

Welcome

Mr. CHAUGULE ARUN GORAKH
A/P SARAPDOH
KARMALA 7798963963 SOLAPUR
KARMALA
MAHARASHTRA India - 413202
7798*****

**From here on,
you're our responsibility.**

Welcome on board.
Your Reliance Commercial Vehicles
(Miscellaneous & Special Type) Package Policy -
Schedule, with Policy
Number 170122523430001262 is now live to
access your policy anytime, anywhere download
our Reliance Selfi App and enjoy a host of
special features.



Download Now |  



My Policy

Attach, Access or
Download your policy



Claim Status

Register, Track
or Submit claim
documents



Locator

Go cashless,
Tap and spot from
amongst 5000+
network garages.



Video Claim Assistance

Intimate claims
instantly through
live video streaming.

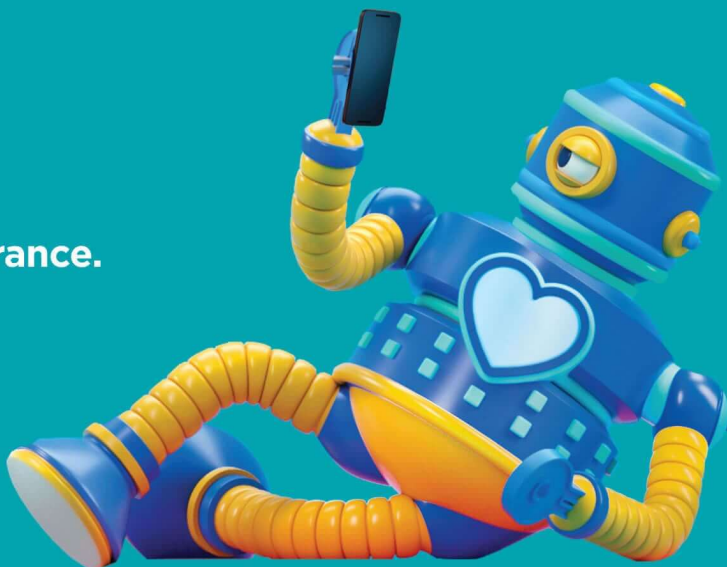
[Click here](#) to download

Customer Information Sheet (CIS)

**Now *Live Smart*
With Reliance general Insurance.**

Tech+ 

Best Regards,



reliancegeneral.co.in



022 4890 3009 (Paid)



74004 22200 (WhatsApp)



Reliance Commercial Vehicles (Miscellaneous & Special Type) Package Policy- Policy Schedule

Important

- The validity of this certificate of Insurance cum policy is subject to realization by the company of the premium cheque paid by the Insured.
- Except as provided in GR 27 Rule (g) of Erstwhile Indian Motor Tariff (i.e. Sale of Vehicle), No NCB will be allowed when a policy is not renewed within 90 days of its expiry.

Policy Number : 170122523430001262	Proposal/Covernote No: R110325104148
Insured Name : Mr. CHAUGULE ARUN GORAKH	Period of Insurance : From 00:00 Hrs on 12-Mar-2025 to Midnight of 11-Mar-2026
Communication Address & Place of Supply : A/P SARAPDOH KARMALA 7798963963 SOLAPUR KARMALA, SOLAPUR, MAHARASHTRA, India, 413202.	Policy Issuing Branch : A Block, Heritage House, Ground floor, 6 Ramabai Ambedkar Road, , PUNE, MAHARASHTRA, 411001.
Mobile No : 7798*****	Tax Invoice No. & Date: R110325104148 & 11 Mar 2025 05:55
Email-ID : S*****@GMAIL.COM	GSTIN/UIN of the Insured : MAHARASHTRA

Insured Vehicle Details			
Registration No.	MH45AD3184	Mfg. Month & Year	NOV-2017
Make / Model & Variant	SWARAJ 724 XM	CC / HP	1824
Engine No. / Chassis No.	381366SYM05067 / WSTN12937170534	GVW	2000
Type of Body / LCC(excluding driver)	NA/0	Manufacturer fully build in	Yes
RTO Location	MAHARASHTRA - Akhuj	Total Premium `	9,379.00
Vehicle subtype	AGRICULTURAL TRACTORS	IDV `	300,000.00
Hypothecation/Lease	NA		

