



**IFFCO-TOKIO GENERAL INSURANCE CO. LTD**  
 Regd. Office: IFFCO Sadan, C-1, Distt. Centre, Saket, New Delhi-110017

Intermediary Details:

**PROPOSAL FORM FOR ALL IN ONE HOME PROTECTOR POLICY**

UIN: IRDAN106RP0064V02201819

**PROPOSER DETAILS**

Name					
Communication Address					
City		State		Pin Code	
Email Address			Mobile No.		
<b>Policy documents will be sent to the above email-ID</b>			Do you still need the physical Copy? Yes <input type="checkbox"/> No <input type="checkbox"/>		
KYC Details (Please attach self-attested photo copies)					
<input type="checkbox"/> PAN No.	<input type="checkbox"/> AADHAR No.	<input type="checkbox"/> Any other(Please Specify) _____			
KYC Document Number					
Occupation Details					
Name of Financial Institution and Address (if their interest is involved)					

**DETAILS OF THE HOME TO BE INSURED**

**SECTIONS OPTED (Please Tick.)**

Fire and Allied Perils(Compulsory section) <input type="checkbox"/>	Burglary & Housebreaking <input type="checkbox"/>	All Risk <input type="checkbox"/>
Fixed Glass and Sanitary Fittings <input type="checkbox"/>	Electronic Equipment <input type="checkbox"/>	Home Entertainment Equip/ Portable Computer/Pedal Cycle <input type="checkbox"/>
Breakdown of Domestic Appliances <input type="checkbox"/>	Personal Accident <input type="checkbox"/>	Loan Payment Protection <input type="checkbox"/>
Baggage <input type="checkbox"/>	Liability Insurance <input type="checkbox"/>	Increase Living Expenses <input type="checkbox"/>
Year Of Construction		Super Built up area of Home (sq. ft.)
Type of Building:	Flat <input type="checkbox"/>	Independent House <input type="checkbox"/>
Security Arrangement		
Security Guard <input type="checkbox"/>	Cctv Camera <input type="checkbox"/>	Alarm System <input type="checkbox"/> None <input type="checkbox"/>
<b>Period of Insurance:</b>	<b>From</b>	<b>AM/PM To</b>
		<b>Policy Tenure 1 year</b>
If different from Communication Address		
City	State	Pin Code
(Note: If you wish to cover multiple locations in same policy, kindly attach a separate proposal form with all the details of other premises to be insured.)		

**Covers Opted**

SECTION 1		FIRE AND ALLIED PERILS									
1	Is there any policy in place for the same property?	Yes/No									
	If Yes, please provide the details										
2	Cover/s required:  (When Home Building <u>and</u> Home Contents are opted for, cover for General Contents of Home for Sum Insured equal to 20% of the Sum Insured for Home Building Cover subject to a maximum of ₹ 10 Lakh [Rupees Ten Lakh] is automatically provided).	<table border="1"> <thead> <tr> <th>Cover</th> <th>Please tick</th> </tr> </thead> <tbody> <tr> <td>Home Building &amp; Home Contents</td> <td></td> </tr> <tr> <td>Home Building Only</td> <td></td> </tr> <tr> <td>Home Contents Only</td> <td></td> </tr> </tbody> </table>	Cover	Please tick	Home Building & Home Contents		Home Building Only		Home Contents Only		
Cover	Please tick										
Home Building & Home Contents											
Home Building Only											
Home Contents Only											

**C. Location of Home Building**

3	Location of Home Building - full postal address with Pin Code.	
		Pin Code:
4	Is it in a multi-storey building or is it a standalone house?	
5	In case of multi-storey building, please provide the floor number of Your house	
6	Is there a basement to Your house?	

**D. Details of Home Building****Please note:**

**Your Home Building** is a building consisting of a residential unit, having an enclosed structure and a roof, basement (if any) and fixtures and fittings permanently attached to the floor, walls or roof, like fixed sanitary fittings, electrical wiring and other permanent fittings etc.

**It also includes** 'additional structures' if they are on the same site, are used as part of Your Home Building:

- a. garage, domestic out-houses used for residence, parking spaces or areas, if any;
- b. compound walls, fences, gates, retaining walls, internal roads;
- c. verandah or porch and the like;
- d. septic tanks, bio-gas plants, fixed water storage units or tanks, solar panels, wind turbines and air conditioning systems, central heating systems and the like, if not included in Home Contents Cover, any other structure.

