## **Group Personal Accident Proposal Form**

1. Name of Proposer Mr./Ms. :	
2. Full Address:	
	4. Date of Birth:
4. Occupation:	6. Annual Income: Rs
7. If there is any disability Please spec	ify:
8. Name of nominee:	
9.His/Her Age:	
10. Relation with Insured:	
11. His /Her full address:	
12. Witness to Nomination: Sign	Sign
a) Name: 1)	2)
b) Address: 1)	2)
13. Capital Sum Insured: Rs. 14. Policy Period (1 year to 5 years)	(Rs. 25000/ or 50000/ or 75000/ or 100000/
15. Period of Insurance: From	to
ate: lace: ote 1.The liability of the company does not con the Company and full premium paid	Proposer's Signature mmence until the proposal has been accepted by

- 2. If space is found insufficient, please attach separate sheets for details.
- 3. Premium will be quoted on application.
- 4. Insurance is the subject matter of solicitation.

## PROHIBITION OF REBATE -- Section 41 of the Insurance Act 1938

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 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 rebates 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 punishable with fine which may extend to Five Hundred Rupees.