

PROPOSAL FORM

1. Name of the Insured _____

2. Communication Address _____

3. Location of Manufacturing Facility _____

4. Expected revenue with respect to module sales for the next year _____

5. Sales Price of Photovoltaic Modules in the Sales Contract _____

6. Opted for Section A Only ☐ Both Section A & B ☐

7. Period of Cover _____ Years

8. Have the modules been previously insured

a. If yes, please provide expiring policy details _____

9. Establishment year of the manufacturing facility _____

10. Duration of warranty: _____

11. Buyer Details: _____

12. Checklist. _____

Sr. No	Item (all items are referring to the module product types to be insured)	Required for nonbinding indication	Required for binding offer	done (y/n)	Insured's Comments
0	NDA	✓			
1	Expected revenue with respect to module sales for the next year of which are projects larger than 2 MWp.	✓			
2	Warranty wording	✓			
3	Product data sheets	✓			
4	Bill of materials	✓			
5	IEC-61215 certification from NCB with corresponding lab and factory inspection reports	✓			
6	LID, tLID qualification from third party	✓			
7	Long term degradation reports	✓			
8	Factory flash data from two months of module production	✓			
9	PID, UV, JBox qualification from third party		✓		
10	Test reports for extended reliability (e.g. VDE-Quality-Tested, Thresher, PV+Test, DNV-Qualification)		✓		
11	QM documents		✓		
12	Flasher and reference module calibration reports		✓		
13	Claims handling procedure		✓		
14	Cell to module conversion timeline		✓		
15	Factory Inspection by Munich Re		✓		

Solar Module Warranty Insurance UIN: IRDAN108CP0010V01202122

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."

Bank Details

As per the Regulatory requirements, we can effect payment of refund / claims only through Electronic Clearing System (ECS) / National Electronic Funds Transfer (NEFT) / Real Time Gross Settlement (RTGS) / Interbank Mobile Payment Service (IMPS). For this purpose please submit the following details of the insured's bank account*

Name of the Account Holder: _____

Name of the Bank: _____ Branch Name: _____

Account Number: _____

Bank IFSC code: _____

Account Type: ☐ SB Account ☐ Current Account ☐ Others (please specify) _____

PAN card number (Mandatory):

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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: _____

Signature of Agent: _____

Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.

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.

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, exclusions please read policy wordings carefully, before concluding a sale.

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.

SIGNATURE:

PROPOSER:

DATE: