



Proposal form

Satellite In-orbit Third Party Liability Insurance

This is an application for insurance and issuance of this does not amount to acceptance of proposal by us. Commencement of risk under this proposal is subject to acceptance of the risk by us and receipt of premium.

The information declared by you in this form is the basis for issuance of the policy.

Please answer all questions carefully. Any incomplete, incorrect or partially correct answers may lead to rejection of the proposal and also might lead to cancellation of policy.

Section 1: Basic Information

Proposer's name in full:

Proposer's address:

Proposer's nature of business:

Detail of the Insurance Coverage Required:

Period for Insurance Coverage:

Details of past and present spacecraft experience of the proposer:

Section 2: Satellite and mission Information:

Number of satellite for which insurance is required:

Value of satellite:

Tata AIG General Insurance Company Limited

Registered Office: Peninsula Business Park, Tower- A, 15th Floor, G.K. Marg, Lower Parel, Mumbai – 400013, Maharashtra India
24X7 Toll Free No: 1800 266 7780/ 1800 22 9966 | Fax: 022 6693 8170 | E-mail: customersupport@tataaig.com |
Website: www.tataaig.com. Registered with Insurance Regulatory & Development Authority of India
IRDA of India Registration No: 108 CIN: U85110MH2000PLC128425



Name and Intended purpose / function of satellite:

Dimension / size of the satellite:

Mass (Kg) of satellite:

Orbital Parameters (altitude, inclination etc.) for the Satellite to complete its missions.

Anticipated life span of the satellite:

Detail of propulsion system of satellite:

Brief overview of satellite mission:

Name of Satellite manufacturer:

Address of satellite manufacturer:

Experience of satellite manufacturer:

Section 3: Additional Information

Nation state which issued your operator licence.

Any party who should be noted as an Additional Insured under your insurance.

Limit of Liability required for this phase.

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What coverage is required (*For example, Launch, Launch and In-Orbit, In-Orbit only.*)

If any liability cover is provided by the Launch service provider

Who will be operating the Satellite and their experience.

Any In-Orbit activities the operator will undertake.

Details of the Satellite's end of life, end of mission or emergency de-orbit plans?

What debris mitigation measures have been implemented (*This should include on a Satellite level or any space situational monitoring / management the operator undertakes*)

Any Additional Comment:

DECLARATION: I/We warrant that the abovementioned aircraft is/are my/our property, and the statements and particulars given are true and that no material information has been withheld or suppressed, and I/We agree that this proposal and declaration shall be the basis of the contract between me/us and the Insurance Company and to accept a policy subject to terms, conditions and exclusions prescribed therein.

Date and Place:

Signature of the Proposer

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