ICICI GRIHA KAVACH POLICY PROPOSAL FORM

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**

Intermediary Name & Specified Person Name / Principal Officer Name:	
Code/Functional Identity:	
Contact No. of the branch:	
Email ID of the branch:	
Branch/Office:	

A. Details about Proposer/ Policy holder and Policy Period

1.	Name of Proposer / Policy Holder	
2.	Address of Proposer / Policy holder	
3.	Phone No. a) Mobile b) Landline	
4.	Email	
5.	Occupation details	
6.	Policy to be issued in favour of (list out all the parties who have insurable interest) including the financial institutions Are you or any of the proposed applicants a PEP* or Family member/ Close relatives/Associates of PEPs*? ☐ Yes ☐ No **Politically Exposed Persons (PEPs) are individuals who have been entrusted with prominent public functions by a foreign country, including the heads of States or Government, senior politicians, senior government or judicial or military officers, senior executives of state-owned corporations and important political party officials.*	If yes, please give details (Nature of relationship and position held by PEP): …… ……
7.	Period of Insurance	From To (No of Years in case of long term policy : _____)

8.	Nomination:	Nominee Name: Relationship with the insured: Mobile no: Email id: Present & Permanent address: Authorized person for Minor nominee: Bank details:
9.	Policy Type: Loan/Non Loan	
	Type of Proposer	Individual MSME/SME Company Others
	Do you wish to avail policy documents in physical form	Yes/No
	Details of Multiple/Other insurance covering same risk with any other Insurance Company	

10	If loan, please mention LAN	
11	Hypothecation	
12	Whether auto escalation is required? (Please tick)	Yes No
13	Type of Policy opted (Please tick):	• **Short Term** • **Long Term**
14	Select the method of calculation Opted	**Method of Calculation** / **Please tick** 10% Auto- escalation in SI (Method A) / Long term discount without 10% auto escalation of SI (Method B) /

B. Covers Opted

12	Is there any policy in place for the same property?	Yes/No
	If Yes, please provide the details:	
13.	Coverts required:	**Cover** / **Please tick** Home Building & Home Contents / Home Building Only / Home Contents Only /

C. Location of Home Building

14.	Location of Home Building - full postal address with Pin Code.	
15	Is it in a multi-storey building or is it a standalone house?	
16	In case of multi-storey building, please provide the floor number of Your house	
17	Is there a basement to Your house?	

D. Details of Home Building

Please note:

Your Home Building is a building consisting of a residential unit, having an enclosed structure and a roof, basement (if any) and fixed sanitary fittings, electrical wiring and other permanent fittings embedded to the structure 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.

18.	**Sum Insured (SI) for Home Building:** **Please note the following:** (The amount required to construct Your Home Building at the policy Commencement Date. This amount is calculated as follows: **a. For residential structure of Your Home.** **b.** Basis of Valuation of Your Home Building	**a. SI for residential structure of Your Home (in,):** **b.** **Basis of Valuation** / **Please tick on selected option** Agreed Value Reinstatement Value
	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 ')

Other Details		
19.	Age of Home Building	Less than 5 years 5-10 years 10-20 years Above 20 years

20	Construction Details **Please note the following:** (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. Construction other than Kutcha Construction is a 'Pucca Construction')	<table><tr><td></td><td>Construction*</td></tr><tr><td>Walls</td><td>Kutcha / Pu cca</td></tr><tr><td>Floor</td><td>Kutcha / Pucca</td></tr><tr><td>Roof</td><td>Kutcha / Pucca</td></tr></table> (*strike out what is not applicable)

E. Details of Home Contents

Please note the following:

i. Home Contents refer to those articles or things in Your Home premise including fittings and fixture pertaining to your Home Premise interiors.. 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.

21.	a. If You have opted for Home Contents Only cover, please provide item wise Sum Insured for General Contents. (Sum Insured represents Cost of Replacement) b. Please specify the Basis of Valuation of Your Home Contents	Item wise Sum Insured for General Contents (in □): <table><tr><td>Items</td><td>Sum Insured</td></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> <table><tr><td>**Basis of Valuation**</td><td>**Please tick on selected option**</td></tr><tr><td>Replacement Value</td><td></td></tr><tr><td>Market Value</td><td></td></tr></table>
22.	In case of Basement, If there are contents in **it,** please provide the Sum Insured	

F. Additional Covers(available on payment of additional premium)

<table>
<tr><td>23.</td><td>Cover for (Please Tick
<table><tr><td>Loss of Rent</td><td></td></tr><tr><td>Rent for Alternative Accommodation</td><td></td></tr></table></td><td>Loss of Rent:
I. Sum Insured:
II. Number of Months:

Rent for Alternative Accommodation:
I. Sum Insured:
II. Number of Months:</td></tr>
<tr><td>24.</td><td>Do You require 'Personal Accident Cover' for Yourself and Your family?</td><td>Yes/No
If Yes, mention the name, age and sum insured of the insured under:
<table><tr><th>Name</th><th>Age</th><th>Sum Insured</th></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table></td></tr>
<tr><td>25.</td><td>Do You require 'Cover for Valuable Contents on Agreed Value Basis (under Home Contents cover)':
(Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.)
(You have to submit a Valuation Certificate. However, the requirement of valuation certificate is waived if the Sum Insured opted for is up to ₹ 25 Lakhs and Individual item value does not exceed ₹ 1 Lakh).</td><td>Yes/No
If Yes, please attach list of items and Sum Insured:

