

MAUSAM HIFAZAT *PROPOSAL FORM*

PROPOSER DETAILS

- a) Name of the Proposer:
- b) Residential Address:
- c) City/ Village:
- d) Tehsil Block:
- e) District:
- f) State:
- g) Pin Code:
- h) Telephone No.:
- i) Mobile No.:

LOAN DETAILS

- a) Name of the Financial Institution/Bank:
- b) Correspondence Address:
- c) Loan Account No.:
- d) Total Amount of Loan Sanctioned:
- e) Inception Date of Loan:
- f) Last Installment Due On:

COVERAGE DETAILS

- a) Crop to be cultivated:
- b) Location details of the cultivation area:
 - City/ Village:
 - Tehsil Block:
 - District:
 - State:
 - Pin Code:
- c) Size (in acres) of cultivation area:
- d) 7/12 Extract- Survey Number/ Gat No. of Farm:
- e) Plot Number (if any):
- f) Policy Sum Insured*: Rs. _____

**The Proposer has two options to select the Policy Sum Insured:*

- a. *Policy Sum Insured to commensurate with the total amount of loan sanctioned for the purpose of cultivation of apple*
- b. *Policy Sum Insured to be arrived as follows: Total area (in acres) under cultivation of apple X Base Price per acre (base price per acre could be a value between or equal to Rs. 100000 and Rs. 150000)*

- g) Please provide details in the below mentioned table:

Section No.	Section Title	Period of Cover	Sum Insured
1	Insufficient Chilling Hifazat	1 st November, 20__ to 31 st March of the	20.80% of Policy Sum Insured

		subsequent calendar year	
2	Extreme Temperature Variation Hifazat	1 st April, 20__ to 31 st May of the same calendar year	29.20% of Policy Sum Insured
3	Insufficient Rainfall Hifazat	1 st December, 20__ to 31 st August of the subsequent calendar year	33.34% of Policy Sum Insured
4	Excess Rainfall Hifazat	1 st December, 20__ to 30 th June of the subsequent calendar year	16.66% of Policy Sum Insured

Payment Details

Mode of Payment: Cheque DD Cash Others
 Cheque - Given by: Spouse Father Mother Son/Daughter Employer/Employee Financier



To support our Go Green initiative, we will send policy copy link on your registered mobile number / email id. This is a digitally signed valid document. Please tick the box, if you still want to receive physical copy of your insurance policy.

OTHER INSURANCE DETAILS

- Do you have any other current or pending weather insurance policy covering any of the insured perils? Yes / No
 If yes, please provide the following details:
 Name of the Insurance Company: _____
 Policy Type: _____
 Sum Insured: _____
 Policy Period: _____
- Over the preceding five (5) years, have you had any claim under a weather insurance policy declined and/or refused in whole or in part? Yes/No
 If yes, please provide details: _____
- Over the preceding five (5) years, have you had any weather insurance policy cancelled and/or accepted on special term or conditions or rates? Yes/No
 If yes, please provide details: _____

Caringly yours



DECLARATION

I/We hereby declare and warrant that the declaration, warranties, statements and particulars given in this proposal form are complete, true and accurate to the best of my/our personal knowledge and belief. I/we have understood that the statements and particulars given in this proposal form and this declaration shall be held to be promissory and shall be the basis of the insurance contract between me/us and the Company and that, if it is found that any of the statements or particulars in this proposal form or other documents are incorrect, untrue, suppressed any information or provided misleading/false information in any respect of any material matter to the grant of a cover, the Company shall have no liability under the insurance contract or the policy document thereunder. I/We also agree to inform Company any changes in any respect of any material matter to the grant of a cover in this proposal form/documents/ risk proposed for insurance after the submission of this proposal form. I/we will accept the usual conditions and form of the policy issued by Company in such cases. I/we also agree that the contract of Insurance will be effective only upon Company conveying its acceptance of this proposal, and Company actually receiving or realising [in case of payment by cheque/DD/PO] of prescribed premium amount, failing which Company's risk is void ab initio. I /We undertake to exercise all ordinary and reasonable precautions for safety of the property as if it were uninsured.

Further, I understand, agree and I do hereby authorize the Company that data regarding various weather parameters would be collected by the Company from a Weather Station(s) mapped to the location of my cultivation area as per the geographical mapping done by the Company and which has been installed by Indian Meteorological Department and/or any other weather data service provider as selected by the Company and data collected from such Weather Station(s) only shall form the basis of calculation for benefit payments that may trigger under different sections of this policy.

Date:

Signature of the Proposer

***Certified that that the contents of the proposal form and documents have been fully explained to the Proposer and that he/they have fully understood the significance of the proposed contract.**

For Bajaj Allianz General Insurance Company Ltd.

*This is required only where, for any reason, the proposal and other connected papers are not filled by the Prospect/Proposer.

The following is the copy of section 41 of the Insurance Act 1938

PROHIBITION OF REBATES

1. No person shall allow or offer to allow either directly 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 in the policy nor shall any person taking out or renewing or continuing a policy except such rebates as may be allowed in accordance with the published prospectus or tables of the insurer.
2. Any person making default in complying with the provision of this section shall be punishable with a fine, which may extend to Ten Lakh rupees.