



**COMMERCIAL & POLITICAL RISK INSURANCE  
PROPOSAL FORM**  
UIN: IRDAN106P0014V01201718

**1 APPLICANT INFORMATION**

Please fill the cell in

All information provided should be treated in the strictest confidence			
Applicant Company Name			
Address (for all correspondence)			
Postcode		Country	
Company Registration No.		GST No.	
Contact Person			
Job Title			
Telephone No.	Fax No.	Email	
Paid up capital / Main Shareholders (%)			
Annual Turnover	Domestic	Export	

**2 DEBTOR (Supplier / Buyer)**

Name			
Address			
Postcode		Country	
Company Registration No.		GST No.	
Business Activity			
Company Status	Private OR Public	% owned by the Government	
<b>GUARANTOR (Bank / Financial Institution / Company)</b>			
Name			
Address			
Postcode		Country	
Company Registration No.		GST No.	
Company Status	Private OR Public	% owned by the Government	

**3 CONTRACT DETAILS**

Subject :			
Value :			
Local Partner :			
Foreign Partner			
Payment currency :			
Account currency :			
Date of signature :			
Effective date of contract :			
Effective terms of contract :			
Terms of payment :			
		a) Advance :	b) Balance :
Means of payment :			
Guarantee of payment :			
Source / Percentage of financing :		Direct Payment	
Schedule :		Provisional acceptance :	Provisional acceptance :
(M = effective date of contract)		Final acceptance :	Final acceptance :
Arbitration and law of contract :			
Are the goods manufactured at a plant or premises owned by you or the Debtor			
Arbitration and law of contract :			
Is the Applicant acting as sole supplier or as a partner in a consortium or in a joint-venture ?			
Describe any service element included in the contract of sale			
Are the insured goods standard or specifically manufactured for the debtor ?			

Would it be difficult for the debtor to find another supplier ?	
Provide your estimate of the salvage value of the goods if sold to an alternative buyer	
Are the necessary Import licences under the insured contract obtained and valid for the performance period	
Are the necessary Export licences under the insured contract obtained and valid for the performance period	

#### 4 BONDS

	Value	Validity
Bid Bond :		
Advance Payment Bond :		
Performance Bond :		
Retention Bond :		
Issuing Bank(s) :		
Counter-guarantor (s) :		
Do you have had any calling of bonds ? If yes in which situation ?		

#### 5. GOODS INSURED (Stock, Plant, Equipment)

Nature :	
Value :	
Localisation :	
Method of valuation :	
Security measures :	

#### 6. PREVIOUS EXPERIENCE WITH THE COUNTRY OF RISK AND/OR THE DEBTOR FOR THE LAST THREE YEARS

Details of previous contracts with the Supplier/Buyer :				Credit terms :
Date	Value	Terms of payment	Schedule	
Did you obtain an insurance for these contracts ? If yes, please indicate :				
Are you negotiating with the debtor for any other contract ?				

#### 7. RISK COVERED

Contract Frustration Pre-Shipment		
Non-Payment or Non transfer		
Non-Repossession or Deprivation of Insured goods		
Calling of Bonds		
	Maximum Exposure	Guarantee Period
Contract Frustration Pre-Shipment		
Non-Payment or Non transfer		
Non-Repossession or Deprivation of Insured goods		
Calling of Bonds		
Do the risks covered and mentioned above will be covered by a third Party ?		Yes   No
If yes, indicate the name and the risk covered :		

#### 8. ADDITIONAL INFORMATIONS

**NOTES** Mention thereafter any information susceptible to improve the Company's assessment (experience, priority of the project, impact on the local

**9 DECLARATION**

**INSURANCE ACT 1938, SECTION 41 - PROHIBITION OF REBATES**

No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out renew or continue an insurance in respect of any kind of risks 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 prospectus or tables of the insurer.

Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lacs rupees.

The undersigned authorized representative(s) of the Applicant hereby declare(s) that the statements made in this proposal form are complete and true to the best of his / their knowledge and belief and that he / they have not withheld any material information. Non disclosure of any of material underwriting information may void any Policy issued ab-initio.

The Applicant undertakes not to disclose to any third party (including the Buyer/Supplier/Lessee) the existence of an application for any Policy that may be issued and agrees that this proposal form shall form the basis of an be part of any such Policy.

**Authorised Signature of Applicant(s)**

Name of Signatory	Date
Position in Company	Signature
Company Stamp	

*(If there is no company stamp, please write "duly authorised to sign for and on behalf of ... company name)*

Enclosed  
A copy of our most recent financial report and accounts is enclosed  
Copy of a standard contract.