

## PROPOSAL FORM

### JEWELLER'S BLOCK INSURANCE POLICY

The property proposed for insurance is not covered and the liability of the Company does not commence until the Proposal is accepted by the Company and premium paid in advance and upon full realization of the premium payment by the Company prior to the inception of cover. The Company is under no obligation to accept this Proposal. Receipt of this Proposal by the Company along with the premium payment does not tantamount to the acceptance of the Proposal by the Company and does not result in a concluded contract of insurance.

Coverage is as per the terms and conditions of "Liberty General Insurance's" Standard Policy Wordings.

The Policy shall become voidable at the option of the Insurer, in the event of any untrue or incorrect statement, misrepresentation, misdeclaration, non-description, fraud failure to disclose or suppression of any material facts or non-cooperation of the Insured in response to the questions in the Proposal Form or on non-disclosure of any material particular. The Insurer will rely on the details furnished herein in deciding to issue the policy. Should any of the information furnished herein be incorrect or incomplete, you/Insured are/is required to furnish the correct and complete details prior to the issuance of the policy failing which the details contained herein will be construed as being binding on you/Insured.

- Note: 1) Please complete the Proposal Form in BLOCK LETTERS and tick the boxes whichever are applicable.  
2) Attach additional sheets, if space given is insufficient.

#### COMPANY OFFICE DETAILS (To be filled by Insurer)

1. Office Code: \_\_\_\_\_
2. Office Address: \_\_\_\_\_
- Road \_\_\_\_\_ Area \_\_\_\_\_
- City \_\_\_\_\_ District \_\_\_\_\_
- State \_\_\_\_\_ Pin Code \_\_\_\_\_

#### INTERMEDIARY DETAILS

1. Agent / Broker Name: \_\_\_\_\_
2. Agent / Broker Licence Code: \_\_\_\_\_
3. Agent / Broker Contact Number : \_\_\_\_\_

#### PROPOSER DETAILS

1. Proposer Name: \_\_\_\_\_
2. Office Address: \_\_\_\_\_
- Road \_\_\_\_\_ Area \_\_\_\_\_

#### Jeweller's Block Insurance Policy – Proposal Form

Liberty General Insurance Limited, Unit 1501 & 1502, 15th Floor, Tower 2, One International Center, Senapati Bapat Marg, Prabhadevi, Mumbai - 400013.

Phone: +91 22 6700 1313 Fax: +91 22 6700 1606, Email: [care@libertyinsurance.in](mailto:care@libertyinsurance.in)

Call Toll Free No : 1800 266 5844, website : [www.libertyinsurance.in](http://www.libertyinsurance.in)

IRDA of India registration number: 150 | CIN: U66000MH2010PLC209656

UIN No: IRDAN150P0013V01201617

City \_\_\_\_\_ District \_\_\_\_\_  
State \_\_\_\_\_ Pin Code \_\_\_\_\_

3. Nature of Business ☐ Wholesale ☐ Retails ☐ Manufacturing ☐ Pawn Broking

4. How long the insured has been engaged in the business \_\_\_\_\_

5. Period of Insurance (DD/MM/YYYY) From: \_\_\_\_\_ To: \_\_\_\_\_

### DETAILS ABOUT SUBJECT MATTER COVERED

#### 1. Construction of Building –Please state materials used.

- i) Walls ☐ RCC ☐ Brick ☐ Stone or concrete block ☐ Wooden Planks  
 ii) Floor ☐ RCC ☐ Brick ☐ Stone or concrete block ☐ Wooden Planks  
 iii) Roof ☐ RCC ☐ Tiles, cement, Ceramic fuses ☐ AC/CGI/AL sheeting

B. Height of Building (in meters) ☐☐☐☐

C. Age of Building ☐ less than 5 year's ☐ 5-10 years ☐ 10-20 years ☐ above 20 years

D. Physical Security ☐ 24 hours Physical Security ☐ Fencing ☐ Boundary wall  
☐ CCTV ☐ Security Fire Alarm (Select more than one option, if applicable)

E. Occupancy of Surrounding Property \_\_\_\_\_

2. The floor on which the business premises located ☐ Yes ☐ No

3. Are you the only occupier of the building? ☐ Yes ☐ No

If not, who are the other occupier's of the building \_\_\_\_\_

4. Does the premises remain occupied at night by you or your representatives? ☐ Yes ☐ No

5. Is there a watchman on your premises ☐ Yes ☐ No

(If the answer is Yes, please specify the following)

a. Whether the watchman is exclusively for your premises or a common watchman for a no. of shops ☐ Exclusive ☐ Common

b. Is the watchman there only during business hours or on 24 hours basis

☐ Business Hours ☐ 24 hours basis

6. Do you have armed guard for your premises ☐ Yes ☐ No

If yes whether during business hours or on 24 hours basis ☐ Business Hours ☐ 24 hours basis

7. Is there a burglar alarm installed in your premises ☐ Yes ☐ No

8. Do You have a CCTV installed in the premises ☐ Yes ☐ No

9. Is an inside grill fitted to your Gold and Gems Showroom Window or is any other protection installed against loss by window smashing? If so state what protection.

