

Proposal Form for Stand-Alone Own Damage Policy for Private Car / Two Wheeler

Proposal For: **New Roll-Over Renewal Endorsements**

Period of Insurance: From/.. hrs of .././.... till midnight of .././....

Proposer's Details: (Registered Owner of the Vehicle)

Full Name: Mr/Mrs/Ms/Dr, M/s.....

Dt of birth .././.... or Age ... yrs ; Sex : Male / Female ; Marital Status : Single/Married/Divorced/Widowed

Occupation / Business Educational Qualification PAN No.

Mother's maiden name :

Address for Communication

Door/Bldg No....., Road Name,..... Area City

District..... State Pin Code.....

Tel (Landline) STD code..... Tel No..... Mobile: Fax : STD code..... Fax No.....

E-mail Id:@..... Preferred Mode of Contact

Motor Insurance details / Previous Insurance History

1. Date of Purchase of the vehicle
2. Was it new at the time of purchase?
3. Existing Insurance Details -to
4. Existing Insurance coverage –
5. Existing / Previous Insurance company -
6. Has any Insurance company ever
 - a) Declined the proposal Yes / No
 - b) Cancelled the policy or refuse to renew Yes /No
 - c) Required an increase of Premium Yes /No
 - d) Imposed special conditions or excess Yes /No
7. Please provide the details of claims reported in the past 5 years:

Year	1	2	3	4	5
No of Claims					
Type of Claims	OD/TP	OD/TP	OD/TP	OD/TP	OD/TP
Amount					

Registered Address Of the Vehicle

Door/Bldg No....., Road Name,..... Area City

District..... State Pin Code.....

City where the vehicle will primarily be used :

Have you been previously insured in respect of this vehicle ? Yes No

If so, are you entitled to No Claim Discount (NCB) from your previous Insurer ? Yes No

If Yes, Kindly indicate the percentage 20% ; 25% ; 35% ; 45% ; 50% ; 55% ; 65%

Please provide the name of your previous Insurer

Please Provide the policy Number and its expiry date.....

I/We hereby declare that the rate of NCB claimed by me/us is correct and that NO CLAIM has arisen in the expiring policy period(Copy of Policy enclosed). I/We further undertake that if this declaration is found incorrect, all benefits under the Policy in respect of Section1 of the Policy will stand forfeited

Signature of Proposer.

Are you a Member of any Automobile Association Of India ? Yes No

If Yes, please provide the Membership No and date of expiry.....

About The Motor Vehicle to be Insured

Vehicle Type : 2 Wheeler 4 Wheeler ; Vehicle is : Brand New Used

Make of the vehicle..... Model of the vehicle.....

Type of Body : Sedan/ Hatchback/ SUV/ Saloon / Solo Cubic Capacity: Colour.....

Year of Manufacture of the vehicle

Engine No of the vehicle..... Chassis No of the vehicle.....

Registration No. of the vehicle Registered as Private / Commercial

RTO where the vehicle is / will be registered Date of Registration/New Purchase
.././....

Seating Capacity including Driver,

Fuel Used : Petrol Diesel CNG LPG Electric Hybrid Any Other (Pls specify).....

Is the vehicle fitted with Fibre Glass Fuel Tank ? Yes/No

Is the vehicle fitted with anti-theft device ? Yes/No

If Yes, please provide a)Name of Manufacturer and type of device

b) Whether approved by ARAI , Pune. Yes/No

Is the vehicle designed for use of Blind / Handicapped/ Mentally challenged persons and duly endorsed as such by RTA ? Yes/ No

Whether any modification or conversion has been done in the vehicle from the maker's standard specification ? Yes / No . If Yes, please give details of such modifications/conversions.....

Whether the vehicle is certified as Vintage Car by Vintage and Classic Car Club of India ? Yes/No

Is the vehicle in good state of repair ? Yes/ No . If NO, please furnish details.....

Insured's Declared Value (IDV) of the Vehicle:

The IDV of the vehicle will be deemed to be the Sum-Insured for the purpose of the Policy and will be fixed on the basis of the manufacturer's listed selling price of the brand and model as the vehicle proposed for insurance at the time of commencement of insurance / renewal and adjusted for depreciation as per the schedule specified below.

<i>Age of the Vehicle</i>	<i>% Depreciation</i>
<i>Not exceeding 6 months</i>	<i>5%</i>
<i>Exceeding 6 months but not exceeding 1 year</i>	<i>15%</i>
<i>Exceeding 1 year but not exceeding 2 years</i>	<i>20%</i>
<i>Exceeding 2 years but not exceeding 3 years</i>	<i>30%</i>
<i>Exceeding 3 years but not exceeding 4 years</i>	<i>40%</i>
<i>Exceeding 4 years but not exceeding 5 years</i>	<i>50%</i>

For vehicles more than 5 years of age, please contact the Company for fixing the IDV.

Vehicle Value	Rs.....
Non Electrical Accessories (other than factory fitted)	Rs.....
Electrical Accessories (Other than factory fitted)	Rs.....
<i>(Pls provide the details of such accessories)</i>	Rs.....
Bi-fuel/CNG/LPG Kit	Rs.....
Trailer(s)(Pvt Car)/ Side Car (Two Wheelers) Value	Rs.....
TOTAL IDV	Rs.....

About The Usage of the Motor Vehicle

What will be the Average Daily use of the vehicle?

Less Than 50 Kms ; Between 50 and 100 Kms ; Between 101 to 250 Kms ; Above 251 Kms.

