

Section-I- Home Protection-

Important:

1. This proposal is for covering Home Building and/or Home Contents against Fire and Allied Perils.
2. Read the Prospectus/Key Features Document/Policy Wordings before filling up this proposal form to understand the meaning of the terms used herein better.
3. The property proposed for insurance is not covered until the proposal is accepted and premium paid.

Please note:

Your Home Building is a building consisting of a residential unit, having an enclosed structure and a roof, basement (if any) and fixtures and fittings permanently attached to the floor, walls or roof, like fixed sanitary fittings, electrical wiring and other permanent fittings etc.

It also includes 'additional structures' if they are on the same site, are used as part of Your Home Building:

- a. *garage, domestic out-houses used for residence, parking spaces or areas, if any;*
- b. *compound walls, fences, gates, retaining walls, internal roads;*
- c. *verandah or porch and the like;*
- d. *septic tanks, bio-gas plants, fixed water storage units or tanks, solar panels, wind turbines and air conditioning systems, central heating systems and the like, if not included in Home Contents Cover, any other structure.*

14.	<p>Sum Insured (SI) for Home Building:</p> <p>Please note the following:</p> <p><i>(The amount required to construct Your Home Building at the policy Commencement Date. This amount is calculated as follows:</i></p> <p>a. For residential structure of Your Home including fittings and fixtures:</p> <p><i>Carpet area of the structure in square metres X Rate of Cost of Construction at the policy Commencement Date.</i></p> <p><i>The Rate of Cost of Construction is the prevailing rate of cost of construction of Your Home Building at the policy Commencement Date.</i></p>	<p>a. SI for residential structure of Your Home including fittings and fixtures (in ₹):</p>
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	b. For additional structures: the amount that is based on the prevailing rate of cost of construction at the Policy Commencement Date.)	b. SI for additional structures (in ₹):									
		Additional Structure	Sum Insured (in ₹)								
15.	Carpet area of structure of Home in square metres										
16..	Rate of Cost of Construction per square metre at the policy Commencement Date										
Other Details											
17.	Age of Home Building	<table border="1"> <tr> <td data-bbox="842 1043 1114 1155">Less than 5 years</td> <td data-bbox="1114 1043 1378 1155"></td> </tr> <tr> <td data-bbox="842 1155 1114 1223">5-10 years</td> <td data-bbox="1114 1155 1378 1223"></td> </tr> <tr> <td data-bbox="842 1223 1114 1290">10-20 years</td> <td data-bbox="1114 1223 1378 1290"></td> </tr> <tr> <td data-bbox="842 1290 1114 1357">Above 20 years</td> <td data-bbox="1114 1290 1378 1357"></td> </tr> </table>		Less than 5 years		5-10 years		10-20 years		Above 20 years	
Less than 5 years											
5-10 years											
10-20 years											
Above 20 years											
18.	Construction Details Please note the following: <i>(Building(s) having walls and/or roofs of wooden planks/thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt/canvas/tarpaulin and the like are treated as Kutcha Construction.</i> <i>Construction other than Kutcha Construction is a 'Pucca Construction')</i>	<table border="1"> <tr> <td data-bbox="842 1368 1114 1424"></td> <td data-bbox="1114 1368 1378 1424">Construction*</td> </tr> <tr> <td data-bbox="842 1424 1114 1536">Walls</td> <td data-bbox="1114 1424 1378 1536">Kutcha / Pucca</td> </tr> <tr> <td data-bbox="842 1536 1114 1648">Floor</td> <td data-bbox="1114 1536 1378 1648">Kutcha / Pucca</td> </tr> <tr> <td data-bbox="842 1648 1114 1760">Roof</td> <td data-bbox="1114 1648 1378 1760">Kutcha / Pucca</td> </tr> </table> <i>(*strike out what is not applicable)</i>			Construction*	Walls	Kutcha / Pucca	Floor	Kutcha / Pucca	Roof	Kutcha / Pucca
	Construction*										
Walls	Kutcha / Pucca										
Floor	Kutcha / Pucca										
Roof	Kutcha / Pucca										

