

- ☐ Vehicle is Specially designed for use of Blind/Handicapped/Mentally Challenged Person and endorsed in Registration Certificate. (Attach RC copy)
- ☐ Vehicle will be used within own premises (Only if not licensed for general road use by RTO)
- ☐ Vehicle is fitted with Anti Theft device approved by ARAI (Attach installation certificate issued by any Automobile Association)
- ☐ Vehicle is fitted with a Fibre Glass Fuel Tank. ☐ Vehicle will be used for Driving Tuitions.

29. Extended Covers:

- ☐ Imported vehicle without payment of customs duty
- ☐ Extension to Countries (Bangladesh/Nepla/Bhutan/Pakistan/Maldives/Sri Lanka)
- ☐ Vehicle driven by non-conventional source of power. Details.

30. Add on Covers (Two wheeler)

- ☐ 1. Depreciation Allowance (IRDAN108RP0007V01201516/A0073V01201819)

☐ Deductible option ☐ No Deductible ☐ Rs. 250 ☐ Rs. 350 ☐ Rs. 450
- ☐ 2. Return to Invoice (IRDAN108RP0007V01201516/A0074V01201819)
- ☐ 3. Road Side Assistance (IRDAN108RP0007V01201516/A0075V01201819)

(Imp: Please Choose an option. If nothing is chosen only Taxi/Hotel arrangement support will be provided without any payment)

Continuation/Return Journey (with Additional Premium): Hotel Accommodation: (with Additional Premium):

1500/- ☐ 2000/- ☐ 2500/- ☐ 2500/- ☐ 3500/- ☐ 5000/- ☐
- ☐ 4. Consumable Expenses IRDAN108RP0007V01201516/A0024V01201920
- ☐ 5. Emergency medical expenses (In multiple of Rs. 5,000/-) Rs. (minimum Rs. 25,000/- & maximum Rs. 1,00,000/-) IRDAN108RP0007V01201516/A0025V01201920
- ☐ 6. Additional Third Party Property Damage Cover (In multiple of INR 50,000/-) Rs. (minimum Rs. 1,00,000/- & maximum Rs. 15,00,000/-) IRDAN108RP0007V01201516/A0026V01201920
- ☐ 7. Additional Personal Accident Cover to Unnamed Persons (In multiple of Rs. 50,000/-) Rs. (Number of persons)

(minimum Rs. 1,00,000/- & maximum Rs. 15,00,000/-) IRDAN108RP0007V01201516/A0027V01201920
- ☐ 8. Engine Secure - IRDAN108RP0007V01201516/A0003V01202324

No. of Claims
- ☐ 9. Electric Surge Secure - IRDAN108RP0007V01201516/A0007V01202223
- ☐ 10.Depreciation Allowance - Battery - IRDAN108RP0007V01201516/A0008V01202223

No. of Claims

a) with deductible

b) without deductible

31. Any other Material Facts relevant for this Insurance

Sources of funds (please 3 where applicable):

Salary ☐ Business ☐ Other (Please specify)

Premium paid by Cash / Cheque No. Amount (Rs.)

Bank Name Branch

AML Guidelines

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.

- Nationality :

Type of Organization

Indian ☐

Corporations ☐

Trust ☐

Non-Indian ☐

Governments ☐

Partnership ☐

If Non-Indian, please specify the Country :

Non Governmental Organizations ☐

International Organization ☐

Society ☐

Cooperatives ☐

Section 25 Company ☐
- Declarations
- "I/We desire to insure with Tata AIG General Insurance Company Limited in respect of the vehicle described in this proposal form and confirm that the statements contained in this application are my/our true and accurate representations. I/We undertake that if any of the statements are found to be false or incorrect, the benefits under this policy would stand forfeited. I/We agree that this application and declaration shall be promissory and shall be the basis of the contract between me/us and Tata AIG General Insurance Company Limited. I/We confirm that I/We have read and understood the coverages, the terms and conditions and agree to accept the company's policy of insurance along with the said conditions prescribed by the Company. I/We also declare and undertake that if any additions or alterations are carried out by me/us in this proposal form or if there is any change in the information as submitted by me/us after the submission of this proposal form then the same would be conveyed to Tata AIG General Insurance Company Limited immediately failing which it is agreed and understood by me/us that the benefits under the policy would stand forfeited. I/We agree to the Company taking appropriate measures to capture the voice log for all such telephonic transactions carried out by me/us as required by the procedures/regulations internal or external to the Company and shall not hold the Company responsible or liable for relying/using such recorded telephonic conversation. I/We agree that the insurance would be effective only on acceptance of this application by the Company and the payment of the requisite premium by me/us in advance. In the event of non-realization of the cheque or non-receipt of the amount of premium by the Company the policy shall be deemed cancelled 'ab-initio' and the Company shall not be responsible for any liabilities of whatsoever nature under this Policy".
- I/We agree to receive "Certificate of Insurance and Policy Schedule" only and shall access the policy terms, conditions & exclusions on the company's website.
I / We understand that in order to underwrite the policy, Company shall have to share / verify the information provided by me / us with rating agencies, third parties or services providers and accordingly I / We authorise the Company to do the same for the purpose of underwriting / servicing the policy.
No Claim Bonus* (if NCB confirmation is not submitted but NCB claimed). (Strike off what ever is not applicable)
I/We declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring Policy Period (Copy of Policy enclosed). I/We further undertake that if this declaration is found incorrect all benefits under the Policy in respect of Section I of the Policy will stand forfeited.
- Place:

Date

Signature of the Registered owner of the Vehicle*

Declaration

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 Proposer:

Name & Signature of agent/intermediary:

Agent Declaration:

I, (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 Officer)

Name of the specified Person and code

Place:

Date:
- Long Term Two Wheeler Package Policy UIN: IRDAN108RP0007V01201516



ACKNOWLEDGEMENT TO CUSTOMER

Application Number: _____ Date: _____

Name of the Proposer _____

We acknowledge with thanks the receipt of your application for Tata AIG _____ and amount by cash/cheque/Demand Draft/others _____ of amount of Rs. _____. Neither the submission to us of a completed proposal for insurance nor any payment towards this application obliges us to agree to issue a policy, which decision is and always shall be in our sole and absolute discretion.