Insured Declared Value (IDV)			
Chassis IDV `	0.00	Non Electrical Accessories `	0.00
Body IDV `	0.00	CNG / LPG Kit `	0.00
Vehicle IDV `	300,000.00	Trailer `	0.00
Electrical / Electronic Accessories `	0.00	Total IDV `	300,000.00

Premium Summary			
Own Damage - Section I	Amount (`)	Liability - Section II	Amount (`)
Basic OD	549.00	Basic Liability (TPPD 1)	7,267.00
Covers for Lamps Tyres/Tubes Mudguards/Bonet/Side parts etc (IMT-23)	82.35	Total Basic Liability Premium	7,267.00
Total Basic Own Damage Premium	631.35	PA Benefits - Section III	
		Legal Liability to paid driver and/or Conductor and/or cleaner	50.00
		TOTAL LIABILITY PREMIUM	7,317.00
		TOTAL PACKAGE PREMIUM (Sec I + II + III)	7,948.00
		CGST (@9.00%)	715.00
		SGST (@9.00%)	715.00
TOTAL OWN DAMAGE PREMIUM	631.00		
TOTAL PREMIUM PAYABLE (`)		9,379.00	

Subject to I.M.T.Endt.Nos. & Memorandum printed/herein/attached hereto. IMT 47,40,23,21

GSTIN :27AABCR6747B1ZG

HSN : 997134, Description of services : Motor vehicle Insurance Service

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 31st October of the next financial year.

Consolidated Stamp duty Paid vide Letter of Authorization "NO LOA/ENF-1/CSD/24/2025/(Validity Period Dt. 03/03/2025 to Dt. 01/12/2026)/663 Date 03-03-2025" at General Stamp Office, Mumbai.** Not Applicable for the State of Jammu & Kashmir.

25P78323 / SARAPHARAJ SHAKILSHAIKH	9561617858	sparkpolicy@gmail.com	*****810L
Intermediary Code/Name	Intermediary Contact No.	Intermediary E-mail ID	POS UID Aadhaar No. / PAN No.

Special Conditions : This Tractor is rated as an agricultural tractor based on information of exclusive use for agricultural purpose provided to

- Limits of liability** : PA cover for owner driver under section III CSI ` 0 (a) Under Section II (1)(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988.
(b) Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or in the custody of control of the insured up to the limits specified- (TPPD 1 Sum Insured - ` 7,50,000/-, TPPD 2 Sum Insured - ` 6,000/-).
- Limitations as to use** : The policy covers the use only under a permit within the meaning of Motor Vehicle Act, 1988 or such a carriage falling under sub-section (3) of Sec 66 of the Motor Vehicle Act, 1988. The Policy covers use for any purpose other than: (a) Organized racing (b) Pace making (c) Speed testing (d) Reliability trials.
- Deductible under Section-I :** (i) Compulsory deductible ` 2000/- (ii) Additional compulsory deductible ` 00/- (iii) Voluntary deductible ` 0/-

*No Claim Bonus is subject to no claim on the previous policy. Benefits under the policy stands forfeited if claim is/was made in previous policy.

"It is hereby declared and agreed that any damages pre-existing, any losses occurred & any Liability having been incurred, prior to the commencement of cover under this policy are excluded from the scope of this policy."

% of Discount on Own Damage Premium	
Period of Insurance	% of NCB on OD Premium
The Preceding Year	20%
Preceding Two Consecutive Years	25%
Preceding Three Consecutive Years	35%
Preceding Four Consecutive Years	45%
Preceding Five Consecutive Years	50%

- Persons/Classes of persons entitled to drive:** : **When the vehicle is used for transport of goods** Any person including insured: Provided that a person driving holds a valid driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided that the person holding a valid learner's license may drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Compulsory PA cover for owner driver :

Insured is not eligible for the Compulsory PA cover for owner driver in this policy as the same has not been opted for the reasons allowed as per motor tariff and relevant circulars/notifications issued by the regulator in this regard.

In case you have missed it, please opt for the compulsory PA cover by payment of an additional premium of Rs. 750/-Liability of insurance company shall commence from the date of issuance of endorsement.

I/ We hereby declare that I/ we hold an effective Personal Accident Insurance Policy / Compulsory Personal Accident (CPA) for Owner-Driver in other vehicles covering Death & Permanent Disability (Total and Partial) whereby the Sum Insured limit is of 1500,000 or more.

