

**KIWI GENERAL INSURANCE LIMITED****KIWI CAR INSURANCE****POLICY DETAILS**

Policy Type: <Package/Bundle/SAOD>
Business type: <New/Rollover/Renewal/Endorsement/Used>
Own damage: From: <DD/MM/YYYY> To the Midnight of: <DD/MM/YYYY>
Third party From: <DD/MM/YYYY> To the Midnight of: <DD/MM/YYYY>
Personal Accident Opted: <Yes/No>
Reason for Personal Accident Opt Out: <Insured has Standalone PA cover>=15L or Non Individual or No Valid DL>
Personal Accident Cover: From: (DD/MM/YYYY) To the Midnight of: (DD/MM/YYYY)

**CUSTOMER DETAILS**

Customer is: &lt;Individual/Non-Individual&gt;

Customer is PEP?: &lt;Yes/No&gt;

Note: Politically Exposed Persons” (PEPs) are individuals who are or have been entrusted with prominent public functions domestically/in an international organisation/in a foreign country. This would include individuals who have or had positions of Heads of States or Government, Senior Politicians, Senior Government or Judicial or Military officers, Senior Executives of State-Owned Corporations and important Political Party Officials

Company name <i>(in case of Non-Individual)</i> :
Residential address <i>(in case of Non-Individual)</i> :
Title: <Title>
Name: <Name>

Gender: <Gender>
Nationality: <Nationality>
Current address: <Current address>
Mobile number: <Mobile number>
PAN: <PAN>
Email ID: <Email ID>
CKYC no.: <CKYC no.>
Bank A/c no: <Bank A/c no>
Bank name: <Bank name>
Bank IFSC code: <Bank IFSC code>
Bank address: <Bank address>
GSTIN (if applicable): <GSTIN>

**NOMINEE/APPOINTEE DETAILS**

Name and Relationship	Type	Date of Birth	Percentage of Nomination	Mobile no.	Email id	Address	Bank Details
<Name and Relationship p>	<Type >	<DD/MM/YYYY>	<%>	<Mobile No.>	<Email >	<Address >	<A/c No.> <IFSC> <Branch > <Name>

**INTERMEDIARY DETAILS**

Name	<Name>
Email	<Email>
Mobile No.	<Mobile no.>
Intermediary Code	<Code>
POSP PAN	<PAN>
POSP Aadhar	<Aadhar>

**PREVIOUS INSURER DETAILS**

Previous Insurer	<Name>
Previous Policy No.	<Policy No.>
Previous Policy Expiry	<DD/MM/YYYY>
Previous Policy Type	<Type>
Previous NCB	<%>

Any claim taken in previous policy: <Yes / No ; If Yes, input number of claims>

No. of claims taken for OD Only: <No. of claims taken>

**Existing Liability Only Policy Details (Applicable only for SAOD)**

Insurer Name	<Name>
Policy No.	<Policy No.>
Expiry Date	<DD/MM/YYYY>

**VEHICLE DETAILS**

Vehicle number: <Vehicle number>
Engine number: <Engine Number>
Chassis number: <Chassis Number>
Is Vehicle new or second hand at the time of purchase: <New/Second hand>
Make: <Make>
Model / Variant: <Model / Variant>
NCB Reserving: <%>
Seating capacity: <Seating Capacity>
Manufacturing month and year: <Manufacturing month and year>
1st Purchase date: <>
Fuel type: <>
Date of registration: <>

RTO location: <>
Body type: <>
Colour of vehicle: <>
Insured GSTIN: <>
Applied NCB/Super NCB: <>
Ownership change in the last 12 months?: <Yes/No>
If Yes, whether name change effected in expiring policy: <Yes/No>
Ownership serial number: <>
Is the vehicle under: <Hypothecation/Lease agreement/Hire purchase>
Financier name: <>
Loan account no.: <>

**IDV DETAILS**

Year	Year 1	Year 2	Year 3
Vehicle IDV	INR <Amount>	INR <Amount>	INR <Amount>
Bi-fuel Kit (CNG/LPG)	INR <Amount>	INR <Amount>	INR <Amount>
Electric Accessories IDV	INR <Amount>	INR <Amount>	INR <Amount>

Non-Electrical Accessories IDV	INR <Amount>	INR <Amount>	INR <Amount>
Trailer IDV/ Side Car IDV	INR <Amount>	INR <Amount>	INR <Amount>
Total	INR <Amount>	INR <Amount>	INR <Amount>

**INSURED DECLARED VALUE CALCULATION SCHEDULE**

Age of the Vehicle	% of Depreciation for Fixing IDV
Not exceeding 6 months	5%
Exceeding 6 months but not exceeding 1 year	15%
Exceeding 1 year but not exceeding 2 years	20%
Exceeding 2 years but not exceeding 3 years	30%
Exceeding 3 years but not exceeding 4 years	40%
Exceeding 4 years but not exceeding 5 years	50%

*Note: For obsolete vehicle models and vehicles over five years old, the IDV will be decided based on a mutually agreed percentage between the Insurer and the Insured.*

