

FORM II**KARNATAKA GOVERNMENT INSURANCE DEPARTMENT**

Vishweshwaraiah Main Tower, 16th Floor, Dr. Ambedkar Veedhi, Bangalore - 560 001
 Phone : 22868 114/ 115 Fax : 22867575

**PROPOSAL FORM FOR COMMERCIAL VEHICLES
 PACKAGE POLICY AND LIABILITY ONLY POLICY**

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

Proposer's (Owner's) Full Name :

Address (address where vehicle is normally kept and used) :

Pin Code Tel No. Fax No. Email :

Occupation / Business :

Type of Cover required : Liability Only Policy / Package Policy / Others (Specify)

Period of Insurance : Form to

1. Registration No. and Date of Registration of the Vehicle		2. Registering Authority & Location	
3. Year of Manufacture	4. Engine No.	5. Chassis No.	6. Make of Vehicle
7. Type of a) Body		8. Gross Vehicle Weight (GVW) / Cubic capacity (C/C)	
b)		/	
9. Max. licensed Carrying Capacity (No. of Passengers) in case of Passenger carrying vehicles ? Yes / No.			
10. Whether extension of geographical area to the following countries required ? 1. Bangaldesh 2. Bhutan 3. Maldives 4. Nepal 5. Pakistan 6. Srilanka If 'Yes' state the name of the countries 1..... 2..... 3..... Yes / No.			
11. Whether use of vehicle is driven by non-conventional source of power ? If Yes, please give details Yes / No.			
12. Whether the vehicle is used for driving tuitions ? Yes / No.			
13. Whether the use of vehicle is limited to your own premises ? Yes / No.			
14. Whether the commercial vehicle is also used for Private Purpose ? (excluding use for hire or reward) Yes / No.			
15. Whether the vehicle belongs to foreign embassy / consulate ? Yes / No.			
16. Whether vehicle is designed for use of Blind / Handicapped / Mentally Challenged persons and duly endorsed as such by RTA? . Yes / No.			
17. Whether the vehicle is fitted with fibre glass tank ? Yes / No.			
18. Are you entitled to No Claim Bonus ? If yes, please submit proof thereof/ Yes / No.			

19.	Is the vehicle fitted with the any Anti-theft device approved by the AARI. Pune ? If yes, attach Certificate of Installation in the Vehicle issued by Automobile Association of India.	Yes / No								
20.	Liability to Third Parties <i>The policy provides Third Party Property Damage (TPPD) of Rs. 1 Lakh (Two wheelers) and Rs. 7.5 Lakhs (other class vehicles)</i> Do you wish to restrict the above limits to statutory : TPPD Liability, limit of Rs. 6000/- Only ?	Yes / No								
21.	Do you wish to cover Legal Liability to ? A) Driver / Conductor / Cleaner (No. of persons)] B) Other Employees (No. of persons)] C) Non fare paying passengers (No. of persons)]	Yes / No Yes / No Yes / No								
22.	Do you wish to include personal accident (P.A.) Cover for paid drivers Cleaners and Conductors ? If yes, give name capital sum insured (CSI) opted for, The Maximum CSI available per person is Rs. 1 Lakh in the case of Motorised 2 Wheelers and Rs. 2 Lakhs for other classes of vehicles	Yes / No.								
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: left;">Name</th> <th style="width: 50%; text-align: left;">CSI Opted (Rs)</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td></tr> <tr><td>2.</td><td></td></tr> <tr><td>3.</td><td></td></tr> </tbody> </table>			Name	CSI Opted (Rs)	1.		2.		3.	
Name	CSI Opted (Rs)									
1.										
2.										
3.										
23.	Do you wish to include (P.A.) Cover for unnamed persons / hirer / pillion riders (two wheelers) ? If yes, give number of persons and Capital Sum Insured (CSI) opted. The maximum CSI available per person is Rs. 1 Lakh in the case of Motorised two wheelers and Rs. 2 Lakhs for other classes of vehicles	Yes / No.								
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24. Insured's Declared Value										
Insured's Declared value of Vehicle Rs	Non-electrical accessories fitted to the vehicle Rs.	Electrical and electronic accessories fitted to the vehicle Rs.	Side car (Two wheeler) Trailer (Pvt cars) Rs.	Value of CNG / LPG KIT Rs.	Total Value					

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

32. Details of drive : (a) Age Owner Driver Others

(b) Does the driver from defective vision or hearing or any physical deformity Yes / No.

If 'yes' please give details

(c) Has the driver ever been involved / convicted for causing any accident or loss ?

If yes, please give details as under including the pending prosecution, if any ;

Driver's Name	Date of Accident	Circumstances of Accident / Claim	Lost / Cost Rs.

33. Any other relevant information :

Declaration by Insured

I / We here by declare that the statement made by me / us in this proposal from are true to the best of my / our knowledge and belief and I / we here by agree that this declaration shall from the basis of the contact between me / us and the Karnataka Government Insurance Department.

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

Received a copy of the proposal form duly filled and signed by me / on my behalf

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 of property in India, any rebate of the whole or part of the commission payable rebate except such rebate as may be allowed in accordance with the prospectus or table of the insurer.
2. Any person making default in complying in with the provisions of this section shall be punishable with fine, which may extend to five hundred Rupees.