

Proposal Form for Reliance Standard Fire & Special Perils Policy

(Acceptance of this proposal is subject to the rules & regulations of Tariff Advisory Committee's All India Fire Tariff)
(The property proposed for insurance is not covered until the proposal is accepted and premium paid.)

Intermediary Details (To be filled in BLOCK CAPITALS)

Intermediary Name Code
Branch Name Code
Sales Manager Name Code

Proposer's Details (To be filled in BLOCK CAPITALS)

1. Proposer's Full Name ☐ Mr. ☐ Ms. ☐ Mrs.
2. Address of Communication
Flat Building Road/Street/Sector
Area
Taluka/Village/District/City Pin Code State
Country Phone
Mobile Email
Fax
3. Business of the Proposer
4. Paid up Capital of the Company
5. Policy to be issued in favour of (list out all the parties who have insurable interest including the financial institutions)
a. b.
c. d.
6. Financial Interest
7. Location of Risk to be Covered
Flat Building Road/Street/Sector
Area
Taluka/Village/District/City Pin Code State
Country Phone
Mobile Email
Fax
8. Add on cover required? ☐ Earthquake ☐ Terrorism
9. Whether you have insured the same Property with any other insurance company with the same type of coverage (Please give details)

Details about Property covered at the insured location

10. Type of Insured Property

Dwelling	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Offices	<input type="checkbox"/> Yes	<input type="checkbox"/> No
BPO	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Libraries	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Schools/Colleges	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hospitals/Nursing Home/Diagnostic Centres	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Display Centres	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Auditoriums	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cafe, Restaurants, Hotels	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shops	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Amusement Parks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sports Galleries, Outdoor Stadiums	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Motor Vehicle Showrooms including sales and service	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Others (If others, please specify the type of Property)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

11. Is the Property to be insured under construction ☐ Yes ☐ No

12. Fire Protection devices installed (Please Tick in the box below)

a) List out the various blocks and indicate the type of protection provided for each block		
b) Indicate whether annual maintenance contract for the appliances is in force	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Portable Extinguishers	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Trailer Pumps	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Fire Engine	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Hydrant System	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Sprinkler System	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Fixed Water Spray System	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Foam Systems	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Fire Alarm Systems	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Gas Flooding Systems	<input type="checkbox"/> Yes	<input type="checkbox"/> No

13. Construction details

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 "Kutchha" construction.

a) Please specify whether you have used any of the mentioned materials in the above note in		
Wall	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Floor	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Roof	<input type="checkbox"/> Yes	<input type="checkbox"/> No

b) Height of Building _____ Meters

c) Age of Building ☐ Less than 5 years ☐ 5-10 Years ☐ 10-20 Years ☐ Above 20 Years

14. a) Is the property to be insured situated at the basement? ☐ Yes ☐ No

b) Is the surrounding public road at higher elevation? ☐ Yes ☐ No

15. Any incidence of flood/inundation in the past 3 years? If yes, please give the relevant details ☐ Yes ☐ No

Declaration by Insured

I/We hereby declare and warrant 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 Reliance General Insurance Company Limited. In any additions/alterations are carried out in the risk proposed after the submission of this proposal form then the same shall be conveyed to the Reliance General Insurance company Limited immediately

Place: _____ Date: _____

Signature of Proposer

Recommendations of the Agent _____

Note : If the proposer omits to give full information or gives false information in reply to any question, the policy proposal will be voidable at the instance of the company

Prohibition of rebates - Section 41 of The Insurance Act 1938

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 published prospectuses 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 Rs. 500/-

For office use only

☐ Cheque

Cheque Amount _____ /- Amount in words (_____)

Bank Name _____

Cheque No. _____ Cheque Date _____