

# IFFCO-TOKIO General Insurance Company Limited

## INDUSTRY PROTECTOR POLICY

### PROPOSAL FORM

**Please answer all questions fully using BLOCK LETTERS**

Name	<input type="text"/>
Address for correspondence	<input type="text"/>
	Pin Code <input type="text"/> Tel. No <input type="text"/>
Address of Premises to be insured	<input type="text"/>
	Pin Code <input type="text"/> Tel. No <input type="text"/>
Business Details	<input type="text"/>
Name and Address of the Financial Institution/s (if their interest is involved)	<input type="text"/>
Period of Insurance	From <input type="text"/> am <input type="text"/> pm <input type="text"/> To <input type="text"/> am <input type="text"/> pm <input type="text"/>
Do you store hazardous goods beyond 5% of total Stock in Trade value	Yes <input type="checkbox"/> No <input type="checkbox"/> List of hazardous goods given at the end of this Form.

#### NOTE

1. A minimum of 4 (four) Sections are compulsory including Section 1 Part A.
2. The insured premises should not be of kutchra construction.
3. In respect of Sections 1,2,3,4 & 5 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. This does not apply to Part A Item 5 of Sections 1 & 2 where insurance is on Market Value Basis.
4. In case space is insufficient for describing the items under any Section, please use additional sheets for giving full details.

#### Section 1 Fire and Allied Perils

Part A	CONTENTS	Sum Insured
Item 1	Stock in Trade	₹ <input type="text"/>
a.	Raw Materials and Finished Goods	₹ <input type="text"/>
b.	Stock in process	₹ <input type="text"/>
Item 2	Plant and Machinery	₹ <input type="text"/>
Item 3	Business and Office Furniture	₹ <input type="text"/>
Item 4	Interior Decoration	₹ <input type="text"/>
Item 5	Any Other items	₹ <input type="text"/>
	<b>Total</b>	₹ <input type="text"/>
Do you require to cover under :		
I.	Declaration Clause (for Item 1a)	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If yes, select the basis of Declaration (a) Average of the values at risk on each day of the month (b) The highest value at risk during the month	(a) <input type="checkbox"/> (b) <input type="checkbox"/>

II.	Floater Clause (for Item 1a)	Yes		No	
	If yes, kindly mention the locations where Stocks will be covered:				
<b>Part B</b>	<b>BUILDING</b> Including outbuildings, boundary walls, gates/fences plinths and foundations	₹			
	<b>OPTIONAL EXTENSIONS (Maximum 4 can be chosen)</b>				
Item 1	Temporary Removal of Stock	₹			
Item 2	Debris Removal (Limit 10% of Sum Insured under Section 1)	₹			
Item 3	Professional Fees (Limit 7.275% of Sum Insured under Section 1)	₹			
Item 4	Earthquake (Fire and Shock)	₹			
Item 5	Terrorism Damage	₹			
Item 6	Escalation (Specify percentage increase chosen - 5% to 25%): .....%	₹			
Item 7	Any Other Extension	₹			

<b>Section 2 Burglary and Other Perils</b>					
<b>Alternative 1</b>	<b>CONTENTS (FULL VALUE BASIS)</b>	<b>Sum Insured</b>			
Item 1	Stock in Trade	₹			
a.	Raw Materials and Finished Goods	₹			
b.	Stock in process	₹			
Item 2	Plant and Machinery	₹			
Item 3	Business and Office Furniture	₹			
Item 4	Interior Decoration	₹			
Item 5	Any other Items	₹			
	<b>Total</b>	₹			
	Do you require to cover under:				
I.	Declaration Clause (for Item 1a)	Yes		No	
	If yes, select the basis of Declaration (a) Average of the values at risk on each day of the month (b) The highest value at risk during the month	(a)		(b)	
II.	Floater Clause (for Item 1a)	Yes		No	
	If yes, kindly mention the locations where Stocks will be covered:				
<b>Alternative 2</b>	<b>CONTENTS (FIRST LOSS BASIS)</b>				
	Please specify First Loss percentage opted	25%		33.33%	
		50%		75%	
		<b>Sum Insured (First Loss limit)</b>			
Item 1	Stock in Trade	₹			
a.	Raw Materials and Finished Goods	₹			
b.	Stock in process	₹			
Item 2	Plant and Machinery	₹			
Item 3	Business and Office Furniture	₹			
Item 4	Interior Decoration	₹			
Item 5	Any other Items	₹			
	<b>Total</b>	₹			
	<b>OPTIONAL EXTENSIONS</b>				
Item 1	Temporary Removal of Stock	₹			
Item 2	Escalation (Specify percentage increase chosen - 5% to 25%) : .....%	₹			

### Section 3 Machinery Breakdown and Boiler & Pressure Plant

Part A	MACHINERY BREAKDOWN				
	Qty.	Description of item	Sl. No.	Year of Manufacture	Sum Insured
i.					₹
ii.					₹
iii.					₹
iv.					₹
v.					₹
<b>Total</b>					₹
Part B	BOILER AND PRESSURE PLANT				
	Qty.	Description of item	Sl. No.	Year of Manufacture	Sum Insured
Material Damage i.					₹
ii.					₹
iii.					₹
Surrounding Property					₹
Third Party Liability					₹
<b>Total</b>					₹

