

**FG GRIHA LITE
PROPOSAL FORM**

IMPORTANT GUIDELINES: 1. Insurance is the contract of utmost good faith requiring of the Proposer and the Insured not only to disclose all material facts but also not to suppress any material facts in response to the questions in the proposal form. 2. This form can be used to apply for FG Griha Lite. 3. It is important to fill all questions in full. If you have insufficient space to complete any of your answers, please attach a separate signed and dated sheet and identify the question number concerned. 4. Cover shall commence not earlier than the date and the time of acceptance and subsequent to receipt of the premium.

FOR OFFICE USE:

Policy Issuing Office Address & Code : _____

Intermediary Name: _____ Intermediary Code: _____

Business Channel: Agency Banca Corporate/Broking Direct

RM/SP Name: _____ RM/SP Code: _____

RM/SP Contact No: _____ GSTN: If applicable _____

POSP PAN (if applicable) _____

A. Details about Proposer and Policy Period

1.	Name of Proposer	
2.	Address of Proposer	
3.	Phone No. a. Mobile b. Landline	
4.	Email	
	CKYC Number (if available)	
5.	Policy to be issued in favour of (list out all the parties who have insurable interest) including the financial institutions	
6.	Period of Insurance	From To (No of Years in case of long term policy : _____) Note: For Long term policy, Period shall not exceed 10 years.
7.	Nomination:	Nominee Name: Relationship with the insured:

B. Covers Opted

8.	Is there any policy in place for the same property?	Yes/No	
	If Yes, please provide the details		
9.	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

10.	Location of Home Building - full postal address with Pin Code.	
		Pin Code:
11.	Is it in a multi-storey building or is it a standalone house?	
	In case of multi-storey building, i. Please provide total number of floors in the building ii. Please provide the floor number of Your house	
12.	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.

13.	<p>Sum Insured (SI) for Home Building: <i>Please note the following: (The amount required to construct Your Home Building at the policy Commencement Date. This amount is calculated as follows:</i></p> <p><i>a. For residential structure of Your Home including fittings and fixtures:</i></p> <p><i>Carpet area of the structure in square metres X Rate of Cost of Construction at the policy Commencement Date.</i></p> <p><i>The Rate of Cost of Construction is the prevailing rate of cost of construction of Your Home Building at the policy Commencement Date.</i></p>	
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	<p><i>b. For additional structures: the amount that is based on the prevailing rate of cost of construction at the Policy Commencement Date.)</i></p>	<p><i>b. SI for additional structures (in ₹):</i></p> <table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 60%;">Additional Structure</th> <th style="width: 40%;">Sum Insured (in ₹):</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Additional Structure	Sum Insured (in ₹):						
Additional Structure	Sum Insured (in ₹):									

14.	Carpet area of structure of Home in square metres	
15.	Rate of Cost of Construction per square metre at the policy Commencement Date	

Other Details

16.	Age of Home Building	Upto 5 Years		
		More than 5years		
		Upto 10 Years		
		More than 10years		
		Upto 25 Years		
		Above 25 Years		