7.	<p><b>Sum Insured (SI) for Home Building:</b></p> <p><b>Please note the following:</b> (The amount required to construct Your Home Building at the policy Commencement Date. This amount is calculated as follows:</p> <p><b>a. For residential structure of Your Home including fittings and fixtures:</b></p> <p>Carpet area of the structure in square meters X Rate of Cost of Construction at the policy Commencement Date.</p> <p>The Rate of Cost of Construction is the prevailing rate of cost of construction of Your Home Building at the policy Commencement Date.</p>	<p><b>a. SI for residential structure of Your Home including fittings and fixtures (in ₹):</b></p>									
	<p><b>b. For additional structures:</b> the amount that is based on the prevailing rate of cost of construction at the Policy Commencement Date.)</p>	<p><b>b. SI for additional structures (in ₹):</b></p> <table border="1" data-bbox="764 684 1479 856"> <thead> <tr> <th data-bbox="764 684 1019 751">Additional Structure</th> <th data-bbox="1019 684 1479 751">Sum Insured ( in ₹)</th> </tr> </thead> <tbody> <tr> <td data-bbox="764 751 1019 800"></td> <td data-bbox="1019 751 1479 800"></td> </tr> <tr> <td data-bbox="764 800 1019 856"></td> <td data-bbox="1019 800 1479 856"></td> </tr> </tbody> </table>		Additional Structure	Sum Insured ( in ₹)						
Additional Structure	Sum Insured ( in ₹)										
8.	Carpet area of structure of Home in square meters										
9..	Rate of Cost of Construction per square metre at the policy Commencement Date										
<b>Other Details</b>											
10.	Age of Home Building	<table border="1" data-bbox="756 1117 1481 1358"> <tbody> <tr> <td data-bbox="756 1117 1130 1173">Less than 5 years</td> <td data-bbox="1130 1117 1481 1173"></td> </tr> <tr> <td data-bbox="756 1173 1130 1230">5-10 years</td> <td data-bbox="1130 1173 1481 1230"></td> </tr> <tr> <td data-bbox="756 1230 1130 1287">10-20 years</td> <td data-bbox="1130 1230 1481 1287"></td> </tr> <tr> <td data-bbox="756 1287 1130 1358">Above 20 years</td> <td data-bbox="1130 1287 1481 1358"></td> </tr> </tbody> </table>		Less than 5 years		5-10 years		10-20 years		Above 20 years	
Less than 5 years											
5-10 years											
10-20 years											
Above 20 years											
11.	<p>Construction Details</p> <p><b>Please note the following:</b></p> <p>(Building(s) having walls and/or roofs of wooden planks/thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt/canvas/tarpaulin and the like are treated as Kutcha Construction. Construction other than Kutcha Construction is a 'Pucca Construction')</p>	<table border="1" data-bbox="873 1373 1382 1646"> <thead> <tr> <th data-bbox="873 1373 1141 1421"></th> <th data-bbox="1141 1373 1382 1421">Construction*</th> </tr> </thead> <tbody> <tr> <td data-bbox="873 1421 1141 1484">Walls</td> <td data-bbox="1141 1421 1382 1484">Kutcha / Pucca</td> </tr> <tr> <td data-bbox="873 1484 1141 1568">Floor</td> <td data-bbox="1141 1484 1382 1568">Kutcha / Pucca</td> </tr> <tr> <td data-bbox="873 1568 1141 1646">Roof</td> <td data-bbox="1141 1568 1382 1646">Kutcha / Pucca</td> </tr> </tbody> </table> <p>(*strike out what is not applicable)</p>			Construction*	Walls	Kutcha / Pucca	Floor	Kutcha / Pucca	Roof	Kutcha / Pucca
	Construction*										
Walls	Kutcha / Pucca										
Floor	Kutcha / Pucca										
Roof	Kutcha / Pucca										
TOTAL (Section 1 Building)		Rs.									

**E. Details of Home Contents****Please note the following:**

- i. Home Contents refer to articles or things in Your Home that are not permanently attached or fixed to the structure of Your Home. Home Contents may consist of General Contents and/or Valuable Contents.
- ii. **General Contents** are all the contents of household use in Your Home, e.g., furniture, electronic items and goods, antennas, solar panels, water storage equipment, kitchen equipment, electrical equipment (including those fitted on walls), clothing and apparel and items of similar nature.
- iii. **Valuable Contents** of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.
- iv. If You have opted for Home Building and Home Contents cover, the General Contents of Your home equal to 20% of the Sum Insured for Home Building Cover subject to a maximum of ₹ 10 Lakhs (Rupees Ten Lakh) are automatically covered.