I/ We hereby declare that I/ we do not hold a valid Motor Driving license, and I/We am/are aware that Compulsory Personal Accident covering Death & Permanent Disability (Total and Partial) for Owner-Driver of SI 1500,000 will not be applied to this policy.

"It is hereby declared and agreed that all pre-existing damages to the vehicle having occurred prior to the commencement of cover are excluded from the scope of the policy"

The NCB provided is on Basic OD Premium excluding Add-on wherever applicable. The policy wording with detailed terms, conditions and exclusions are available on our website www.reliancegeneral.co.in

Statutory Provisions :

"As per Section 146 of the Motor Vehicle Act, 1988 it is Mandatory to have your vehicle insured against third party risk."

As per Section 196 of the Motor Vehicle Act, 1988 driving an uninsured vehicle is punishable with fine or Rs. 2000 and/or imprisonment up to 3 months for the first offence and fine of Rs. 4000 and/or imprisonment up to 3 months for the second offence."

I/We hereby certify that the Policy to which the certificate relates as well as this certificate of insurance are issued in accordance with the provision of Chapter X and Chapter XI of M.V. Act, 1988.

Note :In the event of dishonor of cheque, this policy document automatically stands cancelled from inception irrespective of whether a separate communication is sent or not.

Safeguard your transaction by paying your premium via crossed cheque/DD in favour of Reliance General Insurance Co. Ltd.

The policy has been issued based on the information provided by you and the policy is not valid if any of the information provided is incorrect. Subject otherwise to the terms, conditions and exclusions of the Reliance Miscellaneous and Special Types of Vehicles Package Policy Certificate Cum Policy Schedule. In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Proposal/Covernote No. as mentioned in the policy.

This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017.

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Call centre/Policy issuing Branch (Applicable for policies booked without Registration No of vehicles).

IMPORTANT NOTICE: The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. For legal interpretation, English version will hold good.

In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change As per National Highways Authority of India, kindly ensure to affix FASTag on your vehicle.

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

Registered & Corporate Office: Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063

Corporate Identification No. U66603MH2000PLC128300. **UIN:** IRDAN103RP0012V02100001 Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under. License RGI/MCOM/CO/2343/PS/Ver. 1.1/310118

Grievance Clause : For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 02248903009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located.

Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in

Fast Tag ID -

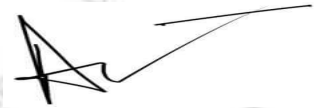
The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)

In the unfortunate event of a claim, please call quoting your Policy No. on **022 48903009(Paid)** and register your claim immediately within 7days from the date of loss.

Note: Kindly acknowledge the receipt of this policy. In case you find any variations against your proposal or any discrepancy in the policy, kindly contact us immediately.

In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal.

For Reliance General Insurance Co. Ltd.



Authorised Signatory

Risk Assumption Letter

Dear Mr. CHAUGULE ARUN GORAKH

Thank you for choosing Reliance General Insurance.

Please find enclosed policy no.: 170122523430001262 which has been issued based on the details declared by the applicant.

Insured Vehicle Details			
Registration No.	MH45AD3184	Mfg. Month & Year	NOV-2017
Make / Model & Variant	SWARAJ 724 XM	CC / HP	1824
Engine No. / Chassis No.	381366SYM05067 / WSTN12937170534	GVW	2000
Type of Body / LCC(excluding driver)	NA/O	Manufacturer fully build in	Yes
RTO Location	MAHARASHTRA - Akuj	Total Premium `	9,379.00
Vehicle subtype	AGRICULTURAL TRACTORS	IDV `	300,000.00

Insured Declared Value (IDV)			
Chassis IDV `	0.00	Non Electrical Accessories `	0.00
Body IDV `	0.00	CNG / LPG Kit `	0.00
Vehicle IDV `	300000	Trailer / Side Car `	0.00
Electrical / Electronic Accessories `	0.00	Total IDV `	300,000.00

Previous Policy Details			
Previous Year Policy No.	Period of Insurance	Previous Policy-Claim Status	
		☐ Yes	☒ No

YOU HAVE OPTED FOR THE FOLLOWING COVERS

Standard Cover	Vehicle Own Damage + Third Party Coverage
☐	Electrical/electronic accessories
☐	Non-electrical accessories
☐	Bi-fuel kits comprising LPG/CNG systems

