

**PROPOSAL FORM -  
USGICL - UNIFIED PACKAGE INSURANCE SCHEME**



**Registered and Corporate Office :** Office No. 103, 1st Floor, Ackruti Star, MIDC Central Road, Andheri (East), Mumbai - 400 093, Maharashtra.  
Tel. : 022-41659800 / 900, Email : contactus@universalsompo.com

Intermediary Name, Contact No, Code & Email		Intermediary Sales Persons Name, Contact No & Code	
Source Code/POS UID Aadhar No./PAN		Policy Issuing Office Address & Code	

Application No: USGIC/\_\_\_\_\_

Proposer's Period of insurance(both day inclusive): From \_\_\_\_\_ To \_\_\_\_\_

Proposer's Name: \_\_\_\_\_

Current Address : \_\_\_\_\_

Contact No. & Email Id : \_\_\_\_\_

S.No	Sections	Description of Persons/Property				Sum Insured (Rs)	Period of Insurance (From (DD/MM/YY)/ To DD/MM/YY)	Rate % Sum Insured	Indicative Premium (RS)			
1	Crop Insurance	Mandatory										
2	Personal Accident Insurance (PMSBY)	Name/Occupation	Age/Dt. Of birth	Name of Nominee		200000	From: DD/MM/YY To: 31/05/YY		Rs. 12 per person			
		Benefits (per person): 1. Accidental death: Rs. 200000 2. Permanent total disablement: Rs. 200000 3. Loss of one limb/ Eye: Rs. 100000 4. Applicable to Age group 18-70 years only Details of Existing policy if any										
3	Fire & Allied perils	A. Residential Building				50000	From: DD/MM/YY To: DD/MM/YY		Rs. 40 (ST Extra)			
		B. Household Contents(Excluding Jewelry)				20000			Rs. 20 (ST Extra)			
		Details of Existing policy if any										
4	Agriculture Pumpset Insurance	Driving Unit				25000	From: DD/MM/YY To: DD/MM/YY	1.75%	Rs. 438 (ST Extra)			
		Electric		Diesel								
		Make HP		Make HP								
		Yr. of make		Yr. of make								
		RPM Sl.No.		RPM Sl.No. No								
		Amp. Volt.		of cylinders								
		Details of Existing policy if any										
5	Student Safety Insurance	Name of Student	Age / Dt. Of Birth	Name of Father Name ofMother		50000	From: DD/MM/YY To: DD/MM/YY		Rs. 75 per student (ST Extra)			
		Benefits (for Parent/ Student): SI per student 1. Accidental death: Rs. 50000 (Per Parent/Student) 2. Permanent total disablement: Rs. 50000 (Student) 3. Loss of one limb/Eye: Rs. 25000 (Students) 4. Accidental Hospitalization: Rs. 5000 (student) In case of death of Father or Mother, the Claim amount to be converted into FD in the name of student till attainment of majority (18 years). Details of Existing policy if any										
6	Agriculture Tractor	Cover required: Third Party / Comprehensive							From: DD/MM/YY To: DD/MM/YY	Premium Rate Premium	As per annexure (ST Extra)	
		Regn Mark & No.	Engine No. Chassis No.	Make	Year of Manufacturer	Trailer Details	Horse Power	Insured declared value				
		Details of existing policy if any										

NOTE: The liability of the Company does not commence until the proposal has been accepted by the Company and full premium paid.

I/We hereby declare that the particulars contained herein are true and correct and that no material fact has been withheld, misstated or misrepresented and also that this proposal-cum-schedule form part of the company's standard policy and shall be the basis of the contract between me/us and insurance company. I / We further declare that the sum Insured herein represent the full value of the property / persons / animals / birds / carts described herein.

Assignment clause

I \_\_\_\_\_ do hereby assign the money payable in the event of my death by \_\_\_ to \_\_\_\_\_ further declare that his receipt shall be sufficient discharge to the Company.

Place:

Signature of the Proposer

Date:

**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 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 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.

**Universal Sompo General Insurance Co. Ltd.**

Unit No 601/602, A Wing, 6th Floor, Reliable Tech Park, Cloud City Campus, Gut No 31, Mouje Elthan, Thane Belapur Road, Airoli, Navi Mumbai - 400708  
Toll Free No : 1800 200 4030 / 1800 22 4030 | Tel No.: 022 41690888/41690999

Insurance is the subject matter of solicitation. For more details on risk factors, terms and conditions please read Policy Documents carefully before concluding a sale. IRDAI or its officials do not involve in activities like sale of any kind of insurance or financial products nor invest premiums. IRDAI does not announce any bonus. Those receiving such phone calls are requested to lodge a police complaint along with details of phone call and number.  
CIN: U66010MH2007PLC166770

**Acknowledgement Receipt**

Premium collected: \_\_\_\_\_

Application No: \_\_\_\_\_

Name of the Loanee /Non-Loanee Farmer: \_\_\_\_\_

Bank Details: \_\_\_\_\_

Insert Carbon paper