

PROPOSAL FORM

1. This proposal is for covering an enterprise whose total value of insurable assets at a location is not exceeding ₹ 5 Crore against Fire Perils
2. Read the Prospectus Key Features Document/ Policy Wordings before filling up this proposal form to understand the meaning of the terms use herein better
3. The property proposed for insurance is not covered until the proposal is accepted and premium is paid.

Policy Insuring Officer Address & Code	
Intermediary/ Agent Name & Code (if any)	

A. Details about Proposer and Policy Period

Name of Proposer											
Address of Proposer											
PIN Code											
Telephone											
Fax											
Email											
Contact Person Details											
a. Name											
b. Designation											
Policy to be issued in favor of (list out all the parties who have insurable interest) including the financial institutions							Period of Insurance	From			
								To			

B. Business and Location of Business

Business of Proposer											
	SL No.	Address	Pin Code	Occupancy	Age of Unit	Floor*	Address	Pin Code	Occupancy	Age of Unit	
	1										
	2										
	3										
	4										
	*Floor: Ground Floor (GF)/ Mezzanine Floor (MF)/ Higher Floor (H)										

C. Details about business covered at the insured location

Indicate whether AMC (Annual Maintenance Contract) for Fire Protection Applications is in force	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Construction Details	Please tick correct answer in the box	
a. Please state material used		
i. Walls	Kutcha <input type="checkbox"/>	Pucca <input type="checkbox"/>
ii. Floor	Kutcha <input type="checkbox"/>	Pucca <input type="checkbox"/>
iii. Roof	Kutcha <input type="checkbox"/>	Pucca <input type="checkbox"/>
Note:	Kutcha: Building(s) having walls and/or roofs of wooden planks/thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt/ canvas/tarpaulin and the like are treated as Kutcha Construction. Pucca: Buildings other than Kutcha are treated as Pucca constructions.	

FIRE AND ALLIED PERILS SOOKSHMA UDYAM SURAKSHA

UIN: IRDAN108RP0023V01202223



WITH YOU ALWAYS

Basement Storage	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If yes, value stored Sum Insured: ₹	
b. Number of floors		
c. Age of the building	Less than 5 years	
	5-10 years	
	10-20 years	
	Above 20 years	
Distance between the risk to be covered and nearest Fire Brigade		
Whether You have insured the same property with any other Insurance Company with the same type of coverage (Give details)		
Whether Insurance was declined by any other Company (Give details)		
Premium / Claim details for the past 36 months excluding the expiring policy period		

D. Limit of Liability and Other Details of Insured Property (Indicate Limit of Liability on the following basis)

a. For Building, Plant and Machinery, Furniture, Fixture and Fittings and other contents: Reinstatement Value																				
b. For raw material: Landed Cost																				
c. For stock in process: Input Cost																				
d. For finished stock: Manufacturing Cost of the finished stock or the Contract Price* of the goods sold but not delivered; as applicable																				
*Contract Price is in respect only of goods sold but not delivered, for which You are responsible and with regard to which under the conditions of the sale, the sale contract is cancelled by reason of any Damage insured under this Policy either wholly or to the extent of the Damage. The Company's liability shall be based on the Contract Price																				

S.NO	Description of Block	Building including plinth, Basement and additional structures	Plant & Machinery	Furniture & Fixtures, Fittings and other equipment	Raw Material	Stock in Process	Finished Stock	Other Contents (Please Specify)	Total
1								₹	
2								₹	
3								₹	

Would you like to delete any of following covers from the basis cover	
Deletion of Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Tsunami, Flood & Inundation	
Deletion of Earthquake	

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WITH YOU ALWAYS

Would you like to opt any of the following covers-													
Coverages	Limit of Liability (in ₹) Wherever applicable												
Omission of insurance additions, alterations or extensions													
Escalation Clause													
Terrorism													
Wrong Fueling of Vehicles													
Floater Cover													
Declaration Policy for Stocks													
Accidental damage cover													
Involuntary betterment													
Rent insurance													
Protection and preservation of property													
Contract works													
Deterioration of stocks in cold storage premises													
New location cover													
Brands and trademarks													
Electrical injury													
Fuel contamination during decantation													

i. Do you want to opt Floater Cover ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If yes, give details below	
Floater Cover (for stocks at various locations)	Location (Postal Address with Pincode)	Limit of Liability (in ₹)
	a. Maximum Values at any one location: ₹	
	b. Whether stocks stored in open	Yes <input type="checkbox"/> No <input type="checkbox"/>

ii. Do you want to opt for Declaration Policy?	Yes <input type="checkbox"/>	No <input type="checkbox"/> (Strikes off what is not included)
	If yes, give details below	
Stocks which fluctuate in value to be covered on (monthly) declaration basis		
Amount (₹)		

Fire and Allied Perils Sookshma Udyam Suraksha UIN: IRDAN108RP0023V01202223



E. Payment Details

Mode of payment	
Payment Details	
Amount	

Assignment for Personal Accident Insurance

I/We hereby assign the money payable by TATA AIG General Insurance Company Limited, in the event of my death to the nominee named above and I further declare that his/her/their receipt shall be sufficient discharge to the Company

Declaration by Insured

I/ We hereby declare that the value insurable assets are less than 5 Crore and the statements made by me / Us in this Proposal Form are true to the best of my / our knowledge and belief and I / We hereby agree that this declaration shall form the basis of the contract between me/Us and the _____.

If any additions or alterations are carried out in the risk proposed after the submission of this proposal form then the same should be conveyed to the insurers immediately.

Date: _____

Place: _____

Signature of Proposer

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: _____

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.

