TOTAL

Covers Electronic Equipment (upto 7 yrs) / Machinery Breakdown (upto 7 yrs)

EEI / MB EEI / MB



## **My Business My Choice** Office



Note: 1) Policy wordings are available on request. 2) Please complete all sections in capitals and tick boxes wherever applicable. 3) Failure to disclose facts

material to the assessment of th																			is insu	fficien	t.				WITI	ı yol	J ALW	AYS
Insured / Business Name																												
Contact Person																												
Address for																												
Correspondence																						PIN						
	Tel: Fax:																М											
Description of Business																	Per	iod o	f	Fro	m:	_:_	hrs	D	D	M	M Y	Y
Bank/Financing Institution	n																Ins	ıranc	е					D	D	M	MY	Y
Paid-up Capital							< 15	Cr		>	15 Cr									To	: (midı	night)				101	V 1	1.

Risk Location (L) & Details: (RCC / Brick Work structure aged < 30 yrs only is covered. Kutcha / Temporary structure, Basements not covered)

T			RISK	LOCATION		Occupancy*	Location**	Age of Structure	EQ	SIC	HG
L	D.No.	Street	Village / City	District / State	PIN			(Yrs)	Zone	Code	Code
1											
2											
3											

3																		
*Occ	upand	y: Residential (R) / Off	fice (O) / Shop	p (S) / God	own (G) / Mfg . Unit (	MU) / Others - Specify						/ Higher Floo	or (H) / Dwe	elling i	n Mfg . Uni	(DMU)		
·√	' to E	xclude Covers			'√' to Include Add	on Covers			'√'Fire E	xtinguishin	g Applia	ances Insta	alled		'√' Vol	untary De	ductibl	e Desired
	Vlalic Storn	Strike & ious Damage n Tempest & Inundation	Other A Material D Fees, 4) Le Temporar 8) Deterior 10) Forest	Porism da Add-on Co Damage Co eakage & C y Removal tration of si t Fire, 11) In	vers: 1) Omission to Ins ver, 3) Start-up Expens contamination Cover, 5) of Stocks, 7) Deteriora tocks due to change in mpact Damage by own	es, Architects, Engine Spontaneous Combu tion of Stocks due to temperature, 9) Remo	ers etc., ustion, 6) power failure aval of Debris,	, C	Fixed wa	ached certific bliance & Ti bliance & H bliance & In	cate of ap railer pu ydrant s idepend	proved ager imp/ Fire e system ent sprink	ncy of TAC) engine ler /	)	AOG AOG	20 lakhs 30 lakhs 60 lakhs	/ Other / Other / Other	s 5 lakhs s 10 lakhs s 15 lakhs s 30 lakhs ers 50 lakhs
		Enter	Sum Ins	ured P	articulars per l	Location(L). (l	nadequa	ate Su	ım İnsur	ed will a	ttract	provisio	ons of l	Jnde	er Insura	nce cla	use).	
	П	Building	Plinth & For	undation	Compound Wall	Sum Insured	Basic	Dis	scounts	Exclus	sions	Discou	ints	,	Add on Cov		Rate	Premium
ING.	1	(with P&F)	(separat	te SI)		Total	Fire (1)	< -5 yr.	e (1.2) Const. Type AA or A	+ RSMD(2)	STFI (3)	FEA (4), % (1-2-3) 9	%(1-2-3-4)	ΕΩ	Terrorism		%-	
BUILDING	2																	
m	3																	
Ś	L	Furniture & Fixture / Off. Equipment	Electrical	Fittings	Plant & Machinery / Equipment	Sum Insured Total			'√' for Rei Not for S		nt Valu	ue Policy	(Bldg. &	Con	tents only	·)		
EN	1																	
CONTENTS	2																	
O	3																	
S	L	Stock in Process / Finished	Stock in G	Godown	Stock in Open	Sum Insured Total									AOG 10 I AOG 30 I AOG 30 I AOG 30 I AOG 100 I			
STOCKS	1																	
ST	2																	
	3																	
							TOTAL											
No	te: S	Stocks-in-ope	Fees, 4) Leakage & Contamination Temporary Removal of Stocks, 7 8) Deterioration of stocks due to 10) Forest Fire, 11) Impact Dama Rent for alternate accommodation  Enter Sum Insured Particular  g Plinth & Foundation (separate SI)  Fixture / Electrical Fittings Plant & Machine Equipment  Plant & Machine Equipment  Toopen cannot be covered under the Equipment of	vered unless a														
						OPTIONAL	_											I
	L					Stocks	Othe	rs - spe	ecify	Sum	Insured	ı	First Lo (50%				Rate ‰	Premium
₹	1																	
BURGLARY	2																	
BUR	3		l-1 I C	- 11-1														
					ement round the clo						_	TOT						
	Aı	e the insured prer	mises prote	ected with	n Solid [	Doors / Gates / Gri	Ils/ Rolling	Shutte	rs / Glass D	oor		Burglary A	larm syst	tem				
삦토		Portable Equipme Details	ent#		Make	Model	Year of Mfg			Serial N Identifi			1A	МС	Sum Ir	sured*	Rate ‰	Premium
PORTABLE EQUIPMENT													Yes	/ No				
POR													Yes	/ No				
	* B			acement	value of same mak			s/PDA's	are exclud					тота	L			
NWOC	L					Make	Year of Mfg	ı		Serial N Identifi			1A	MC			Rate ‰	Premium

