

## PROPOSAL FORM - my:asset Home Insurance: Insta Home Insurance Plan

### GUIDELINES TO FILL THE FORM

1. Please fill the form in BLOCK LETTERS. Please answer all questions fully and correctly. All details with\* are mandatory.
  2. Please leave one box blank between two words and add a comma wherever line breaks are required while writing the address.
  3. Kindly contact the Company's Office or Agent for any doubts or clarifications on the proposal form.
- Note: The liability of the Company does not commence until this proposal has been accepted by the Company and premium paid.

PLEASE USE ONLY ORIGINAL PROPOSAL FORM. PHOTO COPIES WILL NOT BE ACCEPTED BY L&T INSURANCE

### FOR OFFICE USE ONLY

Branch Code :   
 Intermediary Code\* :   
 Intermediary Location Code :   
 Intermediary Employee Code :   
 Intermediary Reference Code :   
 Sales Manager Code :

### PROPOSER INFORMATION (Please enter details of the Customer)

Title\* (Pls Tick):  Mr.  Ms.  Mrs.  Others     
 Date of Birth\*:      
 Gender\*:  Male  Female     
 Marital Status\*:  Single  Married

Name of Proposer\*:

Father's/Parent's Name:

Occupation\*:  Government Service  Private Service  Self Employed  Housewife  Retired  Others: .....

Annual income\*:  Less than 5 lacs  Between 5-10 lacs  20 lacs and above     
 PAN No.: .....

If you are an L&T Employee, please provide your PS Number:      
 Company / Division Name:

### Correspondence Address\*:

Block No. \*:       Floor No.:       Building Name:

Street Name\*:       Locality:

Landmark\*:       City / Village\*:

State:       Pin Code\*:

Post Office:       Mobile No.\*:       Landline No.:

Email ID 1\*:

Email ID 2:

**PROPERTY DETAILS:**

Property Address\* (Please provide if this is different from the correspondence address)

Block No.\*:  Floor No.:  Building Name:

Street Name\*:  Locality:

Landmark\*:  City / Village\*:

State:  Pin Code\*:  Post Office:

Mobile No.\*:  Landline No.:

Email ID 1\*:

Email ID 2:

Class of Construction:  Year of Construction:  Built up area:

Floor on which property is situated:

Surrounding Area of Occupancy:  Residential Building  Commercial Building  Sea Shore / River Side  Open Space

Distance from Place of Water Bodies (Approx K.M.):

Security Available for the Property:  Security Guard  Electronic Device  Common Watchman  Fencing / Compound  None

Fire Protection Devices (Specify):

Distance from Fire Station (Approx K.M.):  Distance from Police Station (Approx K.M.):

In case of hypothecation, name and address of the Mortgager / Financier:

**COVERAGE** (Please select Plan by ticking it):

| Section | Cover                                   | Plan A  | Plan B  | Plan C  | Plan D  |
|---------|---|---------|---------|---------|---------|
| IB      | Fire & Allied Perils for Contents       | 1,00000 | 2,00000 | 3,00000 | 5,00000 |
| II      | Burglary & Housebreaking for Contents   | 1,00000 | 2,00000 | 3,00000 | 5,00000 |
| III     | Electronic equipments (All Risk)        | 15,000  | 30,000  | 45,000  | 90,000  |
| IV      | Protection to Domestic Appliances       | 15,000  | 30,000  | 45,000  | 90,000  |
|         | Pl tick the plan chosen                 |         |         |         |         |
|         | Total Premium without Service tax ₹     | 399     | 799     | 1,199   | 2,099   |
|         | Total premium including @ Service tax ₹ |         |         |         |         |

\*Period of Insurance: From ..... AM/PM on ..... to Midnight of .....

Has any Insurance Company ever declined the risk or refused renewal:  Yes  No

Previous policy details, if any : ..... Expiry date of previous policy: | D | D | M | M | Y | Y | Y | Y |

Claim status in your previous policy (if any): .....

PEMIUM PAYMENT DETAILS (Please provide the details of premium payment):

Payment option:  Cash#  Cheque  DD  Credit/Debit Card Premium Amount: ₹ | | | | | | | | | | | | | | | | | | | | | |

Amount in words: .....

#Cash towards premium will be accepted only at our branch Offices

Instrument No: | | | | | | | | | | Instrument Date: | D | D | M | M | Y | Y | Y | Y | Instrument Amount: ₹ | | | | | | | | | | | | | | | | | |

Bank Name: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

For Credit Card / Debit Card (only Proposer's Card to be accepted)

Name of Card Holder: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Card Type:  Master  Visa  Amex  Others .....

