

GC BHARAT GRIHA RAKSHA PROPOSAL FORM

Important:

- 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.

FOF	R OFFICE USE		
Inte	ermediary Name:	Intermediary Code:	
Bus	iness Channel: ☐ Agency □ Banc	a □ Corporate/Broking □ Direct	
RM	I/SP Name:I	RM/SP Code:	
RM	1/SP Contact No:	GSTN: If applicable	
РО	SP PAN	(if	applicable)
DR	OPOSER DETAILS		
Α. [Details about Proposer and Policy P	eriod	
1.	Name of Proposer		
2.	<u> '</u>		
3.			
	Permanent Address of Proposer		
4.	Address of Proposer Phone No. a. Mobile		
 4. 5. 	Address of Proposer Phone No. a. Mobile		
	Address of Proposer Phone No. a. Mobile b. Landline Email		



8.	Period of Insurance	From				
		То				
		(No of Years in case of long term policy:				
)				
		Note: For Long term policy, Period shall not				
		exceed 10 years.				
9.	Nomination:	Nominee Name:				
		Relationship with the insured:				

B. Covers Opted

10.	Is there any policy in place for the same property?	Yes/No
	If Yes, please provide the details	
11.	Cover/s required: (When Home Building and Home Contents are opted for, cover for General Contents of Home for Sum Insured equal to 20% of the Sum Insured for Home Building Cover subject to a maximum of ₹ 10 Lakh [Rupees Ten Lakh] is automatically provided).	Cover Please tick Home Building & Home Contents Home Building Only Home Contents Only

C. Location of Home Building

12.	Location of Home Building - full postal address with Pin Code.	
		Pin Code:
13.	Is it in a multi-storey building or is it a	
	standalone house?	
14.	In case of multi-storey building,	
	please provide the floor number of	
	Your house	
15.	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 fixtures and fittings permanently attached to the floor, walls or roof, like fixed sanitary fittings, electrical wiring and other permanent fittings 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.

	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 including fittings and fixtures: Carpet area of the structure in square metres X Rate of Cost of Construction at the policy Commencement Date. The Rate of Cost of Construction is the prevailing rate of cost of construction of Your Home Building at the policy Commencement Date.	a. SI for residential st including fittings and fi	ructure of Your Home xtures (in ₹):
	b. For additional structures: the	b. SI for additional struc	ctures (in ₹):
	amount that is based on the prevailing		, ,
	rate of cost of construction at the Policy Commencement Date.)		(in ₹):
17.	Carpet area of structure of Home in square metres		



18.	Rate of Cost of Construction per square metre at the policy Commencement Date		
Oth	er 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')	Walls Floor Roof (*strike out what is no	Construction* Kutcha/Pucca Kutcha/Pucca Kutcha/Pucca t applicable)

E. Details of Home Contents

Please note the following:

- Home Contents refer to articles or things in Your Home that are not permanently attached or fixed to the structure of Your Home. Home Contents may consist of General Contents and/or Valuable Contents.
- 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.
- Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature. iv) If You have opted for Home Building and Home Contents cover, the General Contents of Your home equal to 20% of the Sum Insured for Home Building Cover subject to a maximum of ₹ 10 Lakhs (Rupees Ten Lakh) are automatically covered.
- 21. If You want to opt out of in-built | Item wise Sum Insured for General Contents (in cover for General Contents as mentioned in (iv) above and want to have higher Sum Insured

₹):

Items	Sum Insured
Furniture, Fixtures	
and	
Fittings (Home	
Furnishings)	
Electrical/Electronic	
Others	

Or



	If You have opted for Home Contents Only cover, please provide item wise Sum Insured for General Contents.	
	(Sum Insured represents Cost of Replacement)	
00	. ,	
22.	In case of Basement, If there are	
	contents in it, please provide the	
	Sum Insured	

F. In-Built Covers (Loss of Rent & Rent for Alternative Accommodation)

23.	Cover for (Please Tick)	Loss of Rent: I. Sum Insured:
	Loss of Rent	II. Number of Months:
	Rent for	
	Alternative	Rent for Alternative Accommodation:
	Accommodation	I. Sum Insured
		II. Number of Months

