

FORM – III

ERF Scheme under the Public Liability Insurance Act 1991

Insurer –



1. Control No. (To be allotted by Fund Manager)
2. Name of Insured Owner :
3. Address :
4. Business :
5. Category to which the PLI policy purchaser belong :
(Plant/ Manufacturer/ User/ Storage/ Importer /Trader / Handler)
6. Category of Industry (Red/ Orange / Green / White) :
7. Territorial Limits : INDIA
8. Name & Quantities of hazardous substances :
handled by owner
9. Address of Collector under which Territorial :
limit is the unit handling hazardous substance falls
10. Annual turn-over :
11. Paid up capital as defined Sec.4(2A) of the Act :
(as on the date of the policy)
12. Policy period :
13. Indemnity Limit :
14. Premium : Premium:-
Tax:-
15. Contribution to the Environment Relief Fund :
16. Date of proposal and declaration :
17. Address of Policy issuing office to whom :
payment has been made
18. Date and particulars of payment to insurer :

Date :

Place :

For(owner)
Name & Designation of authorized signatory

Note: - One copy each of the duly signed form is to be sent directly to the General insurance company, the District Collector or District Magistrate and Ministry of Environment and Forests by the owner and two copies are to be submitted to the Insurer. The insurer will send one copy to the Fund Manager duly signed along with contribution towards ERF.