

दि ओरिएण्टल इंग्योरेंस कम्पनी लिमिटेड (भारत सरकार का उपक्रम)

(भारत चरकार का उपक्रम) पंजीकृत कार्यालय : ओरिएण्टल हाजस, पो. बा. नं. 7037 ए-25/27, आसंफ अली रोड, नई दिल्ली - 110 002



## THE ORIENTAL INSULANCE COMPANY LTD.

(A Government of India Undertaking).

Regd. Office: Oriental House, Post Box No. 7037, A-25/27, Asaf All Road, New Delhi-110 002

Regional Office: S.C.O. 109-111, Sector 17-D, Chandigarh - 160 017

PROPOSAL FORM FOR PRIVATE CARS/MOTORISED TWO WHEELERS/ COMMERCIAL VEHICLES (PACKAGE POLICY AND LIABILITY ONLY POLICY)

SSUI	OFFICE OIC BO PANCHKULA SCO	325 SECTOR 9	PANCHKULA		
Address Pin Cod	Registered owner of the Motor Vehicle) :	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	E-mail Address :		
s the ve	shicle proposed for Insurance under : Hire Purchase /			Yes/No	
n yes, g	ive name and address of Financier:				
Type.of	Cover required : Liability Only Policy / Packages Polic of Insurance : From	ry / Others (Specif _To	y)		
1.	Registration No. and Date of Registration of the Vehicle ;				
2.	Registration Authority & Location:				
3.		Engine No. — Chassis No. —			
4.	Make of Vehicle: Cubic Capacity:				
5.	Seating Capacity Including Driver: Gross Vehicle Weight:				
6.	Maximum Licenced Carrying Capacity (No. of Passengers) In case of Passengers Carrying Vehicle				
	Previous Insurance Particulars :  a) Name and address of the previous insurer :				
	Previous Policy No				
		pe of Cover: Liability Only Cover / Package Cover / Others (Specify)			
	d)				
	Claims lodged during the Preceeding 3 years	Year	Number	Amount	
	AADHAR CARD NO.				
	Nominee Details				
	e) Has any insurance company ever:				
	i) declined the proposal			Yes/No	
	ii) cancelled & refused to renew (if yes, re	asons thereof)	\$	Yes/No	
	(if Yes, reasons and details thereof)			Yes/No	

Are you entitled to No Claim Bonus? If yes, please submit proof thereof.

## DECLERATION BY INSURED

We hereby declare that the statement 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 the "Oriental Insurance Company Ltd",

We declare that the rate of NCB dalmed by me / us is correct and that no claim has arisen in the expiring policy (copy enclosed). I/We further undertake that if this declaration is found to be incorrect, all benefits under the policy in respect of Section -1 of the policy will stand forfeited. I/We also declare that any additions or alterations are carried out after the submission of this proposal form then the same would be conveyed to the insurers immediately.

Place:

I/We hereby decises that the vehicle

Date:

Signature of Registered Owner of the Vehicle