, if applicable			

Tata AIG General Insurance Company Limited

d) Copy of Proposer's latest available audited financial statement

The Company agrees to treat as confidential all matters pertaining to this proposal.

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The Proposer agrees not to disclose the existence of any policy which may be issued to any outside party other than the Insured's professional advisors, without the prior written consent of the Company.

The content of this form along with product benefits, terms/conditions and exclusions have been clearly explained to me. I/we have understood these and confirm to abide by the policy

terms & conditions.
Signature of the Proposer:
Name & Signature of agent/intermediary:
Code:
Vernacular Declaration (Certification in case the proposer has signed in vernacular/thumb print):
The content of this form along with product benefits, terms/conditions and exclusions have been clearly explained by me in vernacular to the proposer who has understood and confirmed the same. Signature/Thumb impression of the
Signature/Thumb impression of the Proposer:
Name & Signature of agent/intermediary:

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 / family members / associates. I / we shall keep the company informed if we subsequently become a Politically Exposed Person / close relative / family member / associate of Politically Exposed Persons.

"Politically Exposed Persons" shall have the meaning assigned to it under Prevention of Money-Laundering (Maintenance of Records) Amendment Rules, 2023 as amended from time to time.

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

Section 41 of Insurance Act 2015 (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

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Agent Declaration:



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.

l,	(Full Name) in my			
capacity as an Insurance Advisor/ Specified Person of the				
Corporate Agent/Authorized employee of the Broker/Relationship Officer, do hereby declare that I have explained all the contents of this Proposal Form, including the nature of the questions contained in this Proposal Form to the Proposer including statement(s), information and response(s) submitted by him/her in this Proposal Form to questions contained herein or any details sought herein will form the basis of the Contract of Insurance between the Company and the Proposer, if this Proposal is accepted by the Company for issuance of the Policy. I have further explained that if any untrue statement(s)/ information/response(s) is/are contained in this Proposal Form/including addendum(s), affidavits, statements, submissions, furnished/to be furnished, the Company shall have the right to vary the benefits which may be payable and further more if there has been a non-disclosure of any material fact, the policy issued to his/her favor pursuant to this Proposal may be treated by the Company as null and void and all premiums paid under the Policy may be forfeited to the company. License No. (Intermediary/ Corporate Agent/Broker/Relationship):				
Broker:	Signed:			
Address:	Title:			
	Corporation:			
	Date:			
The above authorized officer of the Proposer declares that, to the best of his/her knowledge, the statements set forth in this Proposal are true and no material information has been withheld.				
SIGNING OF THIS PROPOSAL DOES NOT BIND THE ABOVE TO COMPLETE THE INSURANCE, BUT IT				

IS AGREED THAT THIS PROPOSAL SHALL BE THE BASIS OF THE INSURANCE SHOULD A POLICY BE

ISSUED AND WILL BE ATTACHED TO AND FORM PART OF THE POLICY.