A. Details of Home Contents

Please note the following:

i) *Home Contents refer to articles or things in Your Home that are not permanently attached or fixed to the structure of Your Home. Home Contents may consist of General Contents and/or Valuable Contents.*

ii) **General Contents** are all the contents of household use in Your Home, e.g., furniture, electronic items and goods, antennas, solar panels, water storage equipment, kitchen equipment, electrical equipment (including those fitted on walls), clothing and apparel and items of similar nature.

iii) **Valuable Contents** of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.

iv) *If You have opted for Home Building and Home Contents cover, the General Contents of Your home equal to 20% of the Sum Insured for Home Building Cover subject to a maximum of ₹ 10 Lakhs (Rupees Ten Lakh) are automatically covered.*

19.	<p>If You want to opt out of in-built cover for General Contents as mentioned in (iv) above and want to have higher Sum Insured</p> <p>Or</p> <p>If You have opted for Home Contents Only cover, please provide item wise Sum Insured for General Contents.</p> <p>(Sum Insured represents Cost of Replacement)</p>	<p>Item wise Sum Insured for General Contents (in ₹):</p> <table><tr><th>Items</th><th>Sum Insured</th></tr><tr><td>Furniture, Fixtures and Fittings (Home Furnishings)</td><td></td></tr><tr><td>Electrical/Electronic</td><td></td></tr><tr><td>Others</td><td></td></tr></table>	Items	Sum Insured	Furniture, Fixtures and Fittings (Home Furnishings)		Electrical/Electronic		Others	
Items	Sum Insured									
Furniture, Fixtures and Fittings (Home Furnishings)										
Electrical/Electronic										
Others										
20.	<p>In case of Basement, If there are contents in it, please provide the Sum Insured</p>									

21.	Cover for (Please Tick)	Loss of Rent		Loss of Rent:	I. Sum Insured:
	Rent for Alternative Accommodation				II. Number of Months:
				Rent for Alternative Accommodation:	I. Sum Insured
					II. Number of Months

22.	Do You require 'Personal Accident Cover' for Yourself and Your spouse?	<p>Yes/No</p> <p>If Yes,</p> <p>Name & age of Your spouse:</p> <p>Your age:</p>
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23.	<p>Do You require 'Cover for Valuable Contents on Agreed Value Basis (under Home Contents cover)':</p> <p><i>(Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.)</i></p> <p><i>(You have to submit a Valuation Certificate. However, the requirement of valuation certificate is waived if the Sum Insured opted for is upto ₹ 5 Lakh and Individual item value does not exceed ₹ 1 Lakh).</i></p>	<p>Yes/No</p> <p>If Yes, please attach list of items and Sum Insured:</p> <p>Valuation certificate attached? (Yes/No)</p>
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Section II –Additional Protection	Sum Insured(INR)
II(A) Burglary & Theft All contents declared under Section 1 B Note : Insurance on contents should be for value equivalent to the value mentioned under Section I(B) “Contents” under Section I - Fire & Allied Perils - I(B) above	
II(B) Would you like to opt “Safety & Security” cover? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Section III – Appliance Protection		
III(A) - Audio & Audio Visual Appliances		
Please list the items you wish to cover (only upto 7 years old) (include a separate sheet if required)		
Sr. No.	Description*	Age (in years) Sum Insured(INR)
1		
2		
3		
4		
	TOTAL	
III(B) - Breakdown of Domestic Electronic Appliances		
Please list the items which you wish to cover indicating the present day replacement value. (Only up to 7 years old)		
Sr. No.	Description*	Age (in years) Sum Insured(INR)

1		
2		
3		
4		
	TOTAL	

III(C) – Portable Equipments

Please list the items which you wish to cover indicating the present day replacement value. (Only up to 7 years old)