<p>12. If You want to opt out of in-built cover for General Contents as mentioned in (iv) above and want to have higher Sum Insured Or</p> <p>If You have opted for Home Contents Only cover, please provide item wise Sum Insured for General Contents.</p> <p>(Sum Insured represents Cost of Replacement)</p>	<p>Item wise Sum Insured for General Contents (in ₹):</p> <table border="1"> <thead> <tr> <th>Items</th> <th>Sum Insured</th> </tr> </thead> <tbody> <tr> <td>Furniture, Fixtures and Fittings (Home Furnishings)</td> <td></td> </tr> <tr> <td>Electrical/Electronic</td> <td></td> </tr> <tr> <td>Others</td> <td></td> </tr> </tbody> </table>	Items	Sum Insured	Furniture, Fixtures and Fittings (Home Furnishings)		Electrical/Electronic		Others	
Items	Sum Insured								
Furniture, Fixtures and Fittings (Home Furnishings)									
Electrical/Electronic									
Others									
<p>13. In case of Basement, If there are contents in it, please provide the Sum Insured</p>									

**F. In-Built Covers (Loss of Rent & Rent for Alternative Accommodation)**

<p>14. Cover for (Please Tick)</p> <table border="1"> <tr> <td>Loss of Rent</td> <td></td> </tr> <tr> <td>Rent for Alternative Accommodation</td> <td></td> </tr> </table>	Loss of Rent		Rent for Alternative Accommodation		<p>Loss of Rent:</p> <ol style="list-style-type: none"> <li>I. Sum Insured:</li> <li>II. Number of Months:</li> </ol> <p>Rent for Alternative Accommodation:</p> <ol style="list-style-type: none"> <li>I. Sum Insured</li> <li>II. Number of Months</li> </ol>
Loss of Rent					
Rent for Alternative Accommodation					

**G. Optional Covers (available on payment of additional premium)**

<p>15. Do You require 'Personal Accident Cover' for Yourself and Your spouse?</p>	<p>Yes/No</p> <p>If Yes,</p> <p>Name &amp; age of Your spouse:</p> <p>Your age:</p>
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16.	Do You require 'Cover for Valuable Contents on Agreed Value Basis (under Home Contents cover)': <b>(Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.)</b> (You have to submit a Valuation Certificate. However, the requirement of valuation certificate is waived if the Sum Insured opted for is up to ₹ 5 Lakh and Individual item value does not exceed ₹ 1 Lakh).	Yes/No  If Yes, please attach list of items and Sum Insured:  Valuation certificate attached? (Yes/No)
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TOTAL (Section 1 Contents)	Rs.
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SECTION 2	BURGLARY AND HOUSEBREAKING INCLUDING LARCENY OR THEFT AND OTHER PERILS												
Part A	CONTENTS												
Item 1	General Items	Rs.											
Item 2	Specifically Declared Items.												
	Jewelry and Valuables(Please attach a separate list of value and description)	Rs.											
	Money (up to Rs25,000/-)	Rs.											
	Any other Items	Rs.											
	Personal Effects including clothing, books, furniture including items of Your children staying away for the purpose of study (up to Rs. 50,000/-)	Rs.											
	<table border="1" style="width: 100%;"> <thead> <tr> <th>Any Other Item</th> <th>Description</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>1</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td></td> <td></td> </tr> <tr> <td>3</td> <td></td> <td></td> </tr> </tbody> </table>	Any Other Item	Description	Value	1			2			3		
Any Other Item	Description	Value											
1													
2													
3													
<b>TOTAL (Section 2 Contents)</b>		Rs.											

NOTE: Please see Note under Section 1 above, which is applicable for Section 2 also.

Part B	BUILDING	Rs.	
	OPTIONAL EXTENSION		
Item 1	Escalation Clause (Specify the % increase) Building <input type="checkbox"/> Contents <input type="checkbox"/>	Rs.	
Item 2	Pet Insurance [Limit: Rs. 1,000 to Rs. 25,000/-]	Rs.	
Item 3	Trees and Plants[Limit: Rs.50,000/-]	Rs.	
Item 4	Money [Limit: Rs.50,000/-.]	Rs.	
Item 5	Documents and Cards [Limit: Rs. 25,000/-.]	Rs.	
	Type of Card		
	Card number		
	Name of the Issuance Company		
TOTAL		Rs	