17.	Are Fire Protection devices installed? If Yes, please select the type:	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Hand Appliances <input type="checkbox"/> Hand Appliances & Hydrant System <input type="checkbox"/> Hand Appliances + Hydrant System & independent Sprinkler/ Fixed Water Spray System Others, pls specify _____								
18.	Is round the clock security guard available in your premises?	<input type="checkbox"/> YES <input type="checkbox"/> NO								
19.	Distance of your proposed Property from the public fire station?	_____ (in KM)								
20.	Is there a railway crossing in between the public fire station and your Property?	<input type="checkbox"/> YES <input type="checkbox"/> NO								
21.	Please provide the distance of your Property from the nearest water body	_____ (in meters)								
22.	Please confirm whether your proposed Property has insulated wiring in place?	<input type="checkbox"/> YES <input type="checkbox"/> NO								
23.	Are there any loose wiring, connections or improper electrical Installations in your Property?	<input type="checkbox"/> YES <input type="checkbox"/> NO								
24.	Are you following standard housekeeping practices in your Property?	<input type="checkbox"/> YES <input type="checkbox"/> NO								
25.	<i>Construction Details</i> Please note the following: <i>(Building(s) having walls and/or roofs of wooden planks/thatched</i>	<table border="1"> <thead> <tr> <th></th> <th>Construction*</th> </tr> </thead> <tbody> <tr> <td>Walls</td> <td>Kutchha/Pucca</td> </tr> <tr> <td>Floor</td> <td>Kutchha/Pucca</td> </tr> <tr> <td>Roof</td> <td>Kutchha/Pucca</td> </tr> </tbody> </table>		Construction*	Walls	Kutchha/Pucca	Floor	Kutchha/Pucca	Roof	Kutchha/Pucca
	Construction*									
Walls	Kutchha/Pucca									
Floor	Kutchha/Pucca									
Roof	Kutchha/Pucca									
	<i>leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt/canvas/tarpaulin and the like are treated as Kutchha Construction.</i> <i>Construction other than Kutchha Construction is a 'Pucca Construction')</i>	(*strike out what is not applicable)								

E. Details of Home Contents

Please note the following:

- i) 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.
- ii) **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. iii) **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.

26.	If You want to opt out of in-built cover for General Contents as mentioned in (iv) above and want to have higher Sum Insured 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)	Item wise Sum Insured for General Contents (in ₹):							
		<table border="1"> <thead> <tr> <th>Items</th> <th>Sum Insured</th> </tr> </thead> <tbody> <tr> <td>Furniture, Fixtures and Fittings (Home Furnishings)</td> <td></td> </tr> <tr> <td>Electrical/Electronic</td> <td></td> </tr> <tr> <td>Others</td> <td></td> </tr> </tbody> </table>	Items	Sum Insured	Furniture, Fixtures and Fittings (Home Furnishings)		Electrical/Electronic		Others
Items	Sum Insured								
Furniture, Fixtures and Fittings (Home Furnishings)									
Electrical/Electronic									
Others									
27.	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)

28.	Cover for (Please Tick)	Loss of Rent:			
		<table border="1"> <tr> <td>Loss of Rent</td> <td></td> </tr> <tr> <td>Rent for Alternative Accommodation</td> <td></td> </tr> </table>	Loss of Rent		Rent for Alternative Accommodation
Loss of Rent					
Rent for Alternative Accommodation					
		I. Sum Insured: II. Number of Months: Rent for Alternative Accommodation: I. Sum Insured II. Number of Months			

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

Please select from below mentioned covers, which you want to opt for:

Sl. No.	Optional Covers	Please tick (√)	Sum Insured (₹)

1.	<p>Cover for Valuable Contents on Agreed Value Basis (under Home Contents cover)</p> <p><i>(Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.)</i></p> <p><i>(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).</i></p> <p>If opted, please attach list of items and Sum Insured:</p> <p>Valuation certificate attached? (Yes/No)</p>		
2.	<p>Personal Accident Cover for yourself and spouse</p> <p>If opted, please provide,</p> <p>Name & age of Your spouse:</p> <p>Your age:</p>		
3.	Third Party Liability		
4.	Tenant's Legal Liability		
5.	Claim Preparation Costs		
6.	Keys And Locks		
7.	Accidental Damage Clause		
8.	Protection And Preservation Of Property		
9.	Landscaping Including Lawns, Plants, Shrubs Or Trees		
10.	Removal Of Debris (In Excess Of 2% Of The Claim Amount)		
11.	<p>Sabotage And Terrorism Damage Cover Endorsement (Material Damage Only)</p> <p>Please select if below mentioned extensions under the above cover are also opted.</p> <p>I. Terrorism Third Party Liability Insurance Add On Cover</p> <p>II. Political Violence Insurance Extension</p>		

Payment 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/-

I. Claim Details

Please specify details of any loss to the proposed Property in last 3 years, In case, your Property is more than 3 yrs old, please provide the loss details for last 10 years