Sr. No.	Description*	Age (in years)	Sum Insured(INR)
1			
2			
3			
4			
	TOTAL		

Section IV - Jewellery and Valuables Protection

Covered required ☐ Within Insured Home
☐ Anywhere in India

Please list the items which you wish to cover – Jewelry

Sr.No	Jewellery Description	Weight(gms)	Sum Insured(INR)
1			
2			
3			
4			
5			
	Total		

Section V - Baggage Protection

expected Value of Personal Baggage,
Personal effects and other articles
carried (during the period of travel
anywhere in India)

Sum Insured

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Section- VI Legal Liability(Maximum Liability is S.I)

VI(A) Third Party Legal Liability

Sum Insured(INR)

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VI(B) Tenant Legal Liability

Sum Insured(INR)

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VI (C) Employees Compensation	Nature of Work	No. of Employee	monthly Salary	Sum Insured(INR)

Section VII - Additional Living Expense Protection	Sum Insured(INR)
Would like to opt "Additional Living Expense protection"? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, Additional rent required	

Section – VIII- Purchase Protection (Applicable only when section -II is selected)	Sum Insured(INR)

Section –IX Pedal Cycle				Sum Insured in INR
Sr. No.	Make & Name of Manufacturer	Year of Make	Value including Accessories	
			Total	

Section –X Important Documents Protection
<input type="checkbox"/> Yes <input type="checkbox"/> No

Section –XI Golf Kit Protection		
Item Description	Age (in years)	Sum Insured in INR
1.		
2.		
3.		
4.		
5.		

Section –XII Pet Protection

Type of Pet and Age	Sum Insured in INR
1.	
2.	

Section XIII ATM Cash Withdrawal Protection

Sum Insured (INR)
Would you like to opt for ATM withdrawal cover? Yes_____ No_____

Section XIV - Plate Glass Protection- Please give description, size and location of glass

Sr. No.	Description*	Size*	Location*	Sum Insured
Total				

Premium Details

Mode of Payment	
Payment Details	
Amount (in ₹)	

Claims details-

Please specify details of any loss to the proposed Property in last 3 years:

Date of Loss	Cause of Loss	Claimed Amount	Settled Amount/please specify if claim is outstanding

Previous Policy Details

Policy Name and Number _____
Previous Insurer _____

Liberty General Insurance Ltd.
Unit 1501&1502, 15th Floor, Tower 2, One International Center,
Senapati Bapat Marg, Prabhadevi, Mumbai – 400013,
Phone: +91 226700 1313 Fax: +91 226700 1606
IRDAI of India Reg. No.150, CIN: U66000MH2010PLC269656
Website Link: www.libertyinsurance.in



Policy Tenure _____ To _____ From _____
Claim Details _____

Banking Details

Bank A/C No. □□□□□□□□□□□□□□□□

Bank Name _____

IFSC Code _____

Branch Name & Address _____

AML Details:

Please provide Permanent Account Number (PAN) if premium amount exceeds IN 1 Lac

- ☐ We hereby declare that the premium for the said policy is paid out of the legally declared and assessed sources of our income OR
- ☐ We hereby declare that the premium is paid from the Bank Account of _____ (Company Name) the payment is allowed under the Income Tax Act 1961, and there is insurable interest with the payee.

Are You or any of the proposed applicants are Politically Exposed Person?

- ☐ Yes
☐ No

Politically Exposed Persons (PEP) are individuals who are or have been entrusted with prominent public functions i.e., Heads/Ministers of central or state government, senior politicians, senior government, judicial or military officials, senior executives of government companies, important party officials.

Proposer Declaration-

I hereby give my consent to receive phone calls, SMS/E mail on the below mentioned registered number/ E mail address from / on behalf of Liberty General Insurance with respect to my insurance policy/regarding servicing of insurance policies/enhancing insurance awareness/ notifying about the status of Claim etc

I/We hereby extend my/our consent to the Company for sharing my/our personal data with Liberty Insurance Group entities/affiliates for the specific purpose of claim settlement quality, data analysis purpose, reinsurance related services (please strike this clause in case you do not wish to disclose the personal data).