SECTION 3		ALL RISK		
<b>Part A</b>		<b>Property Insured: Jewelry and Other Valuables</b>		<b>Sum Insured</b>
Item 1	Jewelry (Please attach separate list for each item along with description and value)	Rs		
Item 2 & 3	<b>Photographic Equipment (Item 2)</b> - (Not more than 7 years old) & <b>Other Valuable- (Item 3)</b> - Effects (watches, clock, furs, lamps, chandeliers, hand bags etc.)			
	<b>SNo.</b>	<b>Description (Make/Model)</b>	<b>Value</b>	
	Do you wish to cover all the jewelry items listed above? Yes <input type="checkbox"/> No <input type="checkbox"/>			Rs
	If <b>No</b> , please mention the % of jewelry you wish to cover (lying outside the bank locker) _____			
TOTAL				
<b>Part B</b>		<b>Property Insured: Fine Arts</b>		<b>Sum Insured</b>
Item	Fine Arts including paintings, artefacts, etchings, statuary, antiques		Rs.	
	<b>SNo.</b>	<b>Description</b>	<b>Value</b>	
TOTAL				
<b>SECTION 4</b>		<b>FIXED GLASS AND SANITARY FITTINGS</b>		
Item 1	<b>Plate Glass &amp; Sanitary Fitting- details with dimensions and description of tinted, embossed ornamental or painted items</b>			<b>Sum Insured</b>
	<b>SNo.</b>	<b>Description</b>	<b>Dimensions</b>	<b>Value</b>
				Rs.
				Rs.
				Rs.
TOTAL				Rs.
<b>SECTION 5</b>		<b>ELECTRONIC EQUIPMENT (FOR COMPUTER, FAX MACHINE OR ANY OTHER ELECTRONIC ITEM)</b>		
Item 1	<b>SNo.</b>	<b>Description of Item</b>	<b>Year Of Manufacture</b>	<b>Sum Insured</b>
				Rs.
				Rs.
				Rs.
Item 2	Value of Data Carrying Material			Rs.
TOTAL				Rs
<b>SECTION 6</b>		<b>HOME ENTERTAINMENT EQUIPMENT, PORTABLE COMPUTER ETC. &amp; PEDAL CYCLE</b>		

Part A		HOME ENTERTAINMENT EQUIPMENT (T.V., VIDEO, ETC.)				
	SNo.	Description of Item	Brand Name	Year of Manufacture (Not More than 7 years old)	Sum Insured	
TOTAL					Rs.	
Part B		PORTABLE COMPUTER, MOBILE PHONES, TABLETS, MOBILE AUDIO DEVICES				
Item 1	SNo.	Description of Item	Brand Name	Year of Manufacture (Not More than 7 years old)	Sum Insured	
Item 2	Value of Data Carrying Material				Rs.	
TOTAL					Rs.	
Do you wish to opt out of the breakdown cover? Yes <input type="checkbox"/> No <input type="checkbox"/>						
Part C		PEDAL CYCLE				
Item 1	SNo.	Description of Item	Brand Name	Year of Manufacture (Not More than 7 years old)	Sum Insured	
TOTAL					Rs.....	
SECTION 7		BREAKDOWN OF DOMESTIC APPLIANCES				
	SNo.	Description of Item	Brand Name	Year of Manufacture (Not More than 7 years old)	Sum Insured	
TOTAL					Rs.	
SECTION 8				PERSONAL ACCIDENT		
Insured Person Name	Age	Monthly Income	Table of Cover	Nominee	Medical Ext.	Sum Insured
					Y <input type="checkbox"/> N <input type="checkbox"/>	Rs.

					Y <input type="checkbox"/> N <input type="checkbox"/>	Rs.
					Y <input type="checkbox"/> N <input type="checkbox"/>	Rs.
					Y <input type="checkbox"/> N <input type="checkbox"/>	Rs.
					Y <input type="checkbox"/> N <input type="checkbox"/>	Rs.
					Y <input type="checkbox"/> N <input type="checkbox"/>	Rs.

NOTE: Table of Cover can be chosen as either Table A (Death), Table B1 (Death and Permanent Disabilities), Table B (Death, Loss of Limbs and Permanent Disabilities) or Table C (Death, Loss of Limbs, Permanent and Temporary Disabilities)

**Specific declarations with respect to Section 8 – Personal Accident**

1. I/We hereby declare, on my behalf and on behalf of all persons proposed to be insured, that the above statements, answers and/or particulars given by me are true and complete in all respects to the best of my knowledge and that I/We am/are authorized to propose on behalf of these other persons.
2. I understand that the information provided by me will form the basis of the insurance policy, is subject to the Board approved underwriting policy of the insurance company and that the policy will come into force only after full receipt of the premium chargeable.
3. I/We further declare that I/we will notify in writing any change occurring in the occupation or general health of the life to be insured/proposer after the proposal has been submitted but before communication of the risk acceptance by the company.
4. I/We declare and consent to the company seeking medical information from any doctor or from a hospital who at anytime has attended on the life to be insured/proposer or from any past or present employer concerning anything which affects the physical or mental health of the life to be assured/proposer and seeking information from any insurance company to which an application for insurance on the life to be assured/proposer has been made for the purpose of underwriting the proposal and/or claim settlement.
5. I/We authorize the company to share information pertaining to my proposal including the medical records for the sole purpose of proposal underwriting and/or claims settlement and with any Governmental and/or Regulatory authority."

