

Proposal for Jana Ratha Vehicle Insurance

Please note that no cover is in force until confirmed by the Company in writing and the premium paid. Please complete in **BLOCK CAPITALS** throughout and **TICK BOXES** where appropriate.

Name	
Code No	

1. YOU THE PROPOSER

(a) Full Name (with initials) or Trading Name of Proposer

(b) Age

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(c) Postal Address

(d) Tel / Fax / E-mail :

Home Telephone

Office Telephone

Mobile

E-mail

Fax

2. COVER REQUIRED(a) Comprehensive (b) Third Party Fire & Theft (c) Third Party Only (d) Cover Required From - Day Month Year To - Day Month Year **3. YOUR VEHICLE**(a) Registration No. (b) What is the vehicle Registered as? (c) Date of first registration-Day Month Year

(d) Make		(g) Type of Body		(j) Estimated Value *	
(e) Model		(h) Year of Make		(k) Fuel used	
(f) Chassis No.		(i) Cubic Capacity/Tonnage		(l) Registered Seating Capacity	

* The Estimated Value should be the present market value of your vehicle. The Contract will be voidable in the event of understatement of value.

(m) Extra fittings (See Note 1) (n) Are you the **Owner** of the vehicle? (o) Registered Owner's name. (p) Is this vehicle at present free of accidental or other damages? If 'NO' please give all details on a separate sheet of paper and attach.**4. THE DRIVERS**(a) Do you or any person who will drive this vehicle suffer from defective vision, hearing, any infirmity or physical defect and/or been refused, had their Motor policy cancelled (or special terms imposed) and/or been convicted of any offence, had any accidents, losses or claims during the past 5 years? If your answer is 'YES', Please give all details below.

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5. YOUR VEHICLE'S ACTUAL USE (PLEASE STATE ALL USES IF MORE THAN ONE)(a) Social Domestic & Pleasure purposes (b) Hiring (c) Carriage of Goods (d) SLTB Route (e) Rented on self-drive basis (f) Agricultural purposes (g) Carriage of Passengers (h) Driving Tuition (i) Other **6. DISCOUNTS/ADDITIONAL COVERS**(a) Name & address of firm or individual having any **Financial interest** on this vehicle. Please also state nature of interest .

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(b) Do you wish to bear a **Voluntary Excess** on your claim ? Yes No (If Yes) Rs 500/- Rs 750/- Rs 1000/- (c) 1. If you are a member of the **Automobile Association** please state Membership No. 2. Expiry Date.

(d) Is this vehicle the only one you own & insure with us? Yes No If 'No' please give all details on a separate sheet and attach.

(e) If you require **Personal Accident** cover, please stipulate amount in slabs of Rs. 25,000/-
Cover will be provided on the full seating capacity of the vehicle for Death & Permanent Disability only. Rs.

(f) Do you wish to cover damage to **Goods by accident** caused to the vehicle? If 'Yes' please state all types of goods which will be carried in the vehicle and the maximum value at any one time. (Cover is applicable to goods carrying vehicles only.) **See Notes 3 & 4.**

Rs

(g) If you wish to cover your **Legal Liability to Passengers** please state amount you require per passenger.
(Applicable only to Commercial vehicles) - Rs 10,000/-, 20,000/-, 50,000/-, 100,000/-, 200,000/-, 500,000/- Rs.

(h) Are you entitled to a '**No Claim Bonus**'? If 'Yes' please attach latest renewal notice / certificate from previous insurer.

(i) **Workmen's Compensation** Insurance for Driver Cleaner Attendant Labourer

(j) Increased **Towing Charges** Rs 1000/- Rs 2500/- (j) **Hiring Exclusions**
(See Note 2)

(k) If you wish to cover damage to **Windscreen/Windows** in order to protect your no-claim bonus, please state value. Rs.

(l) Do you require increased **Third Party Property Damage** cover? Commercial Vehicle & Motor Cycle Policies are limited to Rs. 15,000/- only. Please state amount you require. (from Rs. 100,000/- upto Rs. 500,000/-) Rs.

(m) If you or any person will **LEARN TO DRIVE** this vehicle, please give name & date of birth.

(n) Has this vehicle been imported **Duty Free** or with **Duty Concessions**? (o) **Flood Cover**

(p) **Strike, Riot, Civil Commotion** (q) **Terrorism**(limited to Rs 5 Million) (r) **Terrorism on full Value**

NOTES.

1. **Extra Fittings** - Items such as Airconditioners, Radio/cassettes, Aerials, Hood-racks, fog lamps, Sunvisors, Rim-embellishers. etc, are additional fittings, and are not covered unless specially declared. Also indicate if vehicle is equipped with Alloy Wheels, Power Steering/Power operated Windows, or Mirrors, Sun Roof etc.
2. **Exclusions** - Lights, tyres, mudguards, paint work, buffers, buffer brackets, buffer aprons etc. are excluded on the comprehensive cover for vehicles used for Hire. This could be included at extra premium subject to an excess of Rs. 1,000/-.
3. **Hazardous Goods** are Chinaware and Earthenware, Glassware, Clocks and Watches, Jewellery, Electrical Appliances/Parts, Livestock, Furniture, Ornaments, Pictures, Prints or Drawings, Scientific Instruments, Wine and Spirits, Goods in Glass containers.
4. **Extra Hazardous Goods** are Fibre, Waste Cotton, Waste Paper, Kapok, Petroleum, Inflammable Liquids, Gases, Explosives, Fish, Crabs, Prawns and the like, perishables.

Very Important

YOU ARE REMINDED OF THE NEED TO DISCLOSE ANY FACTS WHICH THE INSURER WOULD TAKE INTO ACCOUNT IN THE ASSESSMENT AND ACCEPTANCE OF THIS PROPOSAL. IF YOU HAVE ANY DOUBTS AS TO WHETHER CERTAIN FACTS ARE RELEVANT, PLEASE ASK YOUR INSURANCE BROKER OR AGENT OR JANASHAKTHI OFFICE. FAILURE TO DISCLOSE ALL RELEVANT FACTS MAY INVALIDATE YOUR POLICY OR MAY RESULT IN YOUR POLICY NOT OPERATING FULLY.

DECLARATION

I/We declare that the information given in this Proposal is to the best of my/our knowledge and belief correct and complete in every detail, and will be the basis of the contract between me/us and Janashakthi Insurance Co. Ltd.

Day Month Year

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Proposer's Signature

FOR OFFICE USE

Rated By	Processed By	Credit Approved By	
Rate Approved By	Authorised By	Authorised Date	