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

J. Declarations:

- i. I/We hereby declare and warrant that the above statements are true and complete in all respects and that there is no other information which is relevant to my application for insurance that has not been disclosed to you. I agree that this proposal and the declaration shall be the basis of the contract between me and FUTURE GENERALI INDIA INSURANCE CO LTD (FGIICL) and I/We agree to accept a policy, subject to the conditions prescribed by FGIICL.
- ii. I understand that, if any information/statement given in the proposal is found to be untrue by FGIICL, the corresponding insurance policy, that may be issued, shall be treated as void ab initio and the premium paid shall be forfeited to FGIICL.
- iii. "I/We, hereby, declare that the premium amount, corresponding to this proposal, is paid out of the legally declared and assessed sources of my/our income and not out of proceeds of crime related to any offence under the Prevention of Money Laundering Act, 2002 and rules framed thereunder. I/We understand that FGIICL reserves the right to call for documents and information to establish the source of funds, as also the right to reject the said proposal or to terminate the insurance contract unilaterally and/or forfeit the premium amount, if I/We am/are found to be named in any recognized sanction list/happen to have violated any provisions of law." OR

"I/We hereby confirm that the premium payment have been paid by _____, who is having an insurable interest in my/our policy under this application form. In case of any refund, please process the same in below mentioned proposer's bank account."

- iv. I/we am/are (please tick all that are applicable)
- High Net Worth Individual/s Non-Residential Indian/s Politically Exposed Person/s
- Jeweller/s Non-Governmental Organization Film Actor/s
- Producer/s
- v. I agree to receive service-related information from FGIICL 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 FGIICL and/ or FGIICL authorised person/ agency, shall be stored by FGIICL, throughout the currency of my relationship with FGIICL, and used for the purposes relating to my proposal for insurance cover and/or servicing policies issued in my favour, whether by FGIICL or its authorized partners. I also understand that the said storage is necessary for my consumption of the services and consent to not hold FGIICL and/or its authorized partners/ agency/ person liable for legitimate utilization of the submitted information/data.
- vii. I consent to the fact that FGII 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.

Proposer's Signature: _____ **Place:** _____ **Date:** _____

True to our Go Green initiative, we will send a link to your e-mail address and/or mobile number, as you've mentioned in this proposal, and you may download and save the digitally signed and authenticated policy document therefrom. If you still wish for a physical copy, you may tick on this box

Payment 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/-

Note: 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.

For Intermediary Use Only

I, _____, in my capacity as an Insurance Agent/POSP/Specified Person of the Corporate Agent/Authorized Person of the Broker/IMF, declare that I have explained the product features, including its suitability, and the contents of this proposal form, including the nature of the questions and the responses submitted thereto, to the proposer. It has been, further, informed to the proposer that the details provided herein shall form the basis of the contract of insurance between FGIICL and the proposer. It has, also, been explained that if any untrue response(s) is/are contained in this proposal form or there has been any non-disclosure of material facts, the policy issued thereon shall, at the option of FGIICL, be treated as null and void and the premium amount against the policy may be forfeited by FGIICL.

Name of Insurance Agent/POSP/Specified Person of the Corporate Agent/Authorized Person of the Broker/IMF:

Intermediary's Code: _____

Intermediary's Signature _____

ANTI MONEY LAUNDERING

FGIICL adheres to the anti-financial crime practices, including anti-money laundering, counter-financing of terrorism and anti-bribery and anti-corruption, which ensure to not allow use of FGIICL as a tool/platform for financial crimes. The policyholder, beneficiary, claimant, or nominee are, therefore, required to assist with FGIICL with relevant records/information/assistance, as may be necessary to address the anti-financial crime practices.

SECTION 41. OF INSURANCE ACT, 1938-PROHIBITION OF REBATES:

1. 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.
2. Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to Ten Lakhs Rupees.

*****END*****



Future Generali India Insurance Company Limited, IRDAI Regn. No. 132 | CIN: U66030MH2006PLC165287
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Call us at: 1800-220-233 / 1860-500-3333 / 022-67837800 | Website: <https://general.futuregeneralii.in> | Email: fgicare@futuregeneralii.in