Bank:

Approx Annual Carrying (Rs.) Limit per Transit (Max. 3 Lacs) (Rs.) (Max. 1 lac (Rs.)		L	☐ Mo		in Sat		-			Fr	rom	<b>1</b>					To	)		Mone						ual C						☐ F	First Lo	oss ansit	Ra %	ite 60	Pre	emium	
Core Now y Minister in remains the month of the Color o	<u>}</u>	1					#			Off	ice				Ba	nk	81	Bar	ck	Ap	pprox	Annua	ai Carry	ung (R	S.)		∟ımıt ı	per Ira	nsit (IVIa)	. 3 Lacs)	(ns.)	(IVIa)	k, i lac (l	ns.)					
Concess permanent employees on the Age Gorgan Value of Acceptant Val	NO IN						#																													$\neg$			
Contract Work Place (office)   Contract Workers							$\dagger$																													$\neg$			$\dashv$
L Description Site Location No's *Dimensions (Lx 8) Sum Insured Note No.   Premium Site Location No's *Dimensions (Lx 8) Sum Insured Note No.   Premium Site Location No.		Cove													to you	ır bu	ısine	ss v														тот	AL						
1 Plate Glass / Noon Sign 2 Plate Glass / Noon Sign 3 Plate Glass / Noon Sign 4 Plate Glass / Noon Sign 5 Plate Glass / Noon Sign 6 Plate Glass / Noon Sign 7 Plate Glass / Noon Sign 7 Plate Glass / Noon Sign 7 Plate Glass / Noon Sign 8 Plate Glass / Noon Sign 9 Plate Glass / No											_	_	_																				_	_			_		
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Nature of Work  Nature of Work  No. of Employees  Total Annual Wages / Solaries  Nature of Work  No. of Employees  Total Annual Wages / Solaries  Total Annual Wages / Solaries  Total Annual Wages / Solaries  Sum Insured / Rate / Premium / Solaries  Name  Age Occupation Amy Infirmty / Disability Name  1. Covers permanent employees are covered on Name 6 Total Annual Wages basis.  TOTAL  1. Covers only persons in the Age Group 18 to 65 years 2. Death, permanent disability, persial disability is temporary tost disability or covers as a solability for solaries and finance of the capital (Rs.)  Non-industrial  Permanent Employees  Designation  Designation  Department  Any One Event Limit  Any One Year  Rate / Premium  Sum Insured  Rate / Premium  Sum Insured  Rate / Premium  Rate / Premium  Rate / Premium  Sum Insured  Rate / Premium  Rate / Premium  Rate / Premium  Sum Insured  Rate / Premium  Rate / Premium  Sum Insured  Rate /	S		Plate	Glass	/ Ne	on Si	ign	_			_	_																X											
Nature of Work Work Premium (attach details)  Name Age Occupation Anylinfirmity/ Nominee Reliation Category Premium (attach details)  Name Age Occupation Anylinfirmity/ Name Indiana (attach details)  Name Age Occupation Anylinfirmity/ Name Indiana (attach details)  1. Covers only personal in the Age Group 15 to 65 years. 2. Death, permanent details(in, partial details) is employees.  Name Padd Up Anylinfirmity/ Name Accident Limit (Rs.) Any One Year Aggregate (Rs.)  Non-industrial  Non-industrial  Non-industrial  Permanent Employees  Designation Department Any One Event Limit Any One Year Rate Aggregate (Rs.)  Non-industrial  Permanent Employees  Designation Department Any One Event Limit Any One Year Rate Aggregate (Limit)  Non-industrial  Permanent Employees  Designation Department Any One Event Limit Any One Year Rate Aggregate Limit Non-Industrial  Named	5	_					_	_			_	_	_															X											4
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Name   Age   Occupation   Any Infirmity / Nominee   Relation   Category   Benefit   Capital Sum   Rate   Premium   Age   Occupation   Disability   Name   Relation   Category   Benefit   Capital Sum   Rate   Premium   Age   Coulomb   Any One   Capital Sum   Age   Coulomb   Age   Age	,		Na	ature	of W	ork				٧							N				1	otal			ges /	/						Sum	Insure	ed			Pre	mium	
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## IMPORTANT

Prohibition of Rebates (Section 41 of the Insurance Act1938)

1. No person shall allow or offer to allow either directly or indirectly as inducement to any Person to take 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 such a rebate except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer.

2. Any Person making default in complying with the provision of this section shall be punishable with fine which may extend to five hundred rupees only.

A + B) Total Amount Payable: