

**PROPOSAL FORM – BURGLARY INSURANCE POLICY**

*(Acceptance of this proposal is subject to the rules & regulations of MHDH Burglary Policy. The property is not covered until the proposal is accepted and premium paid.)*

|  |  |  |  |
|--|--|--|--|
| Agent/Broker Name  |  |  |  |
| Agent/Broker Code  |  |  |  |
| Agent Mobile Number  |  | Email Address  |  |
| Name of the Proposer   |  |  |  |
| Address of the Proposer  |  | City _____   | State _____ Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
|  |  | Mobile Number  | Email Address  |
| Policy to be issued in favour of   |  | <i>(List of all the parties who have insurable interest)</i>                                   |  |
| Financial Institution Interest (if any)  |  | ..... <i>(Attach annexure in case of multiple institutions)</i>                                |  |
| Business of the Proposer   |  |  |  |
| Period of Insurance  |  | From..... To .....   |  |
| Whether you have insured the same property with any other Insurance Company with the same type of coverage. (Give details)   |  |  | Yes/No   |
| Whether you have insured the same property for coverage under Fire Insurance. (Give details)   |  |  | Yes/No   |
| Whether Insurance was declined by any other Company or imposed any Special Conditions (Give details)   |  |  | Yes/No   |
| Risk Location/s to be Insured – Give complete address with pin code  |  | City _____   | State _____ Pin Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
|  |  | Occupancy of the Risk Location<br><i>(Describe the activities carried out in the premises)</i> |  |
| <i>Note – in case of multiple locations please attach annexure indicating risk location addresses and occupancies of each location. Burglary Insurance is a location specific policy and any change in Location(s) needs to be informed to the Insurer and an endorsement passed for it to get covered</i> |  |  |  |
| Construction Details   |  | Please state material used for<br>Wall..... Floor.....Roof.....                                |  |
| <i>Note: Buildings having walls and/ or roofs of wooden planks/thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt cloth/canvas/tarpaulin and the like are treated as "Kutcha" construction</i>  |  |  |  |
| What Protection is Provided to   |  | Doors  |  |
|  |  | Windows  |  |
|  |  | Sky Lights, Ventilators, Exhaust Fans, Lights, Air Conditioners, Trap Doors                    |  |
|  |  | Any other openings   |  |
|  |  | Mention and special precautions you have adopted for safeguarding your property                |  |
| Will the premises at any time be left un-occupied? If so, how often and for how long   |  |  | Yes/No   |
| Is a security present for 24 hours and how many? If not, alternate security systems/aids adopted.  |  |  | Yes/No   |
| Alarm System Details   |  | Is the premises fitted with an alarm system  | Yes/No   |
|  |  | Is it under a maintenance contract? (quarterly, half yearly or yearly)                         | Yes/No   |

|  |   |        |
|--|---|--------|
| Details of Safe installed at Risk Location.<br><br>(Note – in case of multiple locations please attach annexure) | Maker's Name  |        |
|  | Height  |        |
|  | Width   |        |
|  | Depth   |        |
|  | Weight  |        |
|  | No. of Keys available and with whom   |        |
|  | Can the safe (s) be opened by a single key or by a combination of two or more keys? | Yes/No |

|                  |  |        |
|------------------|--|--------|
| Coverage details | Riot, Strike & Malicious Damage (RSMD) | Yes/No |
|                  | Theft                                  | Yes/No |
|                  | First Loss Percentage                  |        |

|                                       |        |
|---------------------------------------|--------|
| Are stocks and sales books maintained | Yes/No |
|---------------------------------------|--------|

|  |  |  |
|--|--|--|
|  | Frequency of stock taking                          |  |
|  | Where are these books kept outside business hours? |  |

| Sum Insured Details  | Please mention block wise sum insured for various risk locations below |                               |                             |                           |                   |                   |
|----------------------|--|-------------------------------|-----------------------------|---------------------------|-------------------|-------------------|
| Risk Location /Block | Plant & Machinery  | Furniture/ Fixtures/ Fittings | Stocks and Stock in process | Money/Cash/ Coins in safe | Others ( specify) | Total Sum Insured |
|                      |  |                               |                             |                           |                   |                   |

*Note – in case of multiple locations please attach annexures/additional sheets*

| Special Coverage for Stocks Only (give full description of contents of the premises)  | Sum Insured |
|---|-------------|
| (A) Floater - Stocks at various locations can be covered on floater basis for a single Sum Insured.   |             |
| (B) Declaration - Stocks which fluctuate in value can be covered on (monthly) declaration basis.  |             |
| (C) Floater Declaration - Stocks which fluctuate in value as well as stored in various locations can be covered on (monthly) floater declaration basis. |             |
| (D) Stock stored in Open (Located outside the factory compound)   |             |
| (E) Storage of Cash/ Money outside safe   |             |

**Premium / Claim details for the past 5 years**

| Period of Insurance and Details of Loss | Claims Amount | Premium |
|---|---------------|---------|
|   |               |         |
|   |               |         |
|   |               |         |
|   |               |         |
|   |               |         |

If there were incidents of burglary, give full particulars stating when and how access was obtained. What precautions have been adopted to prevent such recurrence?

**NB:1**

To obtain full indemnity it is necessary to insure for the full value the property in the premises.

**NB:2**

Market Value (for other than stocks) represents the replacement value of the item as New at time of Damage or Loss less due allowance for betterment, wear and tear and/or depreciation. Market value for stocks means the procurement value of stocks from the same or similar source.

**Premium Payment Details:**

Kindly select :  Cheque  DD  NEFT  Cash

Cheque /DD/ PO /UTR No.

Date  IFSC

Amount in Rs.

Bank Name  Branch

PAN Number

Aadhaar Number

*Documents to be attached as per requirement for fulfillment of KYC Norms.*

GST Registered  Yes/ No

GSTIN Number

GST State

**DECLARATION BY INSURED**

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 the "MAGMA HDI GENERAL INSURANCE CO. LTD."

I/We, also declare that if any additions or alterations are carried out in the risk proposed after the submission of this proposal form then the same would be conveyed to the insurers immediately.

**Place**

**Date**

**Signature of Proposer**

**INSURANCE ACT 1938, SECTION 41 - PROHIBITION OF REBATES**

- 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 or 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 prospectus or tables of the Insurer.
- Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to five hundred rupees.