

PROPOSAL FORM STANDARD FIRE AND SPECIAL PERILS POLICY

(The property proposed for insurance is not covered until the proposal is accepted by the company and premium paid in advance. Coverage is as per the terms and conditions of Liberty General Insurance Limited Standard Policy Wordings)

C	COMPANY OFFICE DETAILS (To be filled by insurer)		
1.	Office Code:		
2.	Office Address: City City City Pin Code Pin Code		
IN	NTERMEDIARY DETAILS		
1. 2. 3.	Agent/ Broker Name: Agent/ Broker License Code: Agent/ Broker Contact Number: Agent/ Broker Contact Number:		
PROPOSER DETAILS			
1.	Name of Proposer:		
2.	Address of proposer: Road City State District Pin Code		
3.	Business of Proposer		
4.	Paid Up Capital of the firm Upto Rs 15 Crores Between Rs 15 and 25 Over Rs 25 Crores NA		
5.	Financial Interest A		
6.	Road City District District		

* Please furnish the sum Insured details separately as per point no 22

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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



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	State	e Don Code Don Pin Code		
7.	Period	d of Insurance (DD/MM/YYYY) From \Box \Box / \Box \Box	□□ To □□/[
8.	Perils	to be deleted from basic cover		
	A. F.	lood, Cyclone, group of perils \Box Y	es \square No	
	B. R	iot, Strike & Malicious damage	es \square No	
9.	Plint	h and foundation to be covered \Box Y	es \square No	
10.	Add	on covers Required		
	Sr No	Add on cover	□Yes □No	Sum Insured (in Rs)
	1	Architects, Surveyors and consulting Engineers Fees (in excess of 3% claim amount)	f	
	2	Debris Removal (in excess of 1% claim amount)	□Yes □No	
	3	Deterioration of Stocks in cold storage premises due to Accident		
		power failure Consequent to the premises of power station due to an insured peril		
	4	Deterioration of stocks in cold storages premises due to change is temperature arising out of loss or damage to the cold storage machinery(ies) in the Insured's premises due to operation of insured peril	n □Yes □No	
	5	Forest Fire	□Yes □No	
	6	Impact damage due to insured's own Rail/ Road vehicles, forklift Cranes, Stackers and the like and articles drop therefrom	rs, Yes No	
	7	Spontaneous Combustion	□Yes □No	
	8	Omission to insure additions, altercation or extensions	□Yes □No	
	9	Earthquake (Fire &Shock)	□Yes □No	
	10	Spoilage Material damage cover	□Yes □No	
	11	Leakage and Contamination cover	□Yes □No	
	12	Loss of rent - Indemnity Period (in Months)	□Yes □No	
	13	Temporary Removal of Stocks clause	□Yes □No	
	14	Additional expenses of rent for an alternative accommodation- Indemnity Period (in Months) $\Box\Box$	□Yes □No	
	15	Start-up expenses	□Yes □No	
	16	Molten Material Spillage	□Yes □No	
	17	Terrorism	□Yes □No	Same as Material Damage Sum Insured
	18	Escalation - $\square\square$ %	□Yes □No	

11. Whether you have insured the same property with any other Insurance Company with the same type of coverage.

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	$\square_{\mathrm{Yes}} \ \square_{\mathrm{N}}$	lo	
	If yes furnish the following details		
	A. Name of Insurer		
	B. Policy Period (DD/MM/YYYY) From \(\sqrt{\pi}		
12.	Whether Insurance was declined by any other Company or imposed any Special Conditions (Give details))	
	\square Yes \square N	lo	
	A. Reason for declinature B. Conditions imposed		
13.			
	Year Premium in Rs Claims (Paid + outstanding)	in Rs	
	Total		
D	DETAILS ABOUT BUSINESS COVERED AT THE INSURED LOCATION		
14.	The Insured Property is		
	■ Residence, Office, Shops, Hotels etc.	lo	
	■ Industrial / manufacturing risks □ Yes □ N		
	■ Storage outside industrial risks ☐Yes ☐N		
	■ Tanks/ gas Holders outside Industrial Manufacturing risks ☐ Yes ☐ N		
	■ Utilities located outside Industrial Manufacturing risks ☐ Yes ☐ N	lo	
15.	5. A. If used as Shop please declare whether the goods handled are as per the following list. Yes No 1. Celluloid goods, 2. Coir Loose, 3. Crackers & Fire Works, 4. Explosives of any kind, 5. Hay/Straw, 6. Hemp, 7. Jute Loose, 8 Matches, 9. Methylated Spirit, 10. Nitro-Cellulose Plastics, 11. Oils/Ether/Industrial Solvents and other inflammable liquids flashing at and below 32 dec. (Closed Cup test), 12. Paints with inflammable base having flash point below 32 Deg.C (Closed Cup test) – Other than in sealed tins or drums, 13. Varnishes having a flash point below 32 Deg.C (Closed Cup test) – Other than in sealed tins or drums, 14. Disinfectant liquids and liquid insecticides – Other than in sealed tins or drums, 15. Vegetable fibres of any kind including Rayon Fibre		
]	B. If any of the above goods are handled, whether the stock value will exceed 5% of shops value? \square Yes \square	\Box No	
	If used as Warehouse / Godown (not located in a manufacturing unit) please give the list of goods stored 1.	d	