Date \_\_\_\_\_ Signature of Proposer: \_\_\_\_\_

Place: \_\_\_\_\_ Name of Proposer: \_\_\_\_\_

SECTION 9				LOAN PAYMENT PROTECTION		Sum Insured
Loan Particulars						
Loan for						
Land <input type="checkbox"/>	Vehicle <input type="checkbox"/>	House <input type="checkbox"/>	Other Consumer Durables <input type="checkbox"/>			
Any Other (Specify) <input type="checkbox"/> _____						
Name of Financial Institution						
Amount of Loan taken				Rs _____		
Amount of Equated Month Installments				Rs _____		
Total Loan Repayment Term (in Months)						



NOTE: The Sum Insured should represent the value of 24 EMI's or equivalent if loan repayment is other than on monthly basis. Please mention if the outstanding repayment term is less than 24 (twenty four) months _____					
Total					Rs.
<b>SECTION 10</b>		<b>BAGGAGE</b>			
					Sum Insured
Limit of loss for any one event and all events during the Policy Period					Rs.
<b>SECTION 11</b>		<b>LIABILITY INSURANCE</b>			
					Sum Insured
Part A	Public and personal liability				Rs.
	Limit of liability for any one accident and all accidents during Policy Period.				
Part B	Employees Compensation				
	SNo.	Number of Employees	Nature of Work	Annual Earning	Sum Insured
					Rs.
					Rs.
					Rs.
					Rs.
				TOTAL	Rs.
Part C	Tenant's Liability				
	Limit of liability for any one accident and all accidents during Policy Period				Rs.
<b>SECTION 12</b>		<b>INCREASED LIVING EXPENSES</b>			
					Sum Insured
Limit of indemnity for any one claim and all claims during Policy Period					Rs.
TOTAL					Rs.
Is the risk currently insured against any of the insured perils? If so,					
The name of Insurance Company					
Policy Type					
Period					
Has any Company in respect of any insurance cover?					
Declined your proposal?					
Cancelled or refused to renew your Policy?					
Accepted your Proposal on special terms and conditions?					
Have you ever claimed upon any Company for loss by any of the insured perils? If so, give details.					

**A minimum of 3 (three) Sections are compulsory including Section 1.**

- In respect of Sections 1, 2, 3, 4, 5, 6, 7 and 10, the insurance is on Reinstatement Value basis and Sum Insured should represent value of new property including freight, duties, etc. and cost of erection as applicable.
- In case space is insufficient for describing the items under any Section, please use additional sheets for giving full details.
-

I/We hereby declare that subject to any exceptions and variations disclosed in item below:

1. All reasonable steps to safeguard the property against loss or damage will be taken.
2. All the proofs, evidences and documents required in case of a claim will be provided to the Insurer.
3. I/We have disclosed all the facts which could influence the acceptance of this Proposal or the term(s) to be approved and the above facts, documents, statements shall be the basis of Contract between me/Us and IFFCO-Tokio General Insurance Co. Ltd.

I hereby declare and warrant that the above statements are true and complete. I agree that this proposal shall form the basis of the contract should the insurance be effected. If after the insurance is effected, it is found that the statements, answers or particulars stated in the proposal form and its questionnaires are incorrect or untrue in any respect, the insurance company shall incur no liability under this insurance.

I have read the prospectus/sales literature and am willing to accept the coverage subject to the terms, conditions and exceptions prescribed by the insurance company therein.

Date

Place:

\_\_\_\_\_  
Signature of Proposer:

Premium Detail			
Mode of Payment	<input type="checkbox"/> Cheque	<input type="checkbox"/> DD	<input type="checkbox"/> NEFT
Bank Name	Date		
Amount ( in ₹)			

#### SECTION 41 OF THE INSURANCE ACT 1938

##### PROHIBITION OF REBATES

Payment of rebates is expressly prohibited under 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 continuing a policy accept any rebate except such rebate as may be allowed in accordance with the prospectus 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 ten lakh rupees.