

h. Details of Children

Education Protection (Section 2 B)				
S. No.	Name of Child / Children	Age	Bank Name and Branch (If any)	Bank Account No. (If any)
1				
2				
3				
4				
5				

5. Sum Insured Details. Please check/tick the plan opted:

Jan Kavach Yojna					
Particulars	Sum Insured Options				
	OPTION I	OPTION II	OPTION III	OPTION IV	OPTION V
Please tick the required plan					
Section 1A					
Fire:-Building	12,500	25,000	30,000	100,000	200,000
Section 1B					
Fire:-Contents	12,500	25,000	30,000	100,000	200,000
Section 1C					
Burglary:- Contents	12,500	25,000	30,000	100,000	200,000
Section 2A					
Personal Accident	15,000	30,000	50,000	150,000	200,000
Section 2B					
Education Protection	30,000	60,000	100,000	300,000	400,000
Premium (excluding S.T)	100/-	200/-	260/-	650/-	1050/-

6. Period of Insurance from _____ to _____

DECLARATIONS

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.

Place:

Proposer’s Signature

Date:

Premium Detail (Cash/Cheque)

Rs. ----- (including Tax)

Cheque No.

Cheque Date

Bank

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 on inducement to any person to takeout 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 Prospect or tables of the insurer.
2. Any person making default with the provisions of these Sections shall be punishable with fine which may extend to Ten Lakh rupees.