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17. If used as an Industrial Manufacturing unit, give products manufactured at the location proposed (detailed block plan showing various facilities to be enclosed).						
1.	0 0					
 18. If used as an Industrial Manufacturing unit, please state whether the factory is □Working 19. Fire Protection detection devices installed 						
☐ Fixed Water Spray System ☐	Trailer Pumps/ Fire engines					
☐ Any other, please provide the de	etails .					
20. The basis proposed for insurance21. A. Construction details – Please s						
i) Walls □RCC ii) Floor □RCC	□ Brick □ Stone or concrete block □ Wooden Planks □ Brick □ Stone or concrete block □ Wooden Planks □ Wooden Planks					
iii) Roof LRCC	☐ Tiles, cement, Ceramic fuses ☐ AC/CGI/AL sheeting					
B. Height of Building (in meters)						
C. Age of Building	han 5 year's \square 5-10 years \square 10-20 years \square above 20 years					
D. Physical Security						
\sqcup CCT	V∐ Security Fire Alarm (Select more than one option, if applicable)					
E. Occupancy of Surrounding Property						
22. Building wise values (please include buildings)***	de the Kutcha building also in this list and give individual values against such					
buildings	All Amount in Rupees					
Pescripti Occupan Buildi Plinth & Foundation on						
	 	\dashv				
		-				
Total		-				
elow.	nich are covered on normal basis and do not fall under Serial No.23 A, B, C and D					
*** In case of multiple locations kindly provide the information in separate sheet, duly signed also furnish details of ther fire insurance policies taken for same location						
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23. Special Coverage for Stocks only. <u>Please Tick</u> in the box below and give the amount to be insured against each Proposal Form-SFSP

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A. \square On Floater Basis - Stock at various locations (warehouse / godowns and / or open etc.	
covered on floater basis for a single Sum Insured, Amount in Rs	
B. On Declaration Basis - Stocks which fluctuate in value can be covered on (monthly) declaration	
basis, Amount in Rs	
Note:	
1. Minimum Sum Insured is Rs. 1 Crores and policy not issued on short period basis.	
2. Stocks in process & stocks stored at Railway sidings are not covered.	
C. On Floater Declaration Basis - Stocks which fluctuate in value as well as stored in various location	
can be covered on (Monthly) floater declaration basis, Amount in Rs	
Note:	
1. Minimum Sum Insured is Rs. 1 Crore and policy not issued on short period basis.	
2. Stocks in process & stocks stored at Railway sidings are not covered.	
D. Stocks in open (located outside the factory compound), Amount in I	
24. Would you like to avail Voluntary Deductibles LYes LNo	
25. If the answer is yes, indicate the choice of Deductible 5% of Claim Amount subject to Rs	
PAYMENT DETAILS	
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 Mone	
Laundering Act, 2002.	
2. I understand that the Company has the right to call for documents to establish sources of funds.	
3. The insurance company has right to cancel the insurance contract in case I am/ have been found guilty by an	

DECLARATION BY INSURED

laundering in India.

I/We hereby declare that the statements made by me / us in this Proposal Form and annexures if any 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 "Liberty General Insurance Limited

competent court of law under any of the statutes, directly or indirectly governing the prevention of money

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.

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Date:	Place:
	Signature of Proposer

Recommendations of Officer/ Agent / Broker

Prohibition of Rebates (Section 41) of the Insurance Act

No person shall or offer to allow either directly or indirectly as an inducement to any person to take out or renew of continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of 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 Five Hundred Rupees.

UIN No: IRDAN150P0007V01201213