Card No: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Expiry Date: | D | D | M | M | Y | Y | Y | Y |

 L&T Insurance is the brand of L&T General Insurance Company Limited Registered Office: L&T House, N.M. Marg, Ballard Estate, Mumbai - 400001. Insurance is the subject matter of solicitation. IRDA Registration Number 146.



ACKNOWLEDGEMENT

my:asset

Received from Ms./Mrs./Mr. \_\_\_\_\_  
a sum of ₹ \_\_\_\_\_ through Cash#/Cheque/DD/Credit Card/Debit Card No. \_\_\_\_\_  
against your proposal for my:asset Home Insurance: Insta Home Insurance Plan

Neither the submission of a completed proposal for insurance or any payment for any policy sought, nor does issuance of a policy kit oblige the Company to agree to issue a policy, the decision of which is always in the Company's sole and absolute discretion.

Signature of L&T official/Intermediary: \_\_\_\_\_ Date: | D | D | M | M | Y | Y | Y | Y |

L&T official/Intermediary Name: \_\_\_\_\_ Time: | h | h | : | m | m |

#Cash towards premium up to ₹ 50,000 will be accepted only at our branch offices.

If the Company accept's a proposal for insurance, it shall be subject to the policy terms and conditions and the Company shall have no liability to make any payment if premium is not received by the Company in full and in time, or is not realised.

If a proposal is not accepted, the Company will inform you and refund any payment received from you without interest.

Place: \_\_\_\_\_

Branch Code: \_\_\_\_\_  
Intermediary Code\*: \_\_\_\_\_  
Intermediary Location Code: \_\_\_\_\_  
Intermediary Employee Code: \_\_\_\_\_  
Intermediary Reference Code: \_\_\_\_\_  
Intermediary Contact Details: \_\_\_\_\_

## DECLARATION

I hereby declare that the statements made in this Proposal Form are true and complete in all respect. I hereby further agree and understand that that this proposal and declarations shall form the basis of the contract between me and L&T General Insurance Company Limited, and that if, after the insurance is effected, it is found that any of the statements, answers or particulars are incorrect or untrue in any respect, the Company shall have no liability under this insurance.

I consent to receive information from the Company through electronic and telecommunication means from time to time.

I consent that the insurance would be effective only on acceptance of this application by the company and on payment of requisite premium by me in advance. In the event of non realization of the cheque, the policy shall be cancelled 'ab initio' and the company shall not be responsible for any liabilities of whatsoever nature under this policy.

Place: ..... Date: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 Time: 

|   |   |   |   |   |
|---|---|---|---|---|
| h | h | : | m | m |
|---|---|---|---|---|

\_\_\_\_\_  
Signature of the Proposer

## PROHIBITION OF REBATES – UNDER SECTION 41 OF INSURANCE ACT 1938

No person shall allow or offer to allow either directly or indirectly as inducement to any person to take out 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.

Any person making default in complying with the provision of this section shall be punishable with a fine which may extend to ₹ 500/-

### General guidelines covering the above:

- Please put a tick mark in the respective box wherever applicable and ensure that all the columns in the proposal form are fully completed and filled.
- Kindly ensure adequate Sum Insured to obtain just indemnity.
- Section IB: Fire and Allied perils and Section II: Burglary and house breaking cover for contents are compulsory.
- Home Insurance is applicable only for the residential buildings with RCC/RBC/Tiles/ACC/GI sheets and external walls of burnt bricks/stones/concrete blocks. No Kutcha construction will be proposed for and accepted by the company for insurance.
- All the items proposed must be free of any defects and must be in perfect condition at the time of inception of the policy.
- Maximum liability in respect of a single item under Section IB: Fire & Allied Perils is restricted to 20% of the contents value unless specifically declared.

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4/4



Toll-free Number  
1800-209-5846 (1800-209-LTIN)



Website  
www.ltinsurance.com



SMS  
'LTI' to 5607058 (56070LT)



**L&T Insurance** is the brand of L&T General Insurance Company Limited Registered Office: L&T House, N.M. Marg, Ballard Estate, Mumbai - 400001.

Corporate Office: L&T General Insurance Company Limited, 6th Floor, City 2, Plot no. 177, CST Road, Near Bandra-Kurla Telephone Exchange, Kalina, Santacruz (East), Mumbai – 400098, INDIA  
Insurance is the subject matter of solicitation. IRDA Registration Number 146.