\_\_\_\_\_

10. Are your display windows protected by rolling shutters after business hours? ☐ Yes ☐ No

11. How are the main doors secured after the business hours? \_\_\_\_\_

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12. How are the windows secured / protected \_\_\_\_\_
13. How are skylights, if any, protected \_\_\_\_\_
14. Is the safe used by You Burglar proof / Theft Resistant ☐ Burglar proof ☐ Theft Resistance
15. Is there any opening (like AC ducts etc.) other than the main doors ? How are they protected?

**16. STOCK :**

- a. What was
- i. The average daily total value of your stock during the past 12 months? \_\_\_\_\_
- ii. Cash and Currency Notes during the past 12 months? \_\_\_\_\_
- b. Will the whole of your stock when on your premises be kept in safe locker at night and at all times when the premises are closed? If not, state value and class of stock which will be left outside safes locker? \_\_\_\_\_

17. Describe safety measures, i.e., parking, traffic, security, supervision, first aid, evacuation. \_\_\_\_\_

**18. Has any Insurance company in the past**

- a. Declined your Proposal ☐ Yes ☐ No
- b. Cancelled or refused to renew the proposal ☐ Yes ☐ No
- c. If so, please provide detail. \_\_\_\_\_

**19. Sum Insured Limits**

SN	Section	Particulars	Sum Insured/ Limit
1	<b>Section I Property at the insured's premises</b>	a. Property insured on premises	
		i. Property Insured in display windows during business hours	
		ii. Property Insured in Locked safe on the Premises during business hours.	
		b. Cash and Currency Notes.	
		c. Stock including Cash & Currency kept in the safe/strong room after business hours	
		d. Stock in bank lockers subject to the insured	
2	<b>Section II Property outside the insured's premises</b>	a. Stock in the custody of the insured's, his partners and his employees	
		b. Stock in custody of Brokers	
		c. Stock in custody of cutters	
3	<b>Section III Transit insurance</b>	Jewellery, Gold or Silver ornaments or Plate, Pearls and Precious stones of any sort or kind	
		a. Registered Post	
		b. Air Freight ( Value declared to the airline)	
		c. Angadia	
		Annual Carrying limit for Cash and currency	

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4	<b>Section IV Insured Property during Exhibition</b>	Property Insured while participating in exhibition	
5	<b>Section V Other property</b>	a. Building b. Furniture , Fixtures, Fittings at premises not used as residence and sales at residences c. Other contents	
6	<b>Section VI Infidelity of the employees</b>	a. Any one Employee b. Any one Accident c. Any one Year	
7	<b>Section VII Plate Glass</b>	Plate Glass/ Fixed Glass	
8	<b>Section VIII Signage</b>	Signage/ Displays	
9	<b>Section IX Electronic Equipment</b>	Electronic Equipment	
10	<b>Section X Portable Equipment Insurance</b>	Mobiles, Laptops, Tab etc	
11	<b>Section XI Employee Compensation</b>	a. Employees drawing monthly wages upto Rs 8,000. b. Employees drawing monthly wages above Rs 8,000.	

#### 20. Extensions Required (On payment of additional premium)

Extension	Yes / No
Inclusion of Storm, Tempest, Flood and Inundation Cover	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inclusion of Earthquake Cover	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inclusion of Terrorism Cover	<input type="checkbox"/> Yes <input type="checkbox"/> No
Accidental Damage Cover	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inclusion of outsourced employees	<input type="checkbox"/> Yes <input type="checkbox"/> No
Market Value Clause for Sum Insured	<input type="checkbox"/> Yes <input type="checkbox"/> No

21. Disclosure of any other information material for the Company to consider the proposal: \_\_\_\_\_

22. Past Claims records:

- a) Have you ever sustained losses in past? ☐ Yes ☐ No
- b) If yes, please give details of such losses during past 5 years (Whether covered under any insurance policy or not) .Please mention the type of losses and the causes also.

#### PAYMENT DETAILS

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1. PAN card number (10 character number):
2. Sources of funds (Please tick appropriate box):
- ☐ Salary ☐ Business ☐ Investments ☐ Others (please specify)

**Declaration:**

1. I/we hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002.
2. I/we understand that the Company has the right to call for documents to establish sources of funds.
3. The Insurance Company has the right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the Prevention of Money Laundering in India.

**DECLARATION BY PROPOSER**

I/We hereby declare that the statements made by me / us in this Proposal Form are true, accurate and complete to the best of my / our knowledge and belief and I/We have not omitted, suppressed, misrepresented or misstated any facts and information provided herein which is relevant to my/our application for Insurance under this Proposal Form and I/ We hereby agree that this declaration shall form the basis of the contract between me/ us and the “Liberty General Insurance Limited”. Hence I/We accept the Policy subject to the Policy terms and conditions prescribed by the Company.

If any additions or alterations are carried out in the risk proposed after the submission of this Proposal Form then the same will be conveyed by me to the Insurers immediately.

Date:

Place:

Signature of Proposer

Recommendations of Officer/ Agent / Broker.....

**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 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 prospectus or tables of the insurer.

Violations of Section 41 of the Insurance Act 1938, as amended, shall be - Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakhs.

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Date: 

Signature: \_\_\_\_\_

**INSURANCE IS THE SUBJECT MATTER OF THE SOLICITATION**

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