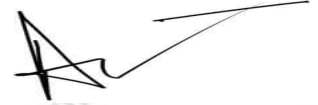
Add-on Covers

☐ Nil Depreciation Cover	No deduction for depreciation on vehicle parts other than tyres and tubes with respect of approved partial loss claims.
☐ Additional towing Charges	Provides cover for towing charges over and above the standard policy guideline as per the cover opted by customer (Sum Insured - ` 0.0/-).
☐ Additional Limit of TPPD	Indemnify the Insured for an additional TPPD amount opted for damage to property other than the property belonging to the Insured or held in trust or in custody of Insured.
☐ Emergency Hotel Accommodation	Provide allowance towards the Hotel accommodation insured vehicle met with accident/ stolen 200 kms away from the location provided in policy copy.
☐ NCB Retention Cover	No-Claim Bonus % is retained even after a claim, which would have become 0% without this cover.
☐ Total Cover	Provides cover for registration charges, road tax and insurance premium (Total Cover Sum Insured - ` 0.0/-)0/-).
☐ EMI Protect	Pays for car EMLs for the time period during which the vehicle is in one of our network garages for repair.
☐ Daily Allowance Benefit	Provides allowance as per plan opted, if vehicle is in garage for more than minimum days & for initial two eligible own damage claim., and in case of theft where vehicle is not found for more than 90 days
☐ Daily Allowance Benefit Plus	Provides allowance as per plan opted, if vehicle is in garage for more than minimum days & for eligible own damage claim., and in case of theft where vehicle is not found for more than 90 days
☐ Tyre Protector	Covers repair or replacement expenses arising out of accidental loss or damage to tyre & tubes
☐ Rim Protector	Covers repair or replacement expenses arising out of accidental loss or damage to Rims
☐ Personal belongings Cover	Covers loss of personal belongings of insured or his family while such items are in vehicle at the time loss or damage to the vehicle
☐ Key Protect Cover	Provides replacement cost of keys in the event the keys are lost. It also covers replacement cost of locks if the vehicle is broken into
☐ Assistance cover	Provides help or support in various emergency situation to the insured and Insured Vehicle due to accident or breakdown
☐ Tools and Equipment Cover	It will provide an allowance of specified amount for loss or damage to the tools and equipments at the time of event
☐ Voluntary Deductible	The insured shall be given reduction in premium if insured opts for specified amount of voluntary deductible and will bear the specified expense at the time of event
☐ No Claim Discount retention Insurance	It will maintain the current applicable NCB at the time of renewal of the policy
☐ Consumable Expenses	Covers expenses incurred towards consumable items due to damage to vehicle caused by perils covered.

Please take a moment to carefully check your policy details mentioned above and in the policy schedule. Kindly confirm that the same are in order. In case of discrepancies, please let us know immediately. You can write to us at rgicl.services@relianceada.com or call us 022 48903009(Paid) for necessary changes/rectification. In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal. Non disclosure and/or misrepresentation of claims in the previous policy period can lead to cancellation of your policy or rejection of your claims.

(Note-Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.)

For Reliance General Insurance Co. Ltd.



Authorised Signatory

Know your policy

Remember to carefully go through the Risk Assumption Letter and confirm your personal as well as your vehicle details.

In case of any discrepancy in the policy details, kindly revert within 15 days from the policy start date on 022 48903009 (Paid) or visit any of our branches.

Kindly refer to the Key Feature Document and Policy Wording at www.reliancegeneral.co.in to understand your policy better and learn more about the policy coverages, add-on covers and Policy Exclusion. This document is a statement of the specific provisions that form the Terms and Conditions of this Policy.

What documents do you require for making any change to your policy

1. Changes in vehicle make & model/cubic capacity/seating capacity/engine & chassis no./year of manufacture/registration no./ location/address

Documents required : Letter for change, policy copy and registration certificate copy along with additional premium cheque, if applicable.

2. Changes in electrical and non electrical accessories/CNG/LPG kit

Documents required : Letter for addition, policy copy, invoice copy of accessories, endorsed registration certificate copy (for CNG/LPG kit) and cheque for additional premium.

3. Changes in financier details (Hypothecation/Lease/Hire purchase)

Documents required : Letter for change, policy copy, endorsed registration certificate copy and no objection certificate from financier (not mandatory for deletion, if registration certificate copy is endorsed).

