

Caringly yours

BAJAJ | Allianz

Bajaj Allianz General Insurance Company Limited

Corporate Identity Number: U66010PN2000PLC015329. IRDAI Registration No.113
Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411 006
UIN :- BAJTIDP16005V011516

13. Medical History

Questions	Details
a) Are you or any person insured suffering or have you or any person ever suffered from physical defect or deformity or disability? If Yes, Please give details	

14. Do you wish to opt for Optional Covers? Yes No
If yes, kindly select the covers you want to opt under the plan chosen by you:

Plan A (E-Commerce Cab)

Cover	Please Tick (✓) Cover you want to Opt	Sum Insured/Benefit Per Day
Accidental Hospitalization Expenses		
Hospital Daily Allowance		
Emergency Medical Evacuation		
Personal Liability		
Repatriation of Remains		
Loss Of Baggage		

Plan B (Bus)

Cover	Please Tick (✓) Cover you want to Opt	Sum Insured/Benefit Per Day
Accidental Hospitalization Expenses		
Hospital Daily Allowance		
Emergency Medical Evacuation		
Personal Liability		
Repatriation of Remains		
Trip Cancellation		
Loss Of Baggage		

Plan C (Train)

Cover	Please Tick (✓) Cover you want to Opt	Sum Insured/Benefit Per Day
Accidental Hospitalization Expenses		
Hospital Daily Allowance		
Emergency Medical Evacuation		
Personal Liability		
Repatriation of Remains		
Trip Cancellation		
Emergency Hotel Extension		
Missed Connection		
Home Burglary Insurance		
Bounced Hotel		

Caringly yours

BAJAJ | Allianz

Bajaj Allianz General Insurance Company Limited

Corporate Identity Number: U66010PN2000PLC015329. IRDAI Registration No.113
Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411 006
UIN :- BAJTIDP16005V011516

Compassionate Visit by a Family Member		
Loss Of Baggage		

Plan D(Scheduled Airlines)

Cover	Please Tick (✓) Cover you want to Opt	Sum Insured/Benefit Per Day
Accidental Hospitalization Expenses		
Hospital Daily Allowance		
Emergency Medical Evacuation		
Personal Liability		
Repatriation of Remains		
Trip Cancellation		
Emergency Hotel Extension		
Missed Connection		
Home Burglary Insurance		
Bounced Hotel		
Compassionate Visit by a Family Member		
Delay of Checked Baggage		
Loss of Checked Baggage		
Trip Curtailment		
Trip Delay By Scheduled Aircraft		

Plan E(Other Modes/Multiple Modes of Transport)

Cover	Please Tick (✓) Cover you want to Opt	Sum Insured/Benefit Per Day
Accidental Hospitalization Expenses		
Hospital Daily Allowance		
Emergency Medical Evacuation		
Personal Liability		
Repatriation of Remains		
Trip Cancellation		
Emergency Hotel Extension		
Missed Connection		
Home Burglary Insurance		
Bounced Hotel		
Compassionate Visit by a Family Member		
Delay of Checked Baggage		
Loss of Checked Baggage		
Trip Curtailment		
Trip Delay By Scheduled Aircraft		
Loss Of Baggage		
Adventure Sports Benefit		

15. Specific Questions related to Adventure Sports Benefit

- Please describe the type of adventure sports that you would be participating: _____
- Will you be engaged in participating in adventure sports in a professional or amateur capacity _____
- Location/ venue of the adventure sports: _____
- Will there be a professional trainer/coach/instructor/organization under whose guidance and supervision the adventure sport activity will be carried by you: _____

Bajaj Allianz General Insurance Company Limited

Corporate Identity Number: U66010PN2000PLC015329. IRDAI Registration No.113
Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411 006
UIN :- BAJTIDP16005V011516

16. Specific Questions related to Loss of Baggage :

a) List of the items required to be covered :

Kindly note the following items are excluded:

1. Jewellery and Valuables such as

- a. watches or jewellery or precious stones or models or coins or curios, sculptures, manuscripts, stamps, collections of stamps, rare books, medals, moulds, designs or any other collectibles;
 - b. Gold or silver or any precious metals or articles made from any precious metals; deeds, ATM Cards, debit cards, credit cards, charge cards, bonds, bills of exchange, bank treasury or promissory notes, cheques, money, cash, securities or any other negotiable instrument.
2. Laptops, Mobile Phones, Cameras, I-pads, I-pods etc.

17. Specific Questions related to Emergency Hotel Extension

a) Name and Address of the hotel in which you will be staying during the policy period: _____

18. Specific Questions related to Bounced Hotel Cover

a. Name and Address of the hotel for which you have received confirmation of room by the supplier during the policy period: _____

19. Payment Details

a) By Cheque

a. Cheque No. and Date _____

b. Bank _____

c. Branch _____

b) By Cash

Declaration (Please Tick the Box in Confirmation)

Caringly yours

B BAJAJ | Allianz

Bajaj Allianz General Insurance Company Limited

Corporate Identity Number: U66010PN2000PLC015329. IRDAI Registration No.113

Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411 006

UIN :- BAJTIDP16005V011516

I/We hereby declare, on my behalf and on behalf of all persons proposed to be insured, that the above statements, answers and/or particulars given by me are true and complete in all respects to the best of my knowledge and that

I/We am/are authorized to propose on behalf of these other persons.

I understand that the information provided by me will form the basis of the insurance policy, is subject to the Board approved underwriting policy of the insurance company and that the policy will come into force only after full receipt of the premium chargeable.

I/We further declare that I/we will notify in writing any change occurring in the occupation or general health of the life to be insured/proposer after the proposal has been submitted but before communication of the risk acceptance by the company.

I/We declare and consent to the company seeking medical information from any doctor or from a hospital who at anytime has attended on the life to be insured/proposer or from any past or present employer concerning anything which affects the physical or mental health of the life to be assured/proposer and seeking information from any insurance company to which an application for insurance on the life to be assured/proposer has been made for the purpose of underwriting the proposal and/or claim settlement.

I/We authorize the company to share information pertaining to my proposal including the medical records for the sole purpose of proposal underwriting and/or claims settlement and with any Governmental and/or Regulatory authority."

"I/We hereby unconditionally allow the company to share all my/our information being collected in this proposal form or through telephone/e-mail/web inputs means or other means as updated from time to time within group entities. (Please tick in case same is agreed)

Date / /

Place: _____

Signature of 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.**

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 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 a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. ANY PERSON MAKING FAULT IN COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO TEN LAKHS RUPEES.