G. Optional Covers (available on payment of additional premium)

24.	Do You require 'Personal Accident Cover' for Yourself and Your spouse?	Yes/No If Yes, Name & age of Your spouse: Your age:
25.	Do You require 'Cover for Valuable	Yes/No
	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.)	If Yes, please attach list of items and Sum Insured:
	(You have to submit a Valuation Certificate. However, the requirement of valuation certificate is waived if the Sum Insured opted for is upto ₹ 5 Lakh and Individual item value does not exceed ₹ 1 Lakh).	Valuation certificate attached? (Yes/No)



H. Additional/Add-or	n Covers	(over	and	above	optional	covers	available	on	payment	of
additional premium)									

SI. No.	Name of Add-on cover		Sum insured/Limit of liability

I. Claim Details

Please specify details of any loss to the proposed Property in last 3 years:

reads specify details of any loss to the proposed respondy in last of years.				
Date of Loss	Cause of Loss	Claimed Amount	Settled Amount/please specify if claim is outstanding	

J. Premium Details

Mode of Payment	
Payment Details	
Amount in (₹)	
Date of Payment (DD/MM/YY)	
PAN (If premium is 1 Lac and Above.)	
GSTIN (If more than one GSTIN, kindly attach an annexure with details)	



Note: Please fill up the request for authorization form to receive Claim/Refund payments, if any, directly into your bank account through NEFT if the premium paid is more than Rs 10000/-The Company reserves the right to reject the said proposal or to terminate the insurance contract unilaterally and/or freeze the funds if the customer, or persons associated with him/her found to be named in any recognized blacklist.

BANK DETAILS OF PROPOSER FOR REFUND OR CLAIM PURPOSE

Name of bank account holder (mention specifically, if different from name of policyholder)

Bank Name & Branch	
Bank Account Number	
IFS Code	

NOMINEE DETAILS

Name	
Date of Birth	
Relationship with the proposer	
Mobile Number	
E-Mail ID	
Address of Nominee	
Present address	
Permanent address: ((if left blank, will be construed as being same as Present Address))	
Bank Account Details of Nominee	
Name of Account holder	



Bank Name & Branch	
Bank Account Number	
IFS Code	
Authorized person details (in case nominee is a minor)	
ANTI MONEY LAUNDRING	
financing of terrorism and anti-bribery and a GCICL as a tool/platform for financial crin nominee are, therefore, required records/information/assistance, as may be practices.	actices, including anti-money laundering, counter- anti-corruption, which ensure to not allow use of nes. The policyholder, beneficiary, claimant, or to assist with GCICL with relevant necessary to address the anti-financial crime
DECLARATIONS	
respects and that there is no other information that has not been disclosed to you. I agree the basis of the contract between me a	he above statements are true and complete in all in which is relevant to my application for insurance that this proposal and the declaration shall be the ind Generali Central Insurance Company it a policy, subject to the conditions prescribed by
	tement given in the proposal is found to be untrue licy, that may be issued, shall be treated as void ited to GCICL.
out of the legally declared and assessed so of crime related to any offence under the Pre framed thereunder. I/We understand that Go information to establish the source of funds, terminate the insurance contract unilaterally	m amount, corresponding to this proposal, is paid surces of my/our income and not out of proceeds evention of Money Laundering Act, 2002 and rules CICL reserves the right to call for documents and as also the right to reject the said proposal or to and/or forfeit the premium amount, if I/We am/are ion list/happen to have violated any provisions of
"I/We hereby confirm that the premium payn is having an insurable interest in my/our poli any refund, please process the same in belo	cy under this application form. In case of
	pplicable) □ High Net Worth Individual/s □ Non d Person/s □ Jeweller/s □ Non-Governmental



