



Royal Sundaram

FOR OFFICE USE ONLY

Issuing branch	_____
Agent reference	_____
Policy number	_____
Payment Rs.	_____
Payment type	_____
Payment ref.no.	_____
Urban / Rural	_____

ROYAL SUNDARAM GENERAL INSURANCE CO. LIMITED
46, Whites Road, Chennai – 600 014. Phone 044-2852 2123 Fax