Valuation certificate / Invoice copy attached? (Yes/No)</td></tr>
<tr><td>26</td><td>Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation</td><td>Sum Insured : INR</td></tr>
<tr><td>27</td><td>Terrorism Damage Cover (Material Damage only)</td><td>Sum Insured : INR</td></tr>
<tr><td>28</td><td>Earthquake, Volcanic eruption or other convulsions of nature</td><td>Sum Insured : INR</td></tr>
<tr><td>29</td><td>Hotel Stay</td><td>Sum Insured : INR</td></tr>
<tr><td>30</td><td>Brokerage for Alternate accommodation</td><td>Sum Insured : INR</td></tr>
<tr><td>31</td><td>EMI Protector</td><td>Sum Insured : INR</td></tr>
<tr><td>32</td><td>Accidental Damage Cover</td><td>Sum Insured : INR</td></tr>
</table>

33	Tenant's Liability Insurance	Sum Insured : INR
34	Landscaping Cost	Sum Insured : INR
35	Damage to Utility Systems	Sum Insured : INR
36	Incidental Costs	Sum Insured : INR
37	Inadvertent omission	Sum Insured : INR
38	Minor Acquisitions	Sum Insured : INR
39	Additional living expense	Sum Insured : INR

ANNEXURE:

	List of items to be specified	
S No	**Items**	**Sum Insured (in INR)**
1	-	-
2	-	-
3	-	-

Special Condition/Warranty, Please mention:

G. Premium Details

Mode of Payment	
Payment Details	
Amount (in ₹)	

H. 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

Refund of Premium (Policyholder/Proposer)

Account Holder Name	
Bank Name	
Account No	
IFSC Code	

DECLARATION WHEN THE PROPOSAL FORM IS FILLED BY A PERSON OTHER THAN THE PROPOSER/ THE PROPOSER SIGNS IN A VERNACULAR LANGUAGE/ PROPOSER IS ILLITERATE

I hereby declare that I have read out and explained the content of this proposal form and all other connected documents incidental to availing the insurance policy from ICICI Lombard GIC ltd. to the proposer and that he/she confirmed that he/she has understood the same and he/she agrees to abide by all terms and conditions of the same.

I hereby declare that I have fully explained to the proposer the answers to the questions that form the basis of the contract of insurance have also explained the contents in this form to the proposer in _____language, that I have truly correctly recorded the answers given by the proposer and that the proposer has fixed his/her thumb impression on the proposal form in my presence, after fully understanding the contents thereof. Further, this declaration does not confirm issuance of policy or assumption of risk thereof.

I hereby state that the contents of the form and documents have been fully explained to me and that I have fully understood the significance of the proposed contract.

Name of the Proposer

Name of the Witness

Relationship with Proposer

Address of Witness

Date:

Place: Signature of the Proposer Signature of the Witness

I. Declaration by Insured

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 give my/our consent to the Company to verify and obtain my/our identity/address proof for the purpose of undertaking KYC.

I/We hereby declare and confirm that the premium has been paid out of legally acquired sources of income and the subsequent premiums if any, will continue to be paid out of legally declared and assessed source of income.

I/We understand that the Company has right to call for documents to establish source of funds

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately and not later than 30 days.

In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may be held liable for it. Further, the Company has a right to cancel the insurance contract in case, I am/have been found guilty by any competent court of law under any statutes, directly or indirectly governing the prevention of money laundering.

Date:

Place:

Digital Signature/Signature of the Proposer / Policy Holder

J. INTERMEDIARY DECLARATION AND DETAILS/PRINCIPAL OFFICER DETAILS

I, _____(Name)_____<full name> in my capacity as an Insurance Advisor/ Specified Person of the Corporate Agent/ Insurance Sales Persons of Insurance Marketing Firm / Broker Qualified Person/ Point of Sales Person/ Designated Person/ Authorised Verifier or any other authorised salesperson/ Rural Authorized Person (RAP) and Village Level Entrepreneur – Ins (VLE-Ins) of Common Public Service Centre do hereby declare that I have explained all the contents of this Proposal Form, including the nature of the questions contained in this Proposal Form to the Proposer including statement(s), information and response(s) submitted by him/her in this Proposal Form to questions contained herein or any details sought herein will form the basis of the Contract of Insurance between the Company and the Proposer, if this Proposal is accepted by the Company for issuance of the Policy. I have further explained that if any untrue statement(s)/ information/response(s) is/are contained in this Proposal Form/including addendum(s), affidavits, statements, submissions, furnished/to be furnished, the Company shall have the right to cancel the policy at its discretion. Further, this declaration does not confirm issuance of policy or assumption of risk thereof.
_____ (to be filled in, only in case there is some disclosure to be made).

I hereby confirm to the best of my knowledge and belief that there is no inconsistency or adverse habits that may affect the underwriting of this proposal except as mentioned below:

Intermediary Name / Principal Officer Name:
Code/Functional Identity:
Contact No. of the branch:
Email ID of the branch:
Branch/Office:

Date:
Place:

INSURANCE ACT 1938 SECTION 41- Prohibition Rebates

(1) 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 prospectuses or tables of the insurer:

[Provided that acceptance by an insurance agent of commission in connection with a policy of any class of insurance business taken out by himself in relation to risks associated with his own life, health or property shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.]

(2) Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.