

PROPOSAL FORM

Should answers to any of the following questions require more space than provided, attachments providing particulars are welcome, especially in the case where more than one Host Country is involved.

1. PROPOSER

1. Name: _____

2. Mailing Address: _____

3. Nationality: _____

4. Date and place Proposer established: _____

5. Business of Proposer: _____

2. a. Country (ies) in which property to be insured will be located: (attach schedule if nec.)

b. i. Name and address of entity in Host Country (ies) for whom work will be conducted:

ii. Legal status of entity (Private, Govt. Agency, Ministry, etc.) _____

iii. Have there ever been any disputes between the Proposer and the Host Government regarding the project on which work will be conducted? _____

iv. To the best knowledge of the Proposer, have there ever been any disputes between the entity in the Host Country for whom work will be conducted (if it is not the Proposer) and the Host Government regarding the project on which work will be conducted? _____

c. If property is to be used for a specific contract, does title pass to the Buyer on completion or at any other time? _____

d. Describe the nature and principle use of the property while in Host Country (ies):

e. How long will the property be in the Host Country (ies)? _____

f. Have all documents necessary for legal operations in the Host Country (ies) been obtained?

- g. i. Is a re-export license required? _____
ii. If so, have the necessary licenses been obtained? _____
iii. If no re-export license is required, have all other required consents been obtained to re-export the equipment? _____
iv. Has the Proposer ever had problems in obtaining re-export licenses in the Host Country (ies)? If so, please give details:

- h. Who will have physical control of the property while it is in the Host Country (ies)? _____
i. Please attach a schedule of the property to be insured showing the age of the equipment and the current net book value.
j. Method of Depreciation used in calculation of Net Book Value: _____

- 3.a. Description of area surrounding location(s) to be insured (e.g. rural, commercial, government or military compound, etc.)

- b. Describe occupants of surrounding buildings: _____

- c. Is any equipment to be housed in a building? If so, please describe:

4. Description of security at location(s) to be insured:
a. Is there a guard force at the location full time? _____
If yes, number of guards on duty at all times: _____
b. Are there intrusion detection and CCTV systems? _____
c. Is there a perimeter fence? Is it lighted? _____
d. Is there an access control system (i.e., card access, sign-in etc.)? If yes, what type?
e. Please attach brief general description of security arrangements.
5. If the Insured has suffered any loss due to expropriation, confiscation, nationalization, deprivation, forced abandonment, willful destruction, war, or strikes, riots, or terrorism in the Host Country(ies) in the last 4 years, please attach a description of any such loss.

Tata AIG General Insurance Company Limited

6. Does the Investor have any knowledge of any facts which might give rise to a claim under the policy? It is agreed that if such knowledge or information exists, any claim arising therefrom is excluded from this proposed policy.

The undersigned 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.

The undersigned agrees that the existence of any policy that may be issued will not be disclosed to the Host Government. All information in this proposal will be treated confidential by 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

Tata AIG General Insurance Company Limited

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.

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):
Name of the specified Person and code

Signing of this proposal does not bind the undersigned to complete the insurance, but it is agreed that this proposal shall be the basis of insurance should a policy be issued and will be attached to form part of the policy.

BROKER

Broker _____

Address _____

CCP&E14-97

PROPOSER

Signed _____

Title _____

Corporation _____

Date _____

Tata AIG General Insurance Company Limited