### Section 4 Electronic Equipments

Item 1	Qty	Description of Item	Sl.No.	Year of manufacture	Sum Insured				
i.					₹				
ii.					₹				
iii.					₹				
iv.					₹				
Item 2		Value of Data Carrying Material			₹				
<b>Total</b>					₹				
Please state whether the Electronic Equipment is maintained under an approved Maintenance Agreement if value is more than Rs. 1 lac					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">Yes</td> <td style="width: 25%;"></td> <td style="width: 25%; text-align: center;">No</td> <td style="width: 25%;"></td> </tr> </table>	Yes		No	
Yes		No							
OPTIONAL EXTENSION									
Item 1		Terrorism Damage			₹				

### Section 5 Portable Computers and Mobile Equipments

Item 1	Qty	Description of Item	Sl. No.	Year of manufacture	Sum Insured				
i.					₹				
ii.					₹				
iii.					₹				
iv.					₹				
Item 2		Value of Data Carrying Material			₹				
<b>Total</b>					₹				
Please state whether the Portable Computer is maintained under an approved Maintenance Agreement if value is more than Rs. 1 lac					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">Yes</td> <td style="width: 25%;"></td> <td style="width: 25%; text-align: center;">No</td> <td style="width: 25%;"></td> </tr> </table>	Yes		No	
Yes		No							

### Section 6 Money

	MONEY	Sum Insured (Limit Any One Loss)
i.	Money in direct transit from or to the premises	₹
ii.	Money in direct transit between collection/payment center and Bank	₹
iii.	Money in premises during business hours	₹
iv.	Money in locked safe, strongroom steel almirah or standard cash box outside business hours	₹
<b>Total</b>		₹

Section 7 Fidelity Guarantee		
(a)	Total number of your employees	
(b)	Total number of employees for whom the guarantee is proposed*	Sum Insured
(c)	Amount of guarantee to be floated among insured employees	₹

**\*NOTE:** If the number of employees proposed for Fidelity Guarantee Insurance is less than the total strength of Your employees, then please attach names of employees and designation of employees to be covered.

Section 8 Personal Accident						
Insured Person Name	Age	Occupation	Monthly Income	Nominee Name	Nominee Relationship with Insured	Sum Insured
						₹
						₹
						₹
						₹
						₹
						₹
<b>Total</b>						₹

(Please note that the age limit of the Insured Persons for the purpose of this Section is 18 to 70 years)

Section 9 Business Interruption		
		Sum Insured
(a) Gross Profit		₹
(b) Auditors Fees		₹
<b>Total</b>		₹
OPTIONAL EXTENSION		
Item 1.	Terrorism Damage	₹

Section 10 Liability Insurance				
				Sum Insured
<b>Part A</b>	Public Liability Limit of liability for any one accident and all accidents during Policy Period.			₹
<b>Part B</b>	Workmen's Compensation			
	Number of Employees	Nature of Work	Annual Earning	Sum Insured
i.				₹
ii.				₹
iii.				₹
iv.				₹
<b>Total</b>				₹
Are the premises occupied by you at night? If not, by whom?				
Will the premises be guarded by watchmen? If so, by how many and during what time?				
Will the premises at any time be left unoccupied? If so, how often and for how long?				
Is the risk currently insured against any of the insured perils? If so,				
(a) The name of Insurance Company				
(b) Policy Type				
(c) Period				
Has any Company in respect of any insurance cover				

(a) Declined your proposal?	
(b) Cancelled or refused to renew your Policy?	
(c) 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.	

### DECLARATION AND SIGNATURE

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."

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: DD/MM/YYYY

Signature of the Proposer

Place: .....

### List of Hazardous Goods:

<ol style="list-style-type: none"> <li>1. Celluloid Goods</li> <li>2. Coir Loose</li> <li>3. Crackers and Fire Works</li> <li>4. Explosives of any kind</li> <li>5. Hay / Straw</li> <li>6. Hemp</li> <li>7. Jute Loose</li> <li>8. Matches</li> <li>9. Methylated Spirit</li> </ol>	<ol style="list-style-type: none"> <li>10. Nitro-Cellulose Plastics</li> <li>11. Oils/Ether/Industrial Solvents and other inflammable liquids flashing liquids flashing at and below 32°C (Closed Cup Test)</li> <li>12. Paints with inflammable base having flash point below 32°C (Closed Cup Test) other than in sealed tins or drums</li> <li>13. Varnishes having flash point below 32°C (Closed Cup Test) other than in sealed tins or drums</li> <li>14. Disinfectant liquids and liquid insecticides – other than in sealed tins or drums</li> <li>15. Vegetable fibers of any kind including rayon fiber.</li> </ol>
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### PROHIBITION OF REBATES

#### Section 41 of the Insurance Act 1938 provides as follows:

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 except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.
2. Any person making default in Company with the provisions of the section shall be punishable with fine which may extend to five hundred rupees.