I agree to receive service related information from Liberty General Insurance and its service providers, through electronic and telecom modes including WhatsApp and further understand that no unsolicited information will be sent to me. The information/ data provided by me through this Proposal Form, to Liberty General Insurance and / or Liberty General Insurance authorized personnel / agency shall be stored by Liberty General Insurance, throughout the term of my relationship with Liberty General Insurance and used for the purpose relating to my proposal for insurance cover and/or servicing policies issued in my favour, whether by Liberty General Insurance or its authorized partners. I also understand that the said storage is necessary for my consumption of the services and consent to not hold Liberty General Insurance and / or its authorized partners / agency / personnel liable for legal utilization of the submitted information / data.

Liberty General Insurance Ltd.
Unit 1501&1502, 15th Floor, Tower 2, One International Center,
Senapati Bapat Marg, Prabhadevi, Mumbai – 400013,
Phone: +91 226700 1313 Fax: +91 226700 1606
IRDAI of India Reg. No.150, CIN: U66000MH2010PLC269656
Website Link: www.libertyinsurance.in



I hereby give my/our consent to Liberty General Insurance to collect, use, process, and share my/our personal information for policy servicing, claim settlement quality, and data analysis purpose, which may be carried out by an empanelled third-party vendors o Yes / o No

I hereby consent to the collection, use and disclosure of my personal information for the assessment of this application and in accordance with Liberty General Insurance Privacy Notice ('Privacy Notice') available at <https://www.libertyinsurance.in/> which I have read, understood and agree to the contents of the Privacy Notice.

I/ We hereby declare that the statements made by me / us in this Proposal Form are true to the best of my / our knowledge and belief and I / We hereby agree that this declaration shall form the basis of the contract between me/us and the

If any additions or alterations are carried out in the risk proposed after the submission of this proposal form, then the same should be conveyed to the insurers immediately.

I/We hereby provide my/our consent in accordance with Aadhar Act, 2016 and Prevention of Money Laundering Act and rules/regulations made thereunder for validating/authenticating my/our Aadhar details and updating the same in all my policies held with the company.

I/We hereby give my/our consent to the Company to verify and obtain my/our identity/address proof through CERSAI records, UIDAI or National Securities Depository Limited or such other authorities as may provide such services from time to time for the purpose of compliance with prevention of money laundering act read with anti-money laundering guidelines issued by IRDAI.

I/We have insurable interest in the subject matter of this insurance and we hereby declare that the cost of the same and the premium for this insurance is paid from legal sources of my/our funds.

Date *d d m yyyy*
Place-----

Signature of Proposer

How would you want the policy pack to be received?

Electronic/Soft Copy ☐ Physical/Hard copy ☐

DECLARATION IN CASE THE PROPOSER IS ILLITERATE OR PROPOSAL FORM IS IN LANGUAGE OTHER THAN UNDERSTOOD BY PROPOSER

(To be signed by person who has explained the contents of the proposal form to the Proposer)

I, the declarant/proposer hereby declare and confirm that I have explained/understood the contents of the proposal form in _____ language understood by proposer/me and proposer have affixed his/her signature/thumb impression on the proposal form only after understanding the contents thereof.

Declarant's Name:

Proposer Name:

Signature:

Signature/thumb impression

**DECLARATION IN CASE THE PROPOSER IS A PERSON WITH DISABILITY
REQUIRING ASSISTANCE IN COMPLETION OF PROPOSAL FORM**

(To be signed by person who has explained the contents of the proposal form to the Proposer)

I, the declarant/proposer hereby declare and confirm that, I have physical disabilities therefore unable to complete/mention the required details in proposal form hence authorizing
Mr/Mrs. _____ for fill up the Proposal form & share required details/information to insurer, Authority letter & disability certificate for the same is attached herewith.

Declarant's Name:

Proposer Name:

Signature:

Signature/thumb impression

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 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 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 LAKHS RUPEES.