

BAGGAGE INSURANCE POLICY (RETAIL) - PROPOSAL FORM

(The liability of the Company commences only when this proposal is accepted by the Company and the premium is received.)

SCOPE OF COVER

The policy covers accompanied personal baggage of every kind and description of the Insured or his family members or employees during the course of journey including stoppages enroute, anywhere in the world. The policy covers loss, damage or destruction to the accompanied personal baggage of the Insured or his family members or employees due to fire, riot & strike, terrorist activity, theft or accident, anytime whilst travelling to all places during the period of insurance.

EXCLUSIONS

The major exclusions are:

1. Breakage, cracking or scratching of crockery, glass, cameras, binoculars, lenses, sculptures, curios, pictures, musical instruments, sports gear and similar articles of brittle and fragile nature, unless caused by fire or accident to the means of conveyance.
2. Loss, destruction of or damage to articles of consumable and of perishable nature.
3. Loss or damage to money, securities, manuscripts, deeds, bonds, bills of exchange, promissory notes, stocks or share certificates, stamps and travel tickets or travellers' cheques, business books or documents, unless specifically insured.
4. Damage caused by any process of cleaning, dyeing or bleaching, restoring, repairing or renovation or deterioration arising from wear and tear, moth, vermin, insects or mildew or any other gradually operating cause.
5. Loss of or damage to articles which did not form part of the personal baggage when the journey commenced, unless specifically insured.
6. Any consequential loss arising out of loss or damage to the personal baggage insured.
7. Loss or damage due to war, nuclear perils and any event of similar nature.

The Policy does not commence until the proposal is accepted and premium received.

Intermediary Name	Code
Branch Name	Code
Sales Manager Name	Code

SECTION 1 - PROPOSER DETAILS (To be filled in BLOCK LETTERS)

1. Name of Proposer	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	F I R S T	M I D D L E	L A S T
2. Residential address				
Flat/Building	Road/Street / Sector			
Area	City			
Pin Code	State			
Country				
3. Phone	Mobile			
Email	Fax			
4. Source of Funds	<input type="checkbox"/> Business <input type="checkbox"/> Profession <input type="checkbox"/> Salary <input type="checkbox"/> Agricultural Income <input type="checkbox"/> Savings <input type="checkbox"/> Others			
5. Monthly Income	<input type="checkbox"/> Upto ₹ 20,000 <input type="checkbox"/> ₹ 20,001 to ₹ 50,000 <input type="checkbox"/> ₹ 50,001 to ₹ 1,00,000 <input type="checkbox"/> ₹ 1,00,001 and above			
6. PAN No.	7. UID Aadhaar No.			
8. CIN (In case of Corporate)	9. Date of Birth / Date of Incorporation		D D / M M / Y Y Y Y	

10. Do you have a GST Registration Number		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please specify			
11. Country of Operations			
12. Business Description			
13. Period of insurance		From DD/MM/YYYY To DD/MM/YYYY	
14. Description of baggage to be covered: Description of baggage belonging to the proposer/family member(s)/employee(s) (i.e suitcase, trunk, hold-all). State value of the contents of each including the value of the package. Jewellery and other valuables such as furs, glasses, cameras, tape-recorders, radios and similar items should be separately specified and values stated.			
Sr. No.	Description of property	Sum Insured (₹) (intrinsic value)	
		Total	
NB			
a) Articles acquired enroute and money carried for official purpose are not covered unless specifically insured.			
b) To obtain full indemnity it is necessary to insure the package for full value.			
15. In case of business organizations covering employees, a separate list giving names of employees and limit of indemnity for each employee to be attached.			
16. a) What is probable duration of journey?			
b) Whether cover is also required outside India? If yes, give details. (If you are a frequent traveler, you can opt for an annual policy)			
17. Is the property currently insured under a baggage policy? If yes, please state?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
a) Name of the Insurance Company			
b) Policy No			
c) Period		DD/MM/YYYY	
18. Have you suffered any loss relating to baggage in the past? If so, give full details thereof as under (irrespective of whether insured or not)			
Date of occurrence	Details of Loss	Amount of Loss	Name of the Insurer, if any
19. Has any Insurer in respect of baggage insurance:			
a) Declined the proposal?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
b) Cancelled or refused to renew your policy?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
c) Accepted your proposal on special terms & conditions?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
20. Give details of other existing insurance if any			
21. Any other information relevant to this insurance			

PROPOSER'S BANK DETAILS

22. Name of the Bank Account Holder	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	F	I	R	S	T	M	I	D	D	L	E	L	A	S	T
23. Bank Account No.:	24. Account:		<input type="checkbox"/> Saving <input type="checkbox"/> Current													
25. Name of the Bank																
26. Branch																
27. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)																
28. IFSC Code (11 character code appearing on your cheque leaf)																
<input type="checkbox"/> I understand that any refund due on the premium payment / any payment / claims to be directly credited to my aforesaid Bank Account.*																
*As per IRDAI, its mandatory that all payments made to the insured are only through electronic mode.																

PEP DECLARATION:

Are you a Politically Exposed Person (PEP)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please mention the position held	
Is any of your close relation or family member a PEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please mention the name and relation and the position held by such close relative/family member.	

I hereby declare that in future if me, any of my close relatives or any of my family member attains a position of PEP then I shall confirm the same to IndusInd General Insurance Co. Ltd as a mandate. I understand that this is a crucial information under the PMLA Rules and AML/CFT Guidelines and shall confirm that the answers given by me is true. In case the company comes to know that this is a misrepresentation and concealment of information then the policy shall be put on hold for scrutiny by the company and I shall be solely responsible for the same.

Note :

"Politically Exposed Persons" (PEPs) shall have the meaning assigned to it under sub clause (db) of clause (1) of Rule 2 of the Prevention of Money Laundering (Maintenance of Records) Rules, 2005."

(db) "Politically Exposed Persons" (PEPs) are individuals who have been entrusted with prominent public functions by a foreign country, including the heads of States or Governments, senior politicians, senior government or judicial or military officers, senior executives of state-owned corporations and important political party officials".

AML Guidelines

1. I/We hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been /will be paid out of proceeds of crime related to any of the offense listed in Prevention of Money Laundering Act,2002.
2. I Understand that the Company has the right to call for document to established sources of funds.
3. The Insurance Company has right to cancel the insurance contract in case I am/have been found guilty by competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

Place: _____

Date: _____

Signature of Proposer**GENERAL DECLARATION:**

I understand that as per the new AML/CFT Guidelines issued IndusInd 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 IndusInd 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.

DECLARATION BY PROPOSER

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 IndusInd 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 IndusInd General Insurance company Limited immediately

I/We further agree and undertake not to receive from IndusInd General Insurance Company Limited any rebate other than that mentioned in the published prospectus in accordance with the provisions Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.

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 agree to be notified by insurer on my registered mobile number/ email id through mail or SMS or any such mode, information about various insurance policy services."

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

Place: _____

Date: _____

Signature of Proposer

PROHIBITION OF REBATES - SECTION 41 OF THE INSURANCE ACT, 1938 AS AMENDED BY INSURANCE LAWS (AMENDMENT) ACT, 2015.

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 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.
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.