Where will the vehicle be generally driven on ? *(Pls tick multiple, if required)*

Express Way; National Highways; State Highways; City Roads; Town/Village Roads;
 Private Roads;

Will the vehicle be used for Commercial Purpose? Yes/No

Will the vehicle be let out on occasional Hire? Yes/No

Whether the use of the vehicle will be restricted to own premises? Yes/No

Will the vehicle be used for driving tuitions? Yes/No

Whether extension of Geographical Area to the following countries required? Yes /No

If Yes, Pls tick the countries to which the extension is required

Bangladesh, Bhutan, Maldives, Nepal, Pakistan, Sri Lanka

Does the vehicle belong to or used by a Foreign Embassy / Consulate? Yes/No

Is the vehicle Company Maintained? Yes/No

Where will the vehicle be generally parked?

a) During the Day

Roadside Public Parking; Roadside outside Parking; Open Parking Lot; Covered Parking Lot

Locked Covered Garage; Within Enclosed Compound of Residence / Office / Factory.

b) During the Night

- Roadside Public Parking; Roadside outside Parking; Open Parking Lot; Covered Parking Lot
 Locked Covered Garage; Within Enclosed Compound of Residence / Office / Factory.

About the Drivers

The vehicle will be driven by

- Self – The Insured only. Driving Experienceyrs.; Driving License No:
 Self & Spouse. Driving Experience of spouse.....yrs.; Age of spouse.....yrs.; Driving License No:
 Self, Spouse and any other persons named below:

Sr No	Full Name	Relationship with proposer	Age/DOB	Driving Experience	Driving License No
1					
2					
3					

About The Coverage Required

- Do you want to cover loss of accessories due to burglary, housebreaking or theft? (*Applicable only for Two-Wheelers*) Yes/No
- What is the Deductible you wish to opt for?
 - Standard Minimum Deductible (*Std Min Deductible is Rs 50/- for two wheelers, Rs 500/- for Pvt Cars with CC upto 1500 and Rs 1000/- for Pvt Cars above 1500 CC from each and every claim*)
 - Rs 2,500/- + Standard Minimum Deductible
 - Rs 5,000/- + Standard Minimum Deductible
 - Rs 7,500/- + Standard Minimum Deductible
 - Rs 15,000/- + Standard Minimum Deductible.

I hereby agree to the above ticked deductible to be applied on each and every claim I lodge on the Company.

Signature of Proposer.

- Is there any Hypothecation / Hire Purchase / Lease Interest to be noted in the Policy? Yes / No
If Yes, Kindly provide the details for the same.....
- Do You wish to Opt for any of the below mentioned Add-On's by paying additional Premium?
 - Re-imbursement of Depreciation deducted as per Policy from own damage claims? Yes / No
(*Cover is available for vehicles upto 5 years of age*)
 - Return to Invoice in case the vehicle meets with total loss within the first 2 years of manufacture Yes / No
 - Do you wish to cover Tyres? Yes / No
 - Do you wish to Cover Consequential Damage to Engine (Private Cars Only) Yes/ No
 - Do you want to protect your NCB in case of a single accident in the Policy period? Yes / No
 - Do you want to cover for key replacement? Yes / No
 - Do you wish to cover inconvenience allowance for loss of use of insured vehicle upto 10 days? Yes / No
 - Do you wish to cover loss of personal belongings from the vehicle? Yes / No
 - Do you wish to cover Loss of Driving License / Registration Certificate? Yes / No
 - Do you wish to cover EMI Protector? Yes / No

Private Car - Benefit Option < 21 days 21 to 45 days 46 to 75 days > 75 days
 Two Wheeler - Benefit Option < 15 days 15 to 45 days 46 to 75 days > 75 days

- k) Do you wish to cover Additional Towing Expense? Yes / No
- l) Do you wish to cover No Blame Bonus? Yes / No
- m) Do you wish to cover Windshield Protection?(Private Car Only) Yes / No
- n) Do you wish to cover New Vehicle Replacement? Yes / No
- o) Do you wish to cover Rim? Yes / No
- p) Do you wish to cover Consumables expenses? Yes / No
- q) Do you wish to cover Inability to Drive due to Injury? Yes / No
 Benefit per day 300 500 1000
- r) Do you wish to cover Additional Personal Accident? Yes / No
- s) Do you wish to cover Medical expenses? Yes / No
 Option 1 Option 2
- t) Do you wish to cover Helmet (Two Wheeler only) Yes / No
- u) Do you wish to cover Protective Clothing (Two Wheeler Only) Yes / No
- v) Do you wish to Cover Basic Road-Side Assistance? Yes / No
- w) Do you wish to Cover Additional Road-Side Assistance? (Private Car Only) Yes / No

Previous Insurance History

- 8. Date of Purchase of the vehicle
- 9. Was it new at the time of purchase?
- 10. Has any Insurance company ever
 - e) Declined the proposal Yes / No
 - f) Cancelled the policy or refuse to renew Yes / No
 - g) Required an increase of Premium Yes / No
 - h) Imposed special conditions or excess Yes / No
- 11. Please provide the details of claims reported in the past 5 years:

Year	1	2	3	4	5
No of Claims					
Type of Claims	OD/TP	OD/TP	OD/TP	OD/TP	OD/TP
Amount					

Declaration:

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 any additions or alterations carried out after the submission of this Proposal Form would be conveyed to MAGMA HDI General Insurance Co. Ltd immediately.

Place

Date

Signature Of Proposer

INSURANCE ACT 1938, SECTION 41 – PROHIBITION OF REBATES

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