



general insurance

PROPOSAL

## CONTRACTORS' ALL RISKS INSURANCE POLICY

Please fill this form in **Block Letters** and **Tick the Boxes** ☒ where appropriate

CCX

(Please answer all questions completely. This policy commences only after the proposal is accepted and subject to realisation of premium.)

### INTERMEDIARY DETAILS

Name  Code

Branch  Code

Manager's Name  Code

Campaign Name  Code

### PROPOSER'S DETAILS

Name of Principal M/s.

Name of Contractor M/s.

Name of Sub-Contractor M/s.

Whose interest is to be insured ☐ Principal ☐ Contractor ☐ Sub-contractor

Contact Person Mr./ Ms.

Communication (Postal) Address

Pin code  State

Contact Nos. Mobile No.  Office +91

Residence +91  E-mail ID

Policy Period  To  Duration of Maintenance Period  Months

Paid up Capital  Crs

### Brief Description of Business/ Business Activity

[illegible]

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**1) Risk Location** Address   
  
  
  
 District   
Pin Code  State

2) **Risk Location** Address   
  
  
  
 District   
Pin Code  State

## SECTION I - MATERIAL DAMAGE

Sum Insured Details for Section I - (Material Damage)

Sl. No.	Particulars	Sum Insured	Remarks (Please indicate Breakup of Duty, Freight, if any)
1.	Contract Price		
2.	Materials or items supplied by the Principal		
3.	Any additional items not included in above (Please give details in Remarks Column)		
	Total Sum Insured		

## Downloaded from www.insureatclick.com - Broker : Loyal Insurance Brokers Ltd.

## Section II - Third Party Liability (Optional)

## Limit

A horizontal number line with 15 tick marks, labeled from 1 to 15.

☐ Yes☐ No

### Do you want to opt for Voluntary Deductible?

☐ Yes☐ No

**In case of Yes please select the slab mentioned below:**

**Please Tick**

- [illegible]

**Kindly select one**

☐ Cheque

□ D.D./P.O.

☐ Credit Card

☐ Cash

Cheque/D.D./P.O. no. | | | | | | | |

Dated 

D	D	M	M	Y	Y	Y	Y
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Bank Name |

Credit Card no.

Master



Expiry Date

Premium Amount Rs. | | | | | | | | |

In words \_\_\_\_\_

## DECLARATION

I / We hereby declare that the statements, answers given by me / us in this proposal form are true to the best of my knowledge and belief. It is hereby understood and agreed that the statements, answers and particulars provided herein above are the basis on which this insurance is being granted and that if, after the insurance is effected, it is found that any of the statements, answers or particulars are incorrect or untrue in any respect, the Company shall have no liability under this insurance.

If any additions or alterations are carried out in the risk proposed after the submission of this proposal form, then the same would be conveyed to Bharti AXA General Insurance Co. Ltd.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

\_\_\_\_\_  
Signature

## PROHIBITION OF REBATES (SECTION 41) OF THE INSURANCE ACT 1938

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 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 or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the prospectus 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 five hundred rupees.

Insurance is the subject matter of the solicitation.



### **Bharti AXA General Insurance Company Limited**

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Off Outer Ring Road, Bangalore- 560037. **Toll Free Helpline:** 1800-103-2292

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