How to register a Claim - Cashless



How to register a Claim - Reimbursement



What documents do you require to register a Claim

1. Claim form duly filled and signed (company stamp in case of company registered vehicles)
2. Registration copy
3. Driving License of the driver at the time of loss
4. Policy copy
5. Vehicle fitness certificate
6. Vehicle route permit
7. Vehicle carriage permit
8. Road tax copy
9. Load Challan (if applicable)

Note: 1. As soon as a claim occurs, please intimate immediately to our call centre 022 48903009 (Paid). Delay in intimation would result in the violation of policy condition.

2. Any additional document, if required, will be informed.

How to renew your policy conveniently			Payment Modes
Visit reliancegeneral.co.in and renew online	Call 022 4890 3009 (Paid) and renew	Submit a cheque/DD along with signed Renewal Notice to branch/agent and renew	Internet banking
			Cheque/DD
			Credit/Debit Card

The content on this page is for additional information & Should not be considered as part of the policy document/Schedule

Proposal Form for POS Reliance Commercial Vehicles Package Policy (Other than Motor Trade Internal Risks Policy)

(The queries made/details stated below are the minimum requirement to be furnished by a proposer.
The Insurer may seek any other information as desired for under for underwriting purpose.)

*(Applicable to all classes of vehicles with suitable amendments in 'Limitations as to Use')

☐ PCV ☐ GCV ☒ MISC D ☐ Trailer

For Office Use Only

Policy Number 170122523430001262

Date

Savvion Reference No.

Inspection Lead No.

Intermediary Details (To be filled in BLOCK LETTERS)

Intermediary Name SARAPHARAJ SHAKILSHAIKH Code 25P78323
Branch Name Pune Code 1701
Sales Manager Name Anikesh Kailas Kolhapure Code 71016662
*POS PAN No. ****810L *POS UID Aadhaar No.

Details (To be filled in BLOCK LETTERS)

- This Proposal is for ☐ A new Policy ☐ Renewal of Policy ☐ Endorsement ☐ Others (Please specify)
- Proposer's Full Name ☒ Mr. ☐ Mrs. CHAUGULE ARUN GORAKH
- Address Address for Communication Address where vehicle is normally kept and Used
Flat/Building/Door/Block No. A/P SARAPDOH KARMALA 7798963963
Road /Street/Sector SOLAPUR
Nearest Landmark
Area
City KARMALA
Pin Code 413202
State MAHARASHTRA
Country India
Phone Mobile 7798****
Emergency Contact No. Blood Group
#Email S*****@GMAIL.COM Fax
- Period of Insurance From 12/03/2025 To 11/03/2026
- Source of Funds ☐ Business ☐ Profession ☐ Salary ☐ Agricultural Income ☐ Savings ☐ Others
- Monthly Income ☐ Upto `20,000 ☐ `20,001 to `50,000 ☐ `50,001 to `1,00,000 ☐ `1,00,001 and above
- UID Aadhaar No. 7. PAN No. ****810L
- Fast Tag ID
- Are you an existing Reliance General Insurance Customer ☐ Yes ☒ No
If Yes, please Provide the Policy No.:

#The Policy copy and all related documents shall be sent to the email ID provided above. If you wish to receive Policy copy and related documents in physical form to the aforesaid communication address, please drop us an email at rgicl.services@relianceada.com

Details of the Vehicle

- Registration Number MH45AD3184
- Registering Authority & Location MAHARASHTRA - Akulj
- Year & Month of Manufacture NOV-2017
- Engine Number 381366SYM05067
- Chassis Number WSTN12937170534
- Make of Vehicle SWARAJ
- Type of Body/Model NA/724
- Gross Vehicle Weight (GVW)/Cubic Capacity (C.C.) 2000
- Goods type (Applicable only if GVW+7500kgs) ☐ Hazardous Goods ☐ Non-Hazardous Goods
- Is the Vehicle made in India? ☒ Yes ☐ No
- Date of Registration 14/03/2018
- Cubic Capacity 1824
- Seating Capacity including Driver 1

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

Registered & Corporate Office: Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063

Corporate Identification No. U66603MH2000PLC128300. UIN: IRDAN103RP0012V02100001 Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under. License RGI/MCOM/CO/2343/PS/Ver. 1.1/310118

23. Max. Licensed carrying capacity (No. of Passengers) in case of Passenger carrying vehicles 0
24. Vehicle Category ☐ Bus ☐ Taxi
Vehicle usage type (Applicable if bus) : ☐ Contract Carriage ☐ Stage Carriage ☐ Private Usage
Vehicle usage sub type (Applicable if Contract Carriage): ☐ School Bus ☐ Employee pickup Bus ☐ Others
25. Seating capacity (Including Driver) 1

Details of the Vehicle Type and Use

26. a. Whether the Vehicle is driven by Non-conventional source of power? ☐ Yes ☐ No If yes ☐ Bi Fuel ☐ CNG ☐ LPG ☐ Electric

Insured's Declared Value (IDV) of vehicle		Non - electrical accessories fitted to the vehicle	Electrical accessories fitted to the vehicle	Value of CNG/ LPG Kit Bi Fuel	Total Value
Chassis	Body	()	()	()	()
0.00	0.00	0.00	0.00	0.00	300,000.00

Do you have a valid PUC? ☒ Yes ☐ No

((Note-Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.))

27. Details of Driver : (a) Age of Owner Driver _____ Others _____
- (b) Does the driver suffer from defective vision or hearing or any physical infirmity. ☐ Yes ☐ No
If "Yes" please give details.

- (c) Has the driver ever been involved for causing any accident or loss? ☐ Yes ☐ No
If "Yes" please give details as under including the pending prosecution, if any:-

- (d) D.O.B. _____

28. Add On Covers (Subject to availability and eligibility)

1. Easy Monthly Instalment (EMI) Protection Cover: (RGI-MO-A00-00-17-V01-14-15)

If Yes, please choose any one option;

Plan I - 1 EMI, EMI Amount :

Plan II - 2 EMIs, EMI Amount :

Plan III - 3 EMIs, EMI Amount :

2. Additional Towing Charges No

3. Nil Depreciation Cover: No

4. Total Cover No

5. Voluntary Deductible

Voluntary Deductible amount opted:

6. Emergency Hotel Accommodation No

Benefit Amount:

7. Additional limit of TPPD No

Additional amount opted:

8. Personal Belongings Cover No

Benefit Amount:

9. Daily Allowance Benefit No

Per day allowance amount opted :

Coverage Days opted:

10. Daily Allowance Benefit Plus No

Per day allowance amount opted:

Coverage Days opted:

11. Tools and Equipment Cover

12. Key protect cover No
Sun Insured:
13. Any other Details

14. Consumable Expenses No
15. Engine Protector No
16. Hospital Cash Cover No
17. NCB Retention Cover No
18. Return to Invoice No
19. Rim Protector No
20. Tyre Protector No
21. Limit Sure Pay As You Drive No
29. Is the vehicle fitted with any Anti-theft device approved by the ARAI ? ☐ Yes ☒ No
If Yes, please attach certificate of installation in the vehicle, issued by automobile Association of India.
30. Are you a member of Automobile Association of India ? If Yes, please submit membership copy. ☐ Yes ☒ No
31. Whether the Vehicle is used for Driving Tuitions? ☐ Yes ☒ No
32. Whether use of Vehicle is limited to Own Premises? ☐ Yes ☒ No
33. Whether the commercial vehicle is also used for Private purposes (excluding use for hire or reward)? ☐ Yes ☒ No
34. Are you entitled to No Claim Bonus ? ☐ Yes ☒ No
If Yes, please submit proof thereof
35. Whether the Vehicle is fitted with Fibre Glass Tank? ☐ Yes ☒ No
36. Whether the Vehicle belongs to the Embassy/Consulate of a Foreign Country? ☐ Yes ☐ No
If so, is the duty element included in the IDV?
37. Whether the Vehicle is design for use of Blind/Handicapped/Mentally Challenged Person? ☐ Yes ☒ No
38. Date of purchase of the Vehicle by the Proposer 14/03/2018
39. Whether the vehicle at the time of the purchase was ☐ New ☐ Second Hand

Risk Inclusions

40. Liability to third parties: The policy provides Third Party Property Damage (TPPD) of 1 lakh (Two wheelers) and 7.5 lakhs (other class of vehicles)
Do you wish to restrict the above limits to the statutory TPPD Liability limit of 6000/- only? ☐ Yes ☒ No
Do you wish to cover legal liability to?
(a) Driver/Conductor /Cleaner (No. of persons) ☐ Yes ☐ No
(b) Other employees (No. of Persons) ☐ Yes ☐ No
(c) Non-fare paying passenger (No. of persons) ☐ Yes ☐ No
41. Do you wish to include personal Accident (P.A.) Cover for paid drivers, cleaners and conductors? ☐ Yes ☐ No
If Yes, give name and Capital Sum Insured (CSI) opted for. The maximum CSI available per person is 1 Lakh in the case of Motorised two wheelers and 2 lakhs for other classes of vehicles.
42. Personal Accident Cover for Owner Driver. Please give details of nomination

