

**Proposal Form for Reliance Contractor's Plant and Machinery Policy**

The liability of the Company does not commence until this proposal has been accepted by the Company and premium paid.  
Information given herein will be treated in strict confidence.

**Intermediary Details (To be filled in BLOCK LETTERS)**

Intermediary Name \_\_\_\_\_ Code \_\_\_\_\_  
Branch Name \_\_\_\_\_ Code \_\_\_\_\_  
Sales Manager Name \_\_\_\_\_ Code \_\_\_\_\_

**Proposer's Details (To be filled in BLOCK LETTERS)**

1. Name of the Insured  Mr.  Mrs. \_\_\_\_\_  
2. Insurer's Trade or Business \_\_\_\_\_  
3. a) Address of the Proposer  
Flat Building \_\_\_\_\_  
Road/Street/Sector \_\_\_\_\_  
Area \_\_\_\_\_  
Taluka/Village/District/City \_\_\_\_\_ Pin Code \_\_\_\_\_  
State \_\_\_\_\_ Country \_\_\_\_\_  
Phone \_\_\_\_\_ Mobile \_\_\_\_\_  
Email \_\_\_\_\_ Fax \_\_\_\_\_  
b) Location of Operation (site of property to be Insured) Address  
Flat Building \_\_\_\_\_  
Road/Street/Sector \_\_\_\_\_  
Area \_\_\_\_\_  
Taluka/Village/District/City \_\_\_\_\_ Pin Code \_\_\_\_\_  
State \_\_\_\_\_ Country \_\_\_\_\_  
Phone \_\_\_\_\_ Mobile \_\_\_\_\_  
Email \_\_\_\_\_ Fax \_\_\_\_\_  
Nearest Railway station \_\_\_\_\_ Distance \_\_\_\_\_  
No of locations to be covered \_\_\_\_\_  
4. Period of Insurance From  d | d | m | m | y | y | y | y  To  d | d | m | m | y | y | y | y

**Policy Details (To be filled in BLOCK LETTERS)**

Put a (✓) tick mark wherever applicable

5. Do the items listed represent the entire machinery used by you at the above location.  Yes  No  
6. Are you at present Insured?  Yes  No  
If so, please specify the Insurance Company \_\_\_\_\_  
7. Has any company  Yes  No  
a. Declined to insure any of the Machinery now proposed  Yes  No  
b. Required an increased premium or imposed special conditions  Yes  No  
c. Requested for repairs or made other special stipulations for risk improvement  Yes  No  
d. Is the equipment cover under CAR or EAR policy  Yes  No  
8. Are you aware of any defects / damages existing in the machinery?  Yes  No  
If so, give details thereof \_\_\_\_\_



9. Do you own or use any equipment other than that described above working on the same site?  Yes  No
10. Is any of the equipment now proposed;
- a) Licensed for road use?  Yes  No
- If yes, please give details \_\_\_\_\_
- b) Covered by any other insurance?  Yes  No
- If yes, please give details \_\_\_\_\_
11. a) Is the equipment indigenous imported or others  Indigenous  Imported  Others
- b) Sum insured for imported machinery
12. a) Are you the owner of the proposed equipment?  Yes  No
- b) If yes, will you be hiring out?  Yes  No
- c) If the equipment is hired;
- i) Is Insurance your responsibility?  Yes  No
- ii) Is maintenance and operation your responsibility?  Yes  No
13. Are the premises where the equipment operates well guarded?  Yes  No
14. a) What is the site condition where the equipment will be utilized? Give details \_\_\_\_\_
- b) Are the equipment likely to operate on Reclaimed or Soft Ground?  Reclaimed  Soft Ground
- c) Are the equipment likely to operate Underground, Ground level or Tunnel?  Underground  Ground level  Tunnel
- d) Are ground condition such that equipments are exposed to the risk of toppling over?  Yes  No
- e) Is the site susceptible to flood, sea damage, storm, cyclone or other natural calamities?  Yes  No
- If so, please give detail and safety precautions taken \_\_\_\_\_
- f) Is the equipment and machinery is mounted in floating vessel  Yes  No
- g) Are the equipments Stationary or Mobile  Stationary  Mobile
15. Will equipment belonging to other contractors operate on the same site?  Yes  No
16. Do you have trained and qualified operators?  Yes  No
17. Are there any statutory rules governing the appointment?  Yes  No
18. Which of the equipments are required to be inspected and certified for operation by statutory rules? \_\_\_\_\_
19. a) Has your machinery sustained any damage from breakdown or other cause during last 3 years?  Yes  No
- b) If yes, please details of damage/s and repairing cost
- c) Incurred Claims for all the equipments in the last 3 years
- d) Premium paid for all the equipments in the last 3 years
20. a) Is regular periodical inspection of the machinery carried out?  Yes  No
- b) If so, by whom and at what intervals? \_\_\_\_\_
- c) Are the Equipments under AMC or Warranty  Yes  No
- d) Does the Owner or Contractor or the premises in which the equipment is operated has ISO certification  Yes  No
- e) Does the Insured has standard preventive maintenance schedule  Yes  No
- f) Are spares with long term time of procurement available on site  Yes  No
21. Any other good feature, please specify \_\_\_\_\_
22. Whether Floater Cover is opted  Yes  No
- a) Any where in India  Yes  No
- b) Address of the location \_\_\_\_\_
- c) No. of locations to be covered \_\_\_\_\_
- d) Is any location outside Indian Territory \_\_\_\_\_

23. On payment of additional premium do you wish to cover:
- a. Express Freight (excluding Airfreight), Overtime and Holiday rates of wages  Yes  No
- b. Air Freight  Yes  No
- c. Owners surrounding property  Yes  No
- d. Clearance & Removal of Debris  Yes  No
- e. Additional Custom Duty  Yes  No
- f. Escalation  Yes  No
- g. Third Party Liability-
- i. For any one accident  Yes  No
- ii. For all accident during the period  Yes  No
- h. Do you require Earthquake Cover  Yes  No
- if higher excess opted for excess selection
- excess selected
24. Do your require terrorism cover  Yes  No
25. Higher excess required for perils other then earthquake  Yes  No
26. Is equipment cover under LOP  Yes  No

**Following appendix to be used for capturing individual machine details the user shall enter the number of machineries this will allow him to enter following into for each machinery.**

Serial No.	
Description	
Type	
Model	
Capacity	
Sum Insured	
Group Category	
Risk Code	
Rate	
Standby Machinery	
Underground Cover	
Dismantling Required	
Portable Machinery	
Makers Name and Country of Origin	
Year of make	
Location Address	
Address 1 -	
Address 2 -	
Address 3 -	

I/We hereby declare that the statements, answers and particulars given by me/us in this proposal form are true to the best of my/our knowledge and belief. It is hereby understood and agreed that the statements, answers and particulars provided hereinabove are the basis on which this insurance is being granted and that if, after the insurance is affected, 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/We agree and undertake to convey to Reliance General Insurance Company Limited any additions/alterations carried out in the risk proposed for insurance after submission of this proposal form.

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

Date: \_\_\_\_\_

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

**Prohibition of rebates - Section 41 of The Insurance Act 1938**

- 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 or 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 provisions of this Section shall be punishable with fine which may extend to Rs. 500/-