







M/S AKUTAI KALYANI CHARITABLE TRUST SR NO 12/1A/1,12/1A/2, 12/1A/2/2,12/AC/12/3A & 13/3 MANJRI **PUNE** MAHARASHTRA India - 412307

From here on, you're our responsibility.

Welcome on board. Your Reliance Commercial Vehicles (Passengers Carrying 4W>6 & 3W>17) Package Policy -Schedule, with Policy Number 170122523400000314 is now live to access your policy anytime, anywhere download our Reliance Selfi App and enjoy a host of special features.



My Policy

Attach, Access or Download your policy



Claim Status

Register, Track or Submit claim documents



Locator

Go cashless, Tap and spot from amongst 5000+ network garages.



Video Claim Assistance

Intimate claims instantly through live video streaming.

Click here to download

Customer Information Sheet (CIS)

Now live Smart With Reliance general Insurance.

Tech+

Best Regards,





reliancegeneral.co.in



022 4890 3009 (Paid) (S)



74004 22200 (WhatsApp)

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company





Reliance Commercial Vehicles (Passengers Carrying 4W>6 & 3W>17) Package Policy - Policy Schedule Important

- 1) The validity of this certificate of Insurance cum policy is subject to realization by the company of the premium cheque paid by the Insured.
- Except as provided in GR 27 Rule (g) of Erstwhile Indian Motor Tariff (i.e. Sale of Vehicle), No NCB will be allowed when a policy is not renewed within 90 days of
 its expiry.

Policy Number : 170122523400000314			Proposal/Covernote No: R01022505899			
Insured Name: M/S AKUTAI	KALYANI CHARITABLE TRUST		Period of Insurance: From 00:00 Hrs of 16-Feb-2026	on 17-Feb-2025 to	Midnight of	
	'lace of Supply: SR NO 12/1A/1 ANJRI PUNE, MAHARASHTRA,		Policy Issuing Branch: A Block, Heritage House, Ground floor, 6 Ramabai Ambedkar Road, , PUNE, MAHARASHTRA, 411001.			
Mobile No: 9326*****			Tax Invoice No. & Date: R01022505899	9 & 02 Feb 2025 06	:27	
Email-ID: NA	C		GSTIN/UIN & Place of Supply : MAHA	ARASHTRA		
Insured Vehicle Details						
Registration No.	MH12SF6423	10	Mfg. Month & Year	7,36	JAN-2020	
Make / Model & Variant	EICHER 10.50 D BUS		CC / HP / Watt	173	3298	
Engine No. / Chassis No.	E414CDLA316918 / MC2A1DR	T0LA460965	LCC Including Driver	17	23	
Type of Body	NA		Total Premium `	100	34314	
RTO Location	MAHARASHTRA - Pune		Total IDV `	000	530,000.00	
Manufacturer fully build in	Yes		Hypothecation/Lease	08	NA	
Vehicle Category	Bus		Vehicle Usage Type	7	Contract Carriage	
Vehicle Usage Sub Type	School Bus	3-40	.0			
Insured Declared Value (IDV)						
Chassis IDV	-0"	0.00	Non Electrical Accessories	100	0.00	
Body IDV `	20	0.00	CNG / LPG Kit	16	0.00	
Vehicle IDV	C)	530,000.00	Trailer / Side Car	- 18 M	0.00	
Electrical / Electronic Accessor	ries `	0.00	Total IDV	100	530,000.00	
Premium Summary						
Own Damage - Section I		Amount (`)	Liability - Section II		Amount (`)	
Basic OD		461.34	Basic Liability (TPPD 1)		28,582.00	
Covers for Lamps Tyres/Tubes N	Mudguards/Bonet/Side		Total Basic Liability Premium		28,582.00	
parts etc (IMT-23)		69.20	PA Benefits - Section III			
Total Basic Own Damage Prem	iium	530.54	Legal Liability to paid driver and/or Conductor and/or			
Less			cleaner		100.00 28,682.00	
		-132.64				
Sub Total of Deductions		-132.64	TOTAL PACKAGE PREMIUM (Sec I +	11 + 111)	29,080.00	
			CGST (@9.00%) SGST (@9.00%)		2617.00 2617.00	
TOTAL OWN DAMAGE PREM	IIUM	398.00				

Subject to I.M.T.Endt.Nos. & Memorandum printed/herein/attached hereto. IMT 40,23,21

GSTIN: 27AABCR6747B1ZG

TOTAL PREMIUM PAYABLE (`)

HSN: 997134, Description of services: Motor vehicle Insurance Service

"As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 31st October of the next financial year."

