



RAHEJA QBE GENERAL INSURANCE COMPANY

BOILER AND PRESSURE PLANT INSURANCE POLICY PROPOSAL FORM

(The property proposed for insurance is not covered until the proposal is accepted and premium paid)

BASIC INFORMATION

1. Intermediary's Name	
2. Intermediary's Code	
3. Name of the Proposer	
4. Communication Address	
5. Permanent Address	
6. Phone / Mobile Number	
7. Email id	
8. Paid up capital of the firm	
9. Name of the Insured (Policy to be issued in favor of)	
9a. Bank Account Details	Account No. Account Type: Savings/Current Name of the Bank & Branch: MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank):

	IFSC Code (11 character code appearing on your cheque leaf):
10. Do you wish to cover the interest of any financial institution? If yes, give the names of all financial institutions.	
11. Location details (Complete Address) of the risk to be insured.	
12. District in which the risk is located	
13. State in which the risk is located	
14. Pin code of the location of risk	

15. Risk Occupancy	
16. Period of Insurance: Start Date (dd/mm/yyyy). Note: Please ensure that the policy date and time is on or after the date of payment of premium to us.	
17. Period of Insurance: End date (dd/mm/yyyy) Note: Policy period should be for a maximum of one year. If you choose a shorter period than one year, then our short period scales of premium computation	

shall be adopted.																																																																																
Nomination:	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr style="background-color: #e1f5fe;"> <th style="padding: 5px;">NOMINEE DETAILS</th> <th style="padding: 5px;">1st Nominee</th> <th style="padding: 5px;">2nd Nominee</th> <th style="padding: 5px;">3rd Nominee</th> <th style="padding: 5px;">4th Nominee</th> </tr> <tr> <td style="padding: 5px;">Name of Nominee</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Date of Birth of Nominee(In DD/MM/YYYY)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Percentage of Nomination</td> <td>_____ %</td> <td>_____ %</td> <td>_____ %</td> <td>_____ %</td> </tr> <tr> <td style="padding: 5px;">Relation with the Insured</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Mobile No.</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Email ID</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Present Address</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Permanent Address</td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p style="margin-top: 10px;">In the event of death of the Proposer, any payment due under the Policy shall become payable to the nominee, as per the 'Nomination' clause defined by the IRDAI and the receipt of the proceeds by such nominee would be sufficient discharge to the Company. For all other persons covered under the Policy, the Proposer will be the nominee</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center; margin-top: 10px;"> <tr> <th style="padding: 5px;">Bank account details of the nominee</th> <th style="padding: 5px;">1st Nominee</th> <th style="padding: 5px;">2nd Nominee</th> <th style="padding: 5px;">3rd Nominee</th> <th style="padding: 5px;">4th Nominee</th> </tr> <tr> <td style="padding: 5px;">Account no.:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Account Type (Saving/Current)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">Name of the Bank & Branch:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">MICR code(9 digit)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">IFSC code(11 character code):</td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p style="margin-top: 10px;">DETAILS OF APPOINTEE (Details to be filled only if nominee is a minor)</p> <p>Appointee Name: _____ Relationship with Proposer: _____</p>					NOMINEE DETAILS	1 st Nominee	2 nd Nominee	3 rd Nominee	4 th Nominee	Name of Nominee					Date of Birth of Nominee(In DD/MM/YYYY)					Percentage of Nomination	_____ %	_____ %	_____ %	_____ %	Relation with the Insured					Mobile No.					Email ID					Present Address					Permanent Address					Bank account details of the nominee	1 st Nominee	2 nd Nominee	3 rd Nominee	4 th Nominee	Account no.:					Account Type (Saving/Current)					Name of the Bank & Branch:					MICR code(9 digit)					IFSC code(11 character code):				
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A. BOILER AND PRESSURE PLANT

Sl. No.	Location	Description – Maker's Name, Maker's No., Capacity	Registration Number	Year of Make	Sum Insured

B. SURROUNDING PROPERTY OF THE INSURED INCLUDING PROPERTY HELD IN TRUST OR COMMISSION

Inbuilt coverage is maximum of Rs 25 lakhs

NB: If higher coverage is required please provide the amount in S.No.17 additional coverage

C. LEGAL LIABILITIES TO THIRD PARTIES

Inbuilt coverage is m **AOY** maximum of Rs 5 lakhs for Personal Injury

Inbuilt coverage is maximum of Rs 5 lakhs for Property Damage

NB: If higher coverage is required please provide the amount in S .No.17 additional coverage

18.	On payment of additional premium do you wish to cover the following? If yes provide limits of indemnity:		
	a) Express Freight (excluding Airfreight), overtime and Holiday rates of wages)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Rs.
	b) Air Freight	<input type="checkbox"/> Yes <input type="checkbox"/> No	Rs.
	c) Owners surrounding property	<input type="checkbox"/> Yes <input type="checkbox"/> No	Rs.
	d) Third Party Liability (Personal Injury/Property Damage)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<ul style="list-style-type: none"> • AOA: Rs. • AOY: Rs.
	e) Additional Customs Duty	<input type="checkbox"/> Yes <input type="checkbox"/> No	Rs.
19.	a) In case of Boiler, state if it is Water tube type?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	b) If yes, what is the evaporative capacity per hour?		

20.	State how Boiler is fired, e.g. Oil, Gas Coal or Pulverized fuel.	
21.	Do you wish to include the main steam piping within 100 meters radius of the Boiler?	<input type="checkbox"/> Yes <input type="checkbox"/> No
22.	Give particulars of any defects in the Boiler & pressure vessel	
23.	a) Which items of Plant are subject to periodical inspection?	
	b) By whom are they inspected, and at what Intervals?	
	c) Date of last inspection, working pressure approved, and period of such approval (attach copy of last report).	
	a) What is the maximum load on safety valve per square inch?	
24.	b) What is the working pressure?	
25.	a) Are the Boiler Attendant solely employed on the Boiler Plant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	b) What are their qualifications?	
	c) What proportion of their time is given to other duties, if not solely employed on the Boiler Plant?	
26.	a) Is the Boiler Plant presently insured?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	b) If so, state name of Insurer, and date policy expires.	
27.	In respect of Boiler Insurance, has any Insurer	
	a) Declined any proposal from you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	b) Cancelled or refused to renew your policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Note - Name of Insurer to be stated.	
28.	a) Have you ever had an accident to your Boiler Plant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	b) If so, give full particulars on separate sheet.	



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29.	Do you have any other Boiler Plant in use other than that specified in the schedule?	<input type="checkbox"/> Yes <input type="checkbox"/> No
30.	Is Boiler under regular and frequent supervision whilst working?	<input type="checkbox"/> Yes <input type="checkbox"/> No

DECLARATION FOR COMPLIANCE WITH ANTI MONEY LAUNDERING REGULATIONS

I hereby declare and warrant that to the best of my knowledge and belief the answers given above, documents or papers submitted, are complete in all respects and represent the true position and that I have not withheld any information material to this proposal. I agree that this proposal, the declarations and accompanying documents or papers shall form the basis of the contract proposed between me and Raheja QBE.

I/We hereby give my/our consent to Raheja QBE General Insurance Company Limited ('the Company') to verify and obtain my/our identity/address proof as well as the identity /address proof of the insured through Central KYC Registry or UIDAI or through any other modes for the purpose of undertaking KYC.

I/We hereby declare and confirm that the premium has been paid out of legally acquired sources of income and the subsequent premiums if any, will continue to be paid out of legally declared and assessed source of income.

I/We agree that the Policy shall become voidable at the option of the Company, in the event of any untrue or incorrect statement, misrepresentation, non-description or non-disclosure in any material particular in the personal statement, declaration and connected documents, or if any material information has been withheld by me/us or anyone acting on my/our behalf to obtain any benefit under this Policy.

I hereby declare and warrant that to the best of my knowledge and belief the answers given above and documentation submitted are true, complete and accurate and that I have not withheld any information material to this proposal. I agree that the information in this form and the accompanying documentation submitted shall form the basis of the contract

proposed between me and the Company.

Are you or any of the proposed applicants/beneficial owner a PEP* or a close relative of a PEP*? YES / NO

If yes, please give details:..... *Politically Exposed Persons (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States/ Governments, senior politicians, senior government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc



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Declaration when the proposal form is filled by a person other than the proposer/ the proposer signs in a vernacular language/ proposer is illiterate.

I hereby declare that I have read out and explained the content of this proposal form and all other connected documents incidental to availing the insurance policy from Raheja QBE GIC Ltd. to the proposer and that he/ she confirmed that he/ she has understood the same and that he/ she agrees to abide by all the terms & conditions of the same.

I hereby declare that I have fully explained to the proposer the answers to the questions that form the basis of the contract of insurance have also explained the contents in this form to the proposer in _____ language, that I have truly and correctly recorded the answers give by the proposer and that the proposer has affixed his/ her thumb impression on the proposal form in my presence, after fully understanding the contents thereof. Further, this declaration does not confirm issuance of policy or assumption of risk thereof. I hereby state that the contents of the form and documents have been fully explained to me and that I have fully understood the significance of the proposed contract.

Name of Proposer _____ Name of
Witness _____

Signature of Proposer _____ Signature of
Witness _____

Date: _____ Place:

Relationship with
Proposer: _____

Address of
Witness: _____

Signature(s): _____ Date: _____

Title: _____

A policyholder or prospect, who is a person with disability, may duly authorize a representative to give declaration on his/her behalf.

INSURANCE ACT 1938, SECTION 41 - PROHIBITION OF REBATES

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 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 Lakhs rupees.