Name	Name of the Nominee	Age of Nominee	Name of the Appointee (if Nominee is Minor)	Relationship	Address

(Note: 1. Personal Accident cover for owner driver is compulsory for Sum Insured of 15,00,000/- for Two Wheeler, Private Car, GCV, PCV and Misc-D
2. Compulsory PA cover for owner driver cannot be granted where a vehicle is owned by a company, a partnership firm or a similar body corporate or where the owner-driver does not hold an effective driving license)

43. Do you wish to include Personal Accident cover Named Persons? ☐ Yes ☐ No

Name	CSI Opted	Name of Nominee	Age of Nominee	Name of the Appointee (If Nominee is Minor)	Relationship	Address

44. Extension of Geographical Area
Whether extension of Geographical Area to the following Countries required ?

- ☐ 1. Bangladesh
☐ 2. Bhutan
☐ 3. Maldives
☐ 4. Nepal
☐ 5. Pakistan
☐ 6. Sri Lanka

Details of Hire Purchase / Hypothecation / Lease

45. Please state if the vehicle is under ☐ Hire Purchase ☐ Lease Agreement ☐ Hypothecation Agreement
If so, give name and address of concerned parties.
46. Full Name
47. Address

Insured's Declared Value (IDV) of vehicle		Non - electrical accessories fitted to the vehicle	Electrical accessories fitted to the vehicle	Value of CNG/ LPG Kit Bi Fuel	Total Value
Chassis	Body	()	()	()	()
0.00	0.00	0.00	0.00	0.00	300,000.00

Note

The Insured's Declared Value (IDV) of the vehicle will be deemed to be the 'SUM INSURED' for the purpose of this tariff and it will be fixed at the commencement of each policy period for each insured vehicle.

The IDV of the vehicle is to be fixed on the basis of manufacturers' listed selling price of the brand & model as the vehicle proposed for insurance at the commencement of insurance / renewal, and adjusted for depreciation as per policy wordings.

Details of Previous Insurance

48. Full Name of previous insurer
49. Address
50. Policy Number
51. Type of Cover ☒ Package Policy ☐ Liability only ☐ Previous Policy Expiry ☐ others (to be describe)
52. NO CLAIM BONUS allowed under previous policy (%) 0
53. Claims taken in previous policy ☐ Yes ☒ No
If yes, No. of Claims _____ Claims Amount ` _____
54. Are you entitled to No Claim Bonus ☐ Yes ☒ No
If yes, please submit/attached proof thereof

Payment Details

- ☐ Cheque/ DD _____
Cheque/ DD Date _____
- Cheque/ DD No. ☐ Cash ☐ Credit Card ☐ Others

Proposer's Bank Details

55. Name of the Bank Account Holder ☐ Mr. ☐ Mrs. ☐ Ms. _____
56. Bank Account No.: _____
57. Account: ☐ Saving ☐ Current
58. Name of the Bank
59. Branch _____
60. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank) _____
61. IFSC Code (11 character code appearing on your cheque leaf) _____

☐ I understand that any refund due on the premium payment / any payment / claims to be directly credited to my aforesaid Bank Account.*

* As per IRDAI, its mandetory that all payments made to the insured are only through electronic mode.

GENERAL DECLARATION:

I understand that as per the new AML/CFT Guidelines issued Reliance General Insurance Co. Ltd will be verifying my details pertaining to KYC and PAN provided at the time of proposal.

I further, do hereby agree and consent that in the case of the event of a mismatch of information provided by me in the proposal form, identification proof, and address proof at the time of issuance of the policy. I request Reliance General Insurance Company Limited to issue the policy with the details appearing as per my proposal form. I will be solely responsible for any consequences arising out of the difference in detail given by me during the verification of supporting documents provided by me at the time of issuance of the policy or otherwise.

AML Guidelines

"I/ We hereby confirm that all premiums have been/ will be paid from bonafide sources and no premium have been/ will be paid out of the proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act 2002. I understand that the company has the right to call for the documents to establish source of funds. The insurance company has the right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly/ indirectly governing the prevention of Money Laundering in India.

