

EVENT INSURANCE *PROPOSAL FORM*

Important: This proposal for insurance will be the basis of any subsequent insurance policy that the Company issues to you. It is essential that you answer fully and accurately all of the questions contained in this proposal, and that you provide the Company with any and all additional information relevant to the risk to be insured or Company's decision as to the acceptance of the risk or the terms upon which it should be accepted. Your failure to comply with this obligation now may result in the rejection of your claim and the avoidance of your policy when a claim is made. If you are in any doubt about the information to be given, please seek the advice and guidance of your insurance advisor or agent. If there is insufficient space in this proposal for you to provide relevant information, whether as requested or otherwise, please attach a separate sheet to this proposal and return it to the Company.

GENERAL INFORMATION

1. Name of the Proposer: _____
2. Address: _____

3. State: _____
4. Pin Code: _____
5. Telephone No.: _____
6. Mobile No.: _____
7. Name of the event: _____
8. Type of event: _____
9. Dates of event (include set-up and dismantle):
 - a. From: _____
 - b. To: _____
10. Location address of the event: _____

11. Number of people expected to attend the event: _____
12. Period of Insurance (The inception of the insurance can take effect prior to the beginning of the event):
 - a. From: _____
 - b. To: _____
13. Do you require cover for an event, or part of an event, outside India? Yes/ No
If 'Yes', please provide the following information:
 - a. Name of Countries where the event will be held:
 - b. Venue Address:
 - c. Dates of Event(s):
14. Are you aware of any circumstances, which could give rise to a claim? Yes / No
If 'Yes' please give details: _____

COVER DETAILS

Cover 1: Event Cancellation (Mandatory Cover)

1. Are any parts of the event to be held:
 - a. Outdoors?
 - b. Under Canvas?If 'Yes', to either a) or b), please provide details, including exact location: _____

2. Will adverse weather conditions prevent the fulfillment of the event? Yes / No
If 'Yes', please provide details of the type of weather: _____

3. In the event of damage to the venue, are alternative venues available? Yes / No
If 'Yes', please provide details: _____

4. Have all arrangements been made in order to carry out this event? Yes / No

5. Have you had any previous experience in staging this kind of event? Yes / No
If 'Yes', please provide some details of previous events: _____

6. Breakdown of the sum to be insured:

Expenses	Amount	Gross Revenue	Amount
1.Costs		1.Gate/Ticket Sales	
2.Commitments		2.Programme Sales	
3.Guarantees		3.Merchandising	
4.Fees		4.Fees	
5.Commissions		5.Commissions	
6.Sponsorship		6.Sponsorship	
7.Advertising		7.Advertising	
8.Promotional		8.Concession	
9.Broadcasting		9.Broadcasting	
10.Other items not included above (please give details)		10.Other items not included above (please give details)	
Total		Total	

7. Does the above sum represent the full value at risk? Yes / No

Cover 2: Set Protection

1. Is the cover required? Yes/ No

If 'Yes', please provide the following information.

S. No.	Property Description	Value (in Rs.)	Ownership Details
1			
2			
3			
4			

(Attach separate sheet for all items to be insured, with value and ownership details)

Cover 3: Public Liability

1. Is the cover required? Yes/ No

If 'Yes', please provide the following information.

2. Please state the limit of indemnity required (in Rs.): _____
3. Have you assumed any liability by agreement, which would not have attached in the absence of such agreement? Yes/ No

If 'Yes', please provide details: _____

4. Are pyrotechnics, lasers or explosives to be used during the event? Yes / No

If 'Yes', please provide details regarding:

- a. How and when these will be used? _____
- b. Who will be responsible for this part of the event? _____
- c. Do they have their own Public Liability Insurance? _____

5. Please provide the following security details:

a. Will security personnel be present? Yes / No

i. If 'Yes', who is responsible for their actions? _____

ii. Do they carry their own Public Liability Insurance? Yes / No

Cover 4: Personal Accident

1. Is the cover required? Yes/ No

If 'Yes', please provide the following information.

2. Please give the following details for all persons to be insured under this cover:

S. No.	Name of the Person	Date of Birth	Profession	Relationship with the Proposer	Any existing disability/ infirmity	Assignee	Relationship of the Assignee with the Person to be Insured	Total Monthly Income (in Rs.)	Sum to be Insured (in Rs.)	Any other policy? If yes, give the following details: Name of the Company, Policy No., Sum Insured
1										
2										

(Please attach separate sheets, if required)

Cover 5: Money Insurance

1. Is the cover required? Yes/ No

If 'Yes', please provide the following information.

2. What is the maximum estimated amount (in Rs.) that will be carried in any one (1) transit?

3. What security precautions will be taken? _____

EXTENSIONS

1. **Named Artist Cover:**

Is the cover required? Yes/ No

If 'Yes', please provide the following details of all the persons who are involved in the event and required to be covered under the Policy:

- Name:
- Age:
- Occupation:
- Travel Arrangements:

2. **RSMD Cover:**

Is the cover required? Yes/ No

3. **Adverse Weather and Unseasonal Rain Cover:**

Is the cover required? Yes/ No

4. **Terrorism Damage Inclusion Warranty Cover:**

Is the cover required? Yes/ No

OTHER INSURANCE DETAILS

1. Do you have any other current or pending 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: _____

2. Over the preceding five (5) years, have you had any claim under a similar insurance policy declined and/or refused in whole or in part? Yes/No
If 'Yes', please provide details: _____
3. Over the preceding five (5) years, have you had any similar insurance policy cancelled and/or accepted on special term or conditions or rates? Yes/No
If 'Yes', please provide details: _____

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.

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.

Date:

Signature of the Proposer

Place:

Name and Designation (in case of corporate)

***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

SECTION 41 OF INSURANCE ACT, 1938

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 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 liable for penalty which may extend to ten lakhs rupees