- v. I agree to receive service related information from GCICL and its service providers from time to time, through electronic and telecom modes, including WhatsApp, and understand that no unsolicited information will be sent to me.
- vi. I am aware and agree that the information/data provided by me, through this application, to GCICL and/ or GCICL authorised person/ agency, shall be stored by GCICL, throughout the currency of my relationship with GCICL, and used for the purposes relating to my proposal for insurance cover and/or servicing policies issued in my favour, whether by GCICL or its authorized partners. I also understand that the said storage is necessary for my consumption of the services and consent to not hold GCICL and/or its authorized partners/ agency/ person liable for legitimate utilization of the submitted information/data.

vii. I consent to the fact that GCI may download my/proposer's CKYC record from the Central KYC Records Registry, in relation to the verification of my/proposer's KYC records as part of this proposal. I understand that acceptable officially valid documents shall be relied upon for the said verification of KYC records. I, also, consent to receive information from the Central KYC Registry through SMS/email on the abovementioned mobile phone number/email address.

It is, also, confirmed that the KYC records available in the CKYC Registry are current and valid, as on the date of this proposal, and can be used by GCI hereafter. In case of any modification, the applicable information will be provided to GCI for updating the CKYC Registry Records.

viii. I/We/Proposer agree(s) that the information/data, contained in this proposal, shall be processed for purposes related to this proposal and the insurance policy that may be issued hereon. I/We/Proposer understand(s) that all such information/data will be handled as per the GCICL Privacy Policy, available at https://generalicentralinsurance.com/privacy-policy.

Proposer's Signature:	Place:	_ Date:
True to our Go Green initiative, we will number, as you've mentioned in this propo download and save the digitally signed a still wish for a physical copy, you may tick	osal, where available/chose nd authenticated policy doo	n, your eIA and you may
FOR INTERMEDIARY USE ONLY		
I,, in my capacity as a Corporate Agent/Authorized Person of the product features, including its suitability, a nature of the questions and the responsifurther, informed to the proposer that the contract of insurance between GCICL are any untrue response(s) is/are contained disclosure of material facts, the policy issues as null and void and the premium amount	he Broker/IMF, declare the and the contents of this propes submitted thereto, to the details provided herein shad the proposer. It has, also in this proposal form or thued thereon shall, at the option	at I have explained the posal form, including the e proposer. It has been, tall form the basis of the o, been explained that if here has been any nontion of GCICL, be treated



Name of Insurance Agent/POS of the	SP/Specified Person of the Corporate Agent/Authorized Person
Broker/IMF:	
Intermediary's Code:	
Intermediary's Signature:	

SECTION 41 OF INSURANCE ACT, 1938 - 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 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 a penalty which may extend to Ten Lakh Rupees.

******END*****

Annexure attached to and forming a part of Proposal Form of 'GC Bharat Griha Raksha') QUESTIONNAIRE

S.No	Details	Answer
1.	Age of the building	
		Less than 5 Years
		5-10 Years
		10-20 Years
		20-25 Years
		Above 25 Years



2.	Are Fire Protection devices installed?	†YES †NO
	If Yes, please select the type:	† Hand Appliances
		† Hand Appliances &Hydrant System
		† Hand Appliances + Hydrant System & independent Sprinkler/ Fixed Water Spray System
3.	Is round the clock security guard available in the premises?	†YES †NO
4.	In case of Housing Societies, Pls specify the total number of floors in the building?	
5.	Distance of Proposed Property from the Public Fire Station?	

Claims Details

In case, the proposed property is more than 3 yrs old, please provide the loss details for last 10 yrs,.

Year	Date of Loss	Cause of Loss	Claimed Amount	Settled Amount/please specify if claim is outstanding



Generali Central Insurance Company Limited (Formerly known as Future Generali India Insurance Company Limited) | Registered Office: Unit No. 801 & 802, 8th Floor, Tower C, Embassy 247 Park, LBS Marg, Vikhroli (West), Mumbai – 400083 | IRDAI Regn. No.: 132 | CIN: U66030MH2006PLC165287 | Website: https://generalicentralinsurance.com | Email ID: gcicare@generalicentral.com | Toll-free Phone: 1800 220 233 / 1860 500 3333/ 022 6783 7800