Nationality ☐ Indian ☐ Non-Indian, If Non Indian Please specify the country
Type of organization ☐ Corporation ☐ Government ☐ Non Government Organization ☐ Society ☐ Trust ☐ Partnership
☐ International Organization ☐ Corporatives ☐ Section 25 Companies

PEP Declaration:

Are you a Politically Exposed Person (PEP)?	☐ Yes ☒ No
If yes, please mention the position held	
Is any of your close relation or family member a PEP?	☐ Yes ☒ No
If yes, please mention the name and relation and the position held by such close relative/family member.	

I hereby declare that in future if me, any of my close relatives or any of my family member attains a position of PEP then I shall confirm the same to Reliance General Insurance Co. Ltd as a mandate. I understand that this is a crucial information under the PMLA Rules and AML/ CFT Guidelines and shall confirm that the answers given by me is true. In case the company comes to know that this is a misrepresentation and concealment of information then the policy shall be put on hold for scrutiny by the company and I shall be solely responsible for the same.

Note :
"Politically Exposed Persons" (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States/Governments, senior politicians, senior government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc (As per sub clause (xii) of 3(b) of Chapter I of Master Direction – Know Your Customer (KYC) Direction, 2016 issued by Reserve Bank of India (RBI).

Declaration by Proposer

I/We hereby declare that 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 RELIANCE General Insurance Company Limited. I/We also declare that, if any additions or alterations are carried out after the submission of this proposal form, then the same would be conveyed to the insurers immediately. I/We hereby declare that the contents of the form and documents have been fully explained to me/us and that I/We have fully understood the significance of the proposed contract. I/We agree to accept a policy subject to the condition prescribed by the company. • I have read and understood the brochure, prospectus, sales literature & Policy wordings and confirm to abide by the same. • I/We declare that the rate of NCB stated above by me/us is correct and that no claim has arisen in the expiring policy (copy of the policy enclosed). • I/We further undertake that, if this declaration is found to be incorrect, all benefits under the policy in respect of section I of the policy will stand forfeited. • I/We further understand and agree that RELIANCE General Insurance will seek confirmation of above stated details from my/our previous insurers. Pending receipt of necessary confirmation, I/We agree that, though coverage under the policy will be available to me/us, RELIANCE General Insurance will be liable to release the payment towards any claims under section I of the policy only after a confirmation in this regard is received. In the event this declaration is found to be incorrect, any and all coverage available under section I of the policy from the date of commencement of the policy shall stand automatically forfeited. Further, any survey arranged/allowed by RELIANCE General Insurance of the motor vehicle, pending confirmation of the declaration from my/our previous insurers, shall be without prejudice to any of the rights and remedies available to RELIANCE General Insurance as contained herein and under the relevant laws and regulations. • I/We acknowledge and agree that, Pending receipt of confirmation of the declaration from my/our previous insurers, the "cash-less repair facility" provided by RELIANCE General Insurance shall stand suspended. • I/We also shall endeavour to procure the renewal notice and pass on the same to RELIANCE General Insurance immediately upon the receipt of such renewal notice. Mode of Payment: Secure your payment by cheque/DD favouring Reliance General Insurance CO.Ltd. This policy shall be voidable at the option of the Company in the event of mis-representation, mis-description or nondisclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other persons, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information, information concerning any fact material thereto, commits a fraudulent act which will render the policy voidable at the company's sole discretion and result in a denial of insurance benefits. • I/We here by state that the above mentioned address shall be taken as address on record for the purpose of GST. • I/We hereby confirm that the contents of the proposal form and connected documents have been fully explained to me/us and I/We have fully understood the significance of the proposed contract

This proposal form was completed by



You can support our Go Green Initiative by saying "No" to Policy kit, Renewal Notice and Other Communications hard copy. We will be sending you a digitally signed soft copy on your registered Email ID & Mobile number.

Hard copy required

☐ Yes ☐ No

Name _____

Place : _____

Date : 11 Mar 2025 05:55

Date : 11 Mar 2025 05:55

Signature

Signature of Proposer & Company Seal

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 the 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 prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

Supporting Confirmation of Agent/Broker/SM/CSO

I confirm the above signature to be of the registered owner of the vehicle proposed for insurance

Name of IRDAI Agent/ Broker ☐ Mr. ☐ Mrs.

Place

Date

(In case of Direct Business, Name & Signature of CSO /SM to be taken)

Signature of IRDAI Agent/ Broker

The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)