**COVERAGES OPTED**

Base Covers	Limits
Loss Or Damage To The Vehicle (Own Damage)	Up to IDV
Liability To Third Parties	Bodily Injury: Unlimited Property Damage: Up to INR 7,50,000
Personal Accident Cover For Owner-Driver	INR 15,00,000 per year
Optional Covers	Limits
Zero Depreciation Cover	Opted for per year.
Return to Invoice	Opted.
Consumables Cover	Opted. Up to IDV
Preferred Garage Cash	INR _____ per claim
Repair Safeguard	Opted for 1 Claim in a year.
Owner Driver Accident Cover Booster	INR _____ Per Year.
Passenger Accident Cover Booster	INR _____ Per Year per individual. For a maximum individuals as per seating capacity.
Towing Booster	Up to INR _____ per event.

Flexi Repair	Offered Up to IDV
Super No Claim Bonus (Super NCB)	Opted.
Personal Belongings Cover	Up to INR < _____ > per year.
Engine Secure	Opted. Up to IDV
Tyre Secure	Up to 4 tyres per year.
Rim Secure	Up to IDV. For a maximum of 4 rims in a year.
Cyber Secure	Up to INR _____ Per Year.
Key Secure	Up to INR < _____ > per year.
Fuel Mix-Up Cover	Up to INR _____ per event for maximum 5 claims in a year.
Re-Coat Cover	Up to INR _____ per year
Emergency Travel & Stay	Up to INR < _____ > per year.
InstaCash	<p>INR _____ per day for a maximum of _____ days. in a year. Deductible of _____ days.</p> <p>Total Loss, Constructive Total Loss or Theft: INR _____ per day for a maximum of 15 days in a year. Deductible of _____ days.</p>

Roadside Assistance	Opted.
Accident OPD Cover	Up to INR _____ per year.
Accident Hospital Cover	Up to INR _____ per year.
HospiCash	INR _____ per day of hospitalization. INR _____ per day of ICU hospitalization. For a maximum of 30 Days in a year.
EV-Battery Secure	Up to IDV. Maximum 1 Claim per year.
EV Charger Secure	INR _____ per year for charger Repair & Replacement. INR _____ per event for Charging Expenses.
EV Charger-Liability Cover	Up to INR _____ Per Year.
EV Charger-Home Secure	Up to INR _____ Per Year.
Legal Assist	Up to INR _____ per year. Up to INR _____ per event for miscellaneous expenses.
Pay As You Drive	Opted for Upto _____ Kms in the Policy year.
Extension of Geographical Area (IMT 1)	Geographical Extension to

Discount for membership of recognised automobile associations (IMT 8)	Opted & discount applied
Discount for vintage cars (Applicable to Private Cars only) (IMT 9)	Opted & discount applied
Vehicles laid up ( Lay-up period declared ) (IMT 11A)	No. of Days Declared _____
Vehicles laid up ( Lay-up period not declared ) (IMT 11B)	No. of Days Declared _____
Termination of the undeclared period of vehicle laid up (IMT 11C)	Removal of suspension as declared to RTO and updated in RC.
Discount for specially designed/modified vehicle for the blind, handicapped and mentally challenged persons (IMT 12)	Opted & discount applied
Use of Vehicle within Your own premises (IMT 13)	Opted & discount applied
Personal Accident cover to You or any named person other than paid driver or cleaner (IMT 15)	INR _____
Personal Accident to Unnamed Passengers other than You and the Paid driver and Cleaner (IMT 16)	INR _____ per person for individuals
Personal Accident cover to paid drivers and cleaners (IMT 17)	INR _____ per person for individuals
Cover for imported vehicles without customs duty (IMT 19)	INR _____
Reduction in the limit of Liability for Property damage (IMT 20)	Restricted to INR 6000. Discount Applied.
Voluntary Deductible (IMT 22A)	Percentage of Claim amount: _____ %

	Over and above compulsory deductibles.
Electrical /Electronic fittings (Items fitted in the vehicle but not included in the manufacturer’s listed selling price of the vehicle) (IMT 24)	INR _____
CNG/LPG Kit in Bi-Fuel System (Own Damage cover for the kit) (IMT 25)	INR _____
Fire and/or Theft risks only (IMT 26)	Opted
Liability and Fire and/or Theft (IMT 27)	Opted
Legal Liability to paid driver and/or conductor and/or cleaner employed in connection with the operation of the insured vehicle (For all Classes of vehicles.) (IMT 28)	Opted
Trailers (IMT 30)	Opted
Reliability Trials and Rallies (IMT 31)	Opted
Accidents to Soldiers, Sailors, Airmen employed as drivers (IMT 32)	Opted

**DECLARATION BY THE PROPOSER**

I / We declare that the information provided in this Proposal Form, including the attached documents, is true and correct to the best of my / our knowledge and belief, and that no material fact affecting the risk has been concealed. This declaration shall form the basis of the insurance contract with Kiwi Insurance.

I / We declare that any addition, alteration or modification carried out in the vehicle or in any of the documents furnished or forming part of this Proposal Form during the currency of the policy shall be intimated to the Insurer immediately in writing, failing which the same shall be treated as a breach of the contract and my / our rights thereunder shall stand forfeited, irrespective of whether such change is material to the loss or liability.

I / We declare that I / we will comply with the Motor Vehicles Act, 1988 and all rules and amendments made thereunder.

I / We declare that I / we shall inform the Insurer in the event the vehicle is requisitioned by the Government during the currency of the Policy, in accordance with GR-38 of the India Motor Tariff.

I / We declare that the vehicle proposed for insurance has a valid PUC certificate and, where applicable, a valid Fitness Certificate on the date of policy issuance or renewal.

I / We also declare that this vehicle shall be handed over to the Driver only after due verification of genuinity and effectiveness of his Driving Licence to drive this vehicle.

I/We hereby declare that the No Claim Bonus (NCB) rate claimed by me/us is true and correct. I/We further undertake that, in the event this declaration is found to be incorrect, all benefits under Section 1 of the Policy shall stand forfeited.

I / We hereby declare that I / we am / are willing to accept a policy of insurance issued by the Company in its usual form.

I / We hereby declare and confirm that there is no other Package or Liability insurance policy currently in force or subsisting in respect of the vehicle proposed for insurance.

I/We acknowledge that, for the purpose of underwriting and servicing the policy, the Company may need to share and verify the information provided by me/us with rating agencies, third parties, or service providers. I/We hereby authorize the Company to undertake such sharing and verification as required.

I/We confirm that the proposal form and all related documents have been explained to the proposer in the language understood by the proposer. The proposer has confirmed that he/she has understood the contents, the questions asked, and the terms and conditions, and has agreed to abide by the same. I/We further confirm that the answers recorded are true and correct as stated by the proposer, and that any thumb impression/signature has been affixed after understanding the contents of the form. I/We understand that this declaration does not mean that the policy has been issued or that risk has been accepted by the Company.

I want to avail Policy in: <Physical/Soft copy>

Place: <>

Date & Time: <>

LTI / Signature of proposer: <>

Name of witness with signature: <>

*N.B.: I / We am / are affixing my / our signature(s) after having understood the above contents incorporated in this Proposal Form, which have been read over to me / us and are true and in accordance with my / our statements.*

I want to pay by: <Cheque/Credit/Debit card/Cash/Others>

**VEHICLE INSPECTION REPORT – IN CASE OF BREAK IN INSURANCE (FOR OFFICE USE ONLY)**

Vehicle no: <>
Engine & chassis no: <>
Odometer reading: <>
Place of inspection: <>
Condition of the vehicle and damages (if any): <>
If any photograph available for reference, specify no. of photographs: <>
Signature of the inspection authority: <>
Place and date and time: <>
Name & designation: <>
Nominated underwriter signature with date and name: <>

**DECLARATION BY THE AGENT**

I, the Agent / Broker Qualified Person / Point of Sale Person, hereby declare that I have explained all the contents of this Proposal Form to the Proposer, including the nature and significance of the questions contained herein. I have also explained that the statements, information and responses furnished by the Proposer in this Proposal Form shall form the basis of the Contract of Insurance between the Company and the Proposer, subject to acceptance of this Proposal by the Company and issuance of the Policy. I further confirm that I have explained to the Proposer that in the event any statement, information or response contained in this Proposal Form, including any addendum(s), affidavit(s), statement(s) or submission(s) furnished or to be furnished, is found to be untrue or incorrect, the Company shall have the right to cancel the Policy at its discretion. I further clarify that this declaration does not constitute confirmation of issuance of the Policy or assumption of risk by the Company. I hereby confirm, to the best of my knowledge and belief, that there is no inconsistency, adverse habit or material fact affecting the underwriting of this Proposal, except as disclosed below: (To be filled only if any disclosure is required)

Signature of agent: <>

Name of the person & code: <>

Licence no.(Intermediary/Corporate Agent/Broker/Relationship Officer): <>

Place & date: <>

### **AML GUIDELINES**

I/We declare that all premiums paid or to be paid under this policy are from lawful sources and are commensurate with my/our income. I/We understand and agree that the Company may request documents to verify the source of funds and may cancel the policy if I/We are found guilty by a competent court under any applicable anti-money laundering laws in India.

### **INSURANCE ACT 1938, SECTION 41 – PROHIBITION OF REBATES**

No person shall, either directly or indirectly, offer or allow any rebate of the whole or part of the commission payable, or any rebate of the premium stated in the Policy, as an inducement to any person to take out, renew, or continue any insurance in respect of any kind of risk relating to life or property in India. Likewise, no person taking out, renewing, or continuing a Policy shall accept any such rebate, except as permitted in accordance with the published prospectus or tables of the insurer. Any person who fails to comply with the provisions of this section shall be liable to a penalty, which may extend up to Ten Lakh Rupees.