Consolidated Stamp duty Paid vide Letter of Authorisation "NO LOA/ENF-1/CSD/05/2025/(Validity Period Dt. 27/01/2025 to Dt. 01/12/2026)/424 Date 24-01-2025" at General Stamp Office, Mumbai. ** Not Applicable for the State of Jammu & Kashmir.

23P68356 / SAMADHAN RANSHUR 9326689009 sujittolage@gmail.com *****907E

Intermediary Code/Name Intermediary Contact No. Intermediary E-mail ID POS UID Aadhaar No. / PAN No.

The Customer Information Sheet (CIS) for this product is available on our website https://www.reliancegeneral.co.in/insurance/about-us/downloads.aspx

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

Registered & Corporate Office: Reliance General Insurance Company Limited, 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063.

Corporate Identification No. U66603MH2000PLC128300. UIN: IRDAN103RP0012V02100001. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License. RGI/MCOM/CO/PCV/PS/Ver. 1.3/310118

34,314.00



Limits of liability

PA cover for owner driver under section III CSI 0 (a) Under Section II (1)(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988. (b) Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or in the custody of control of the insured up to the limits specified- (TPPD 1 Sum Insured - 7,50,000/-, TPPD 2 Sum Insured - 6,000/-).

Limitations as to use

The policy covers the use only under a permit within the meaning of Motor Vehicle Act, 1988 or such a carriage falling under sub-section (3) of Sec 66 of the Motor Vehicle Act, 1988. The Policy covers use for any purpose other than: (a) Organized racing (b) Pace making (c) Speed testing (d) Reliability trials.(e) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

Persons/Classes of persons entitled to drive:

: Any person including insured:

Provided that a person driving holds a valid driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided that the person holding a valid learner's license may drive the vehicle when not used for the transport of goods at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Deductible under Section-I:

(i) Compulsory deductible ` 1000/- (ii) Additional compulsory deductible ` 00/- (iii) Voluntary deductible ` 0/-

*No Claim Bonus is subject to no claim on the previous policy. Benefits under the policy stands forfeited if claim is/was made in previous policy.

"It is hereby declared and agreed that any damages pre-existing, any losses occurred & any Liability having been incurred, prior to the commencement of cover under this policy are excluded from the scope of this policy."

% of Discount on Own Damage Premium					
Period of Insurance	% of NCB on OD Premium	100			
The Preceding Year	20%	120			
Preceding Two Consecutive Years	25%	17.			
Preceding Three Consecutive Years	35%	63			
Preceding Four Consecutive Years	45%	-05			
Preceding Five Consecutive Years	50%	- AN - AN			

Compulsory PA cover for owner driver :

Insured is not eligible for the Compulsory PA cover for owner driver in this policy as the same has not been opted for the reasons allowed as per motor tariff and/or basis insured's declaration given below:

"I/ we hereby declare that I/ we hold an effective personal accident insurance policy covering death and permanent disability (total & partial) and/ or compulsory personal accident (CPA) for owner driver in other vehicles; whereby the Sum Insured limit is of Rs 1,500,000 or more in all such above mentioned conditions."

In case you have missed it, please opt for compulsory PA cover by payment of additional premium as applicable .Liability of insurance company shall commence from the date of receipt of such additional premium.

"It is hereby declared and agreed that all pre-existing damages to the vehicle having occured prior to the commencement of cover are excluded from the scope of the policy"

The NCB provided is on Basic OD Premium excluding Add-on wherever applicable. The policy wording with detailed terms, conditions and exclusions are available on our website www.reliancegeneral.co.in

Statutory Provisions :

"As per Section 146 of the Motor Vehicle Act, 1988 it is Mandatory to have your vehicle insured against third party risk."

As per Section 196 of the Motor Vehicle Act, 1988 driving an uninsured vehicle is punishable with fine or Rs. 2000 and/or imprisonment up to 3 months for the first offence and fine of Rs. 4000 and/or imprisonment up to 3 months for the second offence."

I/We hereby certify that the Policy to which the certificate relates as well as this certificate of insurance are issued in accordance with the provision of Chapter X and Chapter XI of M.V. Act, 1988.

Note: In the event of dishonor of cheque, this policy document automatically stands cancelled from inception irrespective of whether a separate communication is sent or not

Safeguard your transaction by paying your premium via crossed cheque/DD in favour of Reliance General Insurance Co. Ltd.

The policy has been issued based on the information provided by you and the policy is not valid if any of the information provided is incorrect. Subject otherwise to the terms, conditions and exclusions of the Reliance Miscellaneous and Special Types of Vehicles Package Policy Certificate Cum Policy Schedule. In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Proposal/Covernote No. as mentioned in the policy.

This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017.

Updating Registration Number of vehicles within 15 days of policy inception is MANDATORY as per IRDA. Kindly provide the same to your Agent/Our Call centre/Policy issuing Branch (Applicable for policies booked without Registration No of vehicles).

IMPORTANT NOTICE: The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed 'AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY'. For legal interpretation, English version will hold good.

In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change. As per National Highways Authority of India, kindly ensure to affixed FASTag on your vehicle.

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Grievance Clause:

For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 02248903009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located.

Office of the Insurance Ombudsman,3rd Floor,Jeevan Seva Annexe,S. V. Road,Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in

Note: Kindly acknowledge the receipt of this policy. In case you find any variations against your proposal or any discrepancy in the policy, kindly contact us immediately

Fast Tag ID -

The policy does not cover liability for death, bodily injury or damage as excluded under Section 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)

In the unfortunate event of a claim, please call quoting your Policy No. on 022 48903009(Paid) and register your claim immediately within 7days from the date of loss. In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal.

Special Conditions: ACERemark as ACE of Rs.25000 Additional Compulsory Excess of Rs.5000.0 RGICL_ORB.

Policy has been issued with reference to vehicle inspection report, reference lead no. & special conditions. The inspection report remarks can be viewed on company's website by the lead no.

For Reliance General Insurance Co. Ltd.

Authorised Signatory



reliancegeneral.co.in	•
022 4890 3009	0
74004 22200	0

Risk Assumption Letter

Dear M/S AKUTAI KALYANI CHARITABLE TRUST

Thank you for choosing Reliance General Insurance.

Please find enclosed policy no.: 170122523400000314 which has been issued based on the details declared by the applicant.

Insured Vehicle Details					
Registration No.	112SF6423	Mfg. Month &	Year	JAN-20)20
	CHER 10.50 D BUS	CC / HP / Wat		32	298
Engine No. / Chassis No. E4	14CDLA316918 / MC2A1DRT0LA460965	LCC Including	g Driver		23
Type of Body NA	100	Total Premiur	m `	343	314
	HARASHTRA - Pune	IDV `		5300	000
Manufacturer fully build in Yes		Hypothecation	n/Lease	23	NA
Insured's Declared Value (IDV)					
Chassis IDV `	100	0.00 Non Electrical Access	sories `	0	.00
Body IDV `	1,3	0.00 CNG / LPG Kit		0	.00
Vehicle IDV	50	30000 Trailer / Side Car		0	.00
Electrical / Electronic Accessories `	20	0.00 Total IDV `	100	530,000	
Previous Policy Details					
Previous Year Policy No.	Period of Insurance	20	Previous Policy-Claim	Status	
2988480301	From: 17/02/2024 To: 16/02/2025 midnight	30	Yes	✓ No	
Cover Electrical/el Non-electric	mage + Third Party Coverage ectronic accessories cal accessories comprising LPG/CNG systems	Mance Ger	ance Con.	, eð	
Add-on Covers	200		THE .	All Control of the Co	
	No deduction for depreciation on vehicle pa	arts other than tyres and tube	es with respect of approv	ed partial loss claims.	
Additional towing Charges Additional Limit of TPPD	Provides cover for towing charges over and Insured - ` 0.0/-). Indemnify the Insured for an additional TPF Insured or held in trust or in custody of Insured or held in trust or in custody or in custody of Insured or held in trust or in custody or in the Insured or held in trust or in custody or in the Insured Order or Insured Order or Insured Order or Insured Order or Insured Order Order or Insured Order	above the standard policy of amount opted for damage	guideline as per the cover	opted by customer (Sum	No.
Emergency Hotel Accomodation NCB Retention Cover Total Cover EMI Protect Daily Allowance Benefit	Provide allowance towards the Hotel accorprovided in policy copy. No-Claim Bonus % is retained even after a Provides cover for registration charges, ro Pays for car EMIs for the time period durin Provides allowance as per plan opted, if ve	mmodation insured vehicle no claim, which would have be ad tax and insurance premit g which the vehicle is in one	ecome 0% without this co um (Total Cover Sum Ins e of our network garages	over. ured - ` 0.0/-)0/-). for repair.	
	claim., and in case of theft where vehicle is		•	2	
Daily Allowance Benefit Plus	Provides allowance as per plan opted, if ve in case of theft where vehicle is not found for		nan minimum days & for	eligible own damage claim., ar	ıd
Tyre Protector	Covers repair or replacement expenses ar		r damage to tyre & tubes	86.	
Rim Protector	Covers repair or replacement expenses ar	-			
Personal belongings Cover	Covers loss of personal belongings of insuvehicle	•	•	e time loss or damage to the	
Key Protect Cover	Provides replacement cost of keys in the e into	vent the keys are lost. It also	covers replacement cos	t of locks if the vehicle is broke	n
Assistance cover Tools and Equipment Cover Voluntary Deductible No Claim Discount retension	Provides help or support in various emerge It will provide an allowance of specified am The insured shall be given reduction in pre specified expense at the time of event	ount for loss or damage to th mium if insured opts for spec	ne tools and equipments a cified amount of voluntar	at the time of event	
	It will maintain the gurrent applicable NCD	at the time of renewal of the	nolicy		

Reliance General Insurance Company Limited.

Insurance

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company



reliancegeneral.co.in (s)
022 4890 3009 (c)
74004 22200 (S)

Please take a moment to carefully check your policy details mentioned above and in the policy schedule. Kindly confirm that the same are in order. In case of discrepancies, please let us know immediately. You can write to us at rgicl.services@relianceada.com or call us 022 48903009(Paid) for necessary changes/rectification. In the absence of any communication from you within a period of 15 days of receipt of this letter, we will consider that the issued policy is in order and as per your proposal. Non disclosure and/or misrepresentation of claims in the previous policy period can lead to cancellation of your policy or rejection of your claims.

(Note- Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.)

For Reliance General Insurance Co. Ltd.

Authorised Signatory

Know your policy

Remember to carefully go through the Risk Assumption Letter and confirm your personal as well as your vehicle details.

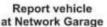
In case of any discrepancy in the policy details, kindly revert within 15 days from the policy start date on 022 48903009 (Paid) or visit any of our branches. Kindly refer to the Key Feature Document and Policy Wording at www.reliancegeneral.co.in to understand your policy better and learn more about the policy coverages, add-on covers and Policy Exclusion. This document is a statement of the specific provisions that form the Terms and Conditions of this Policy.

What documents do you require for making any change to your policy

- 1. Changes in vehicle make & model/cubic capacity/seating capacity/engine & chassis no./year of manufacture/registration no./ location/address
- Documents required: Letter for change, policy copy and registration certificate copy along with additional premium cheque, if applicable.
- 2. Changes in electrical and non electrical accessories/CNG/LPG kit
- Documents required: Letter for addition, policy copy, invoice copy of accessories, endorsed registration certificate copy (for CNG/LPG kit) and cheque for additional
 - premium
- 3. Changes in financier details (Hypothecation/Lease/Hire purchase)
- Documents required: Letter for change, policy copy, endorsed registration certificate copy and no objection certificate from financier (not mandatory for deletion, if
 - registration certificate copy is endorsed).

How to register a Claim - Cashless







Claim registration by Network Garage



Survey, Document verification, Loss Assessment & Re-inspection



Cashless Amount Confirmation



Vehicle Delivery

How to register a Claim - Reimbursement



Registration of Claim



Report Vehicle at Garage



Survey,Document verification,Loss Assessment and Re-inspection



Vehicle Delivery



Submission of Original Repair Bills + Payment Receipt



Claim Settlement to Customer

What documents do you require to register a Claim

- 1. Claim form duly filled and signed (company stamp in case of company registered vehicles)
- Registration copy
- 3. Driving License of the driver at the time of loss
- Policy copy
- 5. Vehicle fitness certificate
- 6. Vehicle route permit
- 7. Vehicle carriage permit
- 8. Road tax copy
- 9. Load Challan (if applicable)

Note: 1. As soon as a claim occurs, please intimate immediately to our call centre 022 48903009 (Paid). Delay in intimation would result in the violation of policy condition.

2. Any additional document, if required, will be informed.



The content on this page is for additional information & Should not be considered as part of the policy document/Schedule

Reliance General Insurance Company Limited.

IRDAI Registration No. 103



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Proposal Form for POS Reliance Commercial Vehicles Package Policy (Other than Motor Trade Internal Risks Policy)

The Insurer may seek any oth	ted below are the minimum requi er information as desired for undo rehicles with suitable amendmen	er for underwriting purpose.)	oroposer.	Calub.	600
✓ PCV	GCV	MISC	D [Trailer	6.
For Office Use Only	A				
Policy Number Savvion Reference No.	170122523400000314		Date Inspection Lead No.	4	Tiu.
Intermediary Details (To be filled in BLOCK LI	ETTERS)	2.0		
Intermediary Name	SAMADHAN RANSHUR	1/10	Code	23P68356	100
Branch Name	Pune	III.	Code	1701	
Sales Manager Name	Anikesh Kailas Kolhapure		Code	71016662	20.
*POS PAN No.	****907E	9/10	*POS UID Aadhaar No.	Die.	0.5
Details (To be filled in	n BLOCK LETTERS)				
1. This Proposal is for	A new Policy	Renewal of Policy	Endorsement	Others	(Please specify)
2a. Proposer's Full Name	Mr. Mrs.	AKUTAI KALYANI CHARI	TABLE TRUST	de	
2b. Address	Address for Commu	nication	Address where vehic	cle is normally kept and	Used
20	all a	et III	G		
Flat/Building/Door/Bloo		A/2, 12/1A/2/2,12/AC/12/3A 8			
Road /Street/Sector	13/3 MANJRI	100		M.C.	
Nearest Landmark	200		31		die
Area	-011				16.
City	PUNE		di la		
Pin Code	412307	2	-01-	-2	-01
State	MAHARASHTRA	30	-0	dil.	85
Country	India	Harry Contract of the Contract	0	00.	
Phone	115	2	Mobile	9326*****	
Emergency Contact No	0.	10	Blood Group	The same	
#Email	20	00,	Fax	90.	All loss
3. Period of Insurance	From 17/02/202		To 16/02/202		
4. Source of Funds	Business		Agricultura		Savings
5. Monthly Income6. UID Aadhaar No.	Upto `20,000	`20,001 to `50,000	`50,001 to `1,00, 7. PAN No.	000 1,00,0 *****907E	001and above
8. Fast Tag ID	100	110	7. FAN NO.	907 L	86.
 Are you an existing Relia 	ance General 🔲 🗸 🗀	✓ No	.0	CO	
Insurance Customer	ance General Yes	V NO	CO.	-50	150
If Yes, please Provide th	ne Policy No.:	All De		DE.	400
	ed documents shall be sent to the	e email ID provided above. If	you wish to receive Policy	copy and related docu	ments in physical form to
the aforesaid communication	address, please drop us an ema	il at rgicl.services@reliancea	da.com		Carried Control
Details of the Vehicle	1000				
10. Registration Number	MH12SF6423	100	11. Date of Registration	18	3/03/2020
12. Registering Authority & I		RA - Pune	11. Date of Registration	=00	700/2020
13. Year & Month of Manufa			14. Cubic Capacity	32	298
15. Engine Number	E414CDLA3169	18			
16. Chassis Number	MC2A1DRT0LA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			160
17. Make of Vehicle	EICHER	61	Ch)		100
18. Type of Body/Model	NA/10.50		110		W
	GVW)/Cubic Capacity (C.C.)	(40)	100	all's	
20. Goods type (Applicable		Hazard	ous Goods	Non-Hazardous Go	7,000
21. Is the Vehicle made in Ir	ndia?	of the same	O.	✓ Yes	No
		300	-165	747	

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	Licensed carrying capa le Category	city (No. of Passengers) in o	case of Passenger carrying ve	ehicles 22	A Thur	
	le usage type (Applicab le usage sub type (App	le if bus) : licable if Contract Carriage):	✓ Contract Carriage✓ School Bu	Stage Carriage s Employee p	Private Usage ickup Bus	thers
24. Seatir	ng capacity (Including D	Oriver) 23	Helle.	G.	Col	
	of the Vehicle Typ	V.ACS				
25. a. Wh	ether the Vehicle is driv	ren by Non-conventional sou	rce of power?	s 🗸 No If yes 🗌 E	Bi Fuel CNG LPG	Electric
	red's Declared Value ') of vehicle Chasis	Non - electrical accessories fitted to the vehicle ()	Electronic accessories fitted to the vehicle ()	Value of CNG/ LPG Kit Bi Fuel ()	Total Value ()	
530,0	000.00	0.00	0.00	0.00	530,000.00	_
b. Do	you have a valid PUC?	✓ Yes No	110	Cal	Oller	80
application the su	able, on the date of combsistence of the Policy. s of Driver: (a) Ag	mencement of the Policy and Further, the Company reserv ge of Owner Driver	dundertakes to renew and mai es the right to take appropriate	ntain a valid and effective PU	cate and/or valid fitness certificat C and/or fitness Certificate, as a ancy in the PUC or fitness certifi	pplicable, durin
. ,		efective vision or hearing or	any physical infirmity.	111	Yes No	
details	s" please give			210	die	
		26	100	_05	80	85
			Har.			
	76.7	olved for causing any accide		5 Er	YesNo	
II Yes	s" piease give details as	under including the pending	g prosecution, if any:-	a della	1,000	
(d) D.O.B	- OFF	dil.	Sec.	The same		
. ,		vailability and eligibility)		110	The state of the s	
zr. Auu C	(6)	50		of all		25
(a)	Easy Monthly Instalr	ment (EMI) Protection Cove	r: (RGI-MO-A00-00-17-V01-1	4-15)	Alb.	50
68	If Yes, please choose	any one option;	All I	G.	COL	
	Plan I - 1 EMI, EMI A	mount:	3	, P	.0	
	Plan II - 2 EMIs, EMI	Amount:	Will.	of the	O _O O	
	Plan III - 3 EMIs, EM	I Amount :	0,0	- JIFO	THE STATE OF THE S	
(b)	Additional Towing Ch	narges		142	No	
(c)	Nil Depreciation Cov	ver:		- 1	No	
(d)	Total Cover	The same	, di	all of	No	08
(e)	Voluntary Deductible	M.C.	die	CO		500
	Voluntary Deductible		III.		0	
(f)	Emergency Hotel Ac		all.	7	No	
(.)	Benefit Amount:	oommodaton		The state of the s		
(~)	6	IDD.	de	450	Na	
(g)	- (7)				NO	
- 65	Additional amount op		. 5	- Ol	Other	
(h)	Personal Belongings	Cover	10	Car	No	35
	Benefit Amount:		Red.	0	Co	
(i)	Daily Allowance Ben	efit	10	30	No	
	Per day allowance ar	mount opted :	The state of the s		. C.C.C.	
	Coverage Days opte	d:	600	6110	Carl I	
(j)	Daily Allowance Ben	efit Plus		110	No	
1.00	Per day allowance ar	mount opted:		of the	OF THE PARTY OF TH	
110	Coverage Days opte	d:	100	-Ollin	Wald.	08

Reliance General Insurance Company Limited.

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	0.00		VIII.			10	The second		Cally .	
	(k) Tools and Equi	pment Cover					1410			
	(I) Any other Deta	ils					40	- F		533
	THE STATE OF THE S	20					.0			261
28.	Is the vehicle fitted with	any Anti-theft device	e approved b	y the ARAI	?		00	aller	Yes	✓ No
	If Yes,please attach cer					ile Associa	ation of India.			
29.	Are you a member of A	utomobile Association	on of India?	If Yes,pleas	e submit r	membersh	nip copy.		Yes	✓ No
30.	Whether the Vehicle is					110		altr.	Yes	✓ No
31.	Whether use of Vehicle	is limited to Own P	remises?			6	li.		Yes	✓ No
32.	Whether the commercia	al vehicle is also us	ed for Private	e purposes	(excluding	use for h	ire or reward)?		Yes	No
33.	Whether the Vehicle is				`		-0	6	Yes	✓ No
34.	Whether the Vehicle be			of a Foreign	n Country	>	ALC:		Yes	No
04.	If so, is the duty elemen			or a roloigi	Todanay	•	00	Oller.	100	110
35.	Whether the Vehicle is			ned/Mentall	v Challend	ad Parson	n?	G.	Yes	✓ No
36.	Date of purchase of the	100	7.67	ped/Mentali	y Challerig	jeu i eisoi	112	20	18/Mar/20	
37.	Whether the Vehicle at					110		New	Anna San	nd Hand
31.	whether the vehicle at	the time of purchase	e was			6.	100	INew	Secoi	шпани
Ris	k Inclusions									
38.	Do you wish to restrict	t the above limits to	the statutory	/ TPPD Liab	oility limit o	f 6000/-	only?	. 63	Yes	No
	Do you wish to cover	legal liability to?					200	000		- 0
	(a) Driver/Conductor /	Cleaner (No. of per	rsons)	180			-0	They want	Yes	No
8	(b) Other employees ((No. of Persons)		Eles.				Co	Yes	No
	(c) Non-fare paying pa	assenger (No. of pe	rsons)	6		- 3			Yes	No
39.	Do you wish to include	personal Accident (P.A.) Cover f	for paid drive	ers, cleane	ers and co	enductors?	The same	✓ Yes	No
	If Yes, give name and C							in the case of Motoris	ed two wheeler	s and 2
	lakhs for other classes		, , , , , ,				100		THE.	
40.	Personal Accident Cove	er for Owner Driver.	Please give	details of no	omination		di		600	
	1. XX	200		1.0		Nama	of the Appointee (if	- 60		-01
	Name	Name of the	Nominee	Age of N	ominee		ninee is Minor)	Relationship	Addre	SS
		36/37		16.				6,4		
	(Note: 1. Personal Acc	cident cover for own	oer driver is c	rompulsory i	for Sum In	sured of	15.00.000/- for Two W	/heeler Private Car G	CV_PCV and I	Misc-D
							owned by a company,			
		er-driver does not ho				0,	li.	10	die	
41.	Do you wish to include	Personal Accident of	over Named	Persons?			100		Yes	✓ No
							Name of the Appointed			
	Name	CSI Opted	Name of	Nominee	Age of N	Nominee	Name of the Appointed (If Nominee is Minor)	Relationship	Addre	SS
	la constitution of the con	(8)		180			-0	-000		800
8		S. I.		Alle.			Q:	CO		
42.	Extension of Geographi		0 6.0	. 0				_0		
	Whether extension of G	leographical Area to	the following	g Countries	requirea ?	150		The		
	1. Bangladesh						10	<i>10</i>	11/2	
	2. Bhutan		III.				15		10	
	3. Maldives	0					All live			
	J. Malulves	_00					6	THE STATE OF THE PARTY OF THE P		11.
	4. Nepal	100		100			- Cilia	421		000
	5. Pakistan	CITY OF		10			G	-0		
		(ILES)		7				-0		
	6. Sri Lanka		(2)			do		40		
Det	tails of Hire Purcha	se / Hypothec	ation / Le	ase						
43.	Please state if the vehic	ele is under	Ter;	Hire Purch	ase	I	Lease Agreement	Hypothecati	on Agreement	
	If so, give name and add	dress of concerned	parties.				111	- 3	A	
44.	Full Name	M/s					of o	00		16
45.	Address	Ole		100			Office	- ap		0.00
No	te									
	nce General Insurance	Company Limited		IRDAI	Registra	tion No. 1	103	An ISO 90	01·2015 Certif	ied Company

Western Express Highway, Goregaon (East), Mumbai – 400 063.

Corporate Identification No. U66603MH2000PLC128300. UIN: IRDAN103RP0012V02100001. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License. RGI/MCOM/CO/PCV/PS/Ver. 1.3/310118

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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.

The IDV of the vehicle is to be fixed on the basis of manufacturers' listed selling price of the brand & model as the vehicle proposed for insurance at the commencement of insurance / renewal, and adjusted for depreciation as per policy wordings.

De	tails of Previous Insuranc	e					
46.	Full Name of previous insurer	KOTAK MAHINI	DRA GENERAL INSURAN	CE COMPANY LIMITED			
47.	Address	1		20			
48.	Policy Number	2988480301	110	Previous Policy Expiry	16/02/2025	180	
49.	Type of Cover	Package Policy	Liability only	others (to be describ	oe)	10	
50.	NO CLAIM BONUS allowed und	der previous policy (%)	20	11/2	- 7	The.	
51.	Claims taken in previous policy	O				Yes	✓ No
	If yes, No. of Claims	"Co		Claims Amount `			The s
52.	Are you entitled to No Claim Bor	nus	1000	011	ALL.	✓ Yes	No
	If yes, please submit/attached pr	oof thereof	All I	G.	E-0.		
Pay	yment Details						
	Cheque/ DD	(5)	Chequ	ue/ DD No.		6.	
	Cheque/ DD Date	-60	Ca	ash Credit Card	Others	100	
Pro	poser's Bank Details						
53.	Name of the Bank Account Hold	er		110		~	
54.	Bank Account No.:			55. Account:	Saving	Cur	rent
56.	Name of the Bank	The same of the sa		and the same of th	200		0.5
57.	Branch			Go	-0,		
58.	MICR Code (9 digit MICR code r	number of the bank and br	anch appearing on the chec	jue issued by the bank)	. 0		
59.	IFSC Code (11 character code a	appearing on your cheque	leaf)	20			
	I understand that any refund due	on the premium payment	t / any payment / claims to b	e directly credited to my afores	aid Bank Account .	.*	
* As	per IRDAI, its mandetory that all p						

Reliance General Insurance Company Limited.

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GENERAL DECLARATION:

I understand that as per the new AML/CFT Guidelines issued Reliance General Insurance Co. Ltd will be verifying my details pertaining to KYC and PAN provided at the time of proposal.

I further, do hereby agree and consent that in the case of the event of a mismatch of information provided by me in the proposal form, identification proof, and address proof at the time of issuance of the policy. I request Reliance General Insurance Company Limited to issue the policy with the details appearing as per my proposal form. I will be solely responsible for any consequences arising out of the difference in detail given by me during the verification of supporting documents provided by me at the time of issuance of the policy or otherwise.

PEP Declaration:	
Are you a Politically Exposed Person (PEP)?	☐ Yes ☑ No
If yes, please mention the position held	10, 10,
Is any of your close relation or family member a PEP?	Yes V No
If yes, please mention the name and relation and the position held by such close relative/family member.	ance de
I hereby declare that in future if me, any of my close relatives or any of my family memb Insurance Co. Ltd as a mandate. I understand that this is a crucial information under the given by me is true. In case the company comes to know that this is a misrepresentation scrutiny by the company and I shall be solely responsible for the same.	PMLA Rules and AML/ CFT Guidelines and shall confirm that the answers
Note: "Politically Exposed Persons" (PEPs) are individuals who are or have been entrusted wi States/Governments, senior politicians, senior government/judicial/military officers, sen etc (As per sub clause (xii) of 3(b) of Chapter I of Master Direction – Know Your Custor	ior executives of state-owned corporations, important political party officials,

Declaration by Proposer

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 RELIANCE General Insurance Company Limited. I/We also declare that, if any additions or alterations are carried out after the submission of this proposal form, then the same would be conveyed to the insurers immediately. I/We hereby declare that the contents of the form and documents have been fully explained to me/us and that I/We have fully understood the significance of the proposed contract. I/We agree to accept a policy subject to the condition prescribed by the company. • I have read and understood the brochure, prospectus, sales literature & Policy wordings and confirm to abide by the same. • I/We declare that the rate of NCB stated above by me/us is correct and that no claim has arisen in the expiring policy (copy of the policy enclosed). • I/We further undertake that, if this declaration is found to be incorrect, all benefits under the policy in respect of section I of the policy will stand forfeited. • I/We further understand and agree that RELIANCE General Insurance will seek confirmation of above stated details from my/our previous insurers. Pending receipt of necessary confirmation, I/We agree that, though coverage under the policy will be available to me/us, RELIANCE General Insurance will be liable to release the payment towards any claims under section I of the policy only after a confirmation in this regard is received. In the event this declaration is found to be incorrect, any and all coverage available under section I of the policy from the date of commencement of the policy shall stand automatically forfeited. Further, any survey arranged/allowed by RELIANCE General Insurance of the motor vehicle, pending confirmation of the declaration from my/our previous insurers, shall be without prejudice to any of the rights and remedies available to RELIANCE General Insurance as contained herein and under the relevant laws and regulations. • I/We acknowledge and agree that, Pending receipt of confirmation of the declaration from my/our previous insurers, the "cash-less repair facility" provided by RELIANCE General Insurance shall stand suspended. • I/We also shall endeavour to procure the renewal notice and pass on the same to RELIANCE General Insurance immediately upon the receipt of such renewal notice. Mode of Payment: Secure your payment by cheque/DD favouring Reliance General Insurance CO.Ltd. This policy shall be voidable at the option of the Company in the event of mis-representation, mis-description of nondisclosure of any material particulars by the Proposer. Any person who, knowingly and with intent to defraud the Insurance Company or other persons, files a proposal fo insurance containing any false information, or conceals for the purpose of misleading, information, information concerning any fact material thereto, commits a fraudulent act which will render the policy voidable at the company's sole discretion and result in a denial of insurance

This proposal form was completed by

		nitiative by saying "No" to Policy kit, Re r registered Email ID & Mobile number		and Other Communications hard copy. We v	vill be sending yo
Go Green	Hard copy required	Yes No		Old Control	
Name	- CO	310	Place:	20,0	50
Date:	02 Feb 2025 06:27	Page .	Date:	02 Feb 2025 06:27	
	al III	A. C.	ITIC .	TC _C	7260
Signatu	ire	al.		Signature of Proposer & Company Seal	0

benefits. • I/We here by state that the above mentioned address shall be taken as address on record for the purpose of GST. • I/We hereby confirm that the contents of the

proposal form and connected documents have been fully explained to me/us and I/We have fully understood the significance of the proposed contract.

Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015

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 of 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.

Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

Registered & Corporate Office: Reliance General Insurance Company Limited, 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063.

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2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

Supporting Confirmation of Agent/Broker/SM/CSO I confirm the above signature tobe of the registered owner of the vehicle proposed for insurance	20,
Name of IRDAI Agent/ Broker Mr. Mrs.	- Gille Hill bre
Place	C.O.
Date	
(In case of Direct Business, Name & Signature of CSO /SM to be taken)	Signature of IRDAI Agent/ Broker
* Mandatory details to be filled	They willer
The policy does not cover liability for death, bodily injury or damage as excluded under Sectio	on 150 (2) (ii) and (iii): b and C of the Motor Vehicles Act 1988 (Inserted
Vide GSR no 164 (f) dated 25.02.2022 w. e. f 01.4.2022)	77,
	160. Th

Reliance General Insurance Company Limited.

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