

PROPOSAL FORM - CONSEQUENTIAL LOSS (FLOP)

Acceptance of this proposal is subject to the rules & regulations of All India Consequential Loss (Fire) Tariff. The property is not covered until the proposal is accepted and premium paid.

BASIC INFORMATION

Agent/Broker Name

Agent/Broker Code

Agent Mobile Number

Email Address

Name of the Proposer

Address of the Proposer

City State

Pin Code Landline

Mobile Number

Email Address

Policy to be issued in favour of
(List of all the parties who have insurable interest)

Financial Institution Interest
(if any) Attach annexure in case of multiple institutions

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 <input type="checkbox"/>	No <input type="checkbox"/>
Whether Insurance was declined by any other Company or imposed any Special Conditions (Give details)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Insurer Name & Sum Insured under the Fire policy for this risk

Risk Location/s to be Insured – Give complete address with pin code

City: State:

Pin Code: Landline:

Mobile Number

Email Address

Occupancy of the Risk Location

Note – in case of multiple locations please attach annexure indicating risk location addresses and occupancies of each location.

Describe the activities carried out in the premises

Financial Details:

Net Profit

Standing Charges
(name the standing charges to be covered as separate annexure)

Annual Gross Profit

Indemnity period (months)

Basis of Indemnity
(Turnover/Output/ Difference basis)

Sum Insured proposed for Coverage

Who Audits your accounts and what is the Frequency of Audit

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Add-on Covers / Clauses Opted	Required	Sum Insured
Suppliers Extension (please attach annexure in case of multiple suppliers)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Number of suppliers to be covered		
Named/ Unnamed suppliers with location Address		
% of dependency		
Customers Extension (please attach annexure in case of multiple customers)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Number of customers to be cover		
Named/ Unnamed customers with location Address		
% of dependency		
Accidental Failure of Public utilities (Water/ Gas/ Electricity)	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Add-on Covers / Clauses Opted	Required	Sum Insured
Auditors Fee	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Insured's Property Located at other situations	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Wages on Prorate basis (_____ Number of weeks)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Wages on Dual basis (100% for _____ weeks and _____ % for remainder period)	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Premium / Claim details for the past 5 years

Period of Insurance	Premium Paid	Details of Loss	Period of Interruption	Claim Amount

Premium Payment Details:

Kindly select : Cheque DD NEFT Cash

Cheque /DD/ PO /UTR No.

Date IFSC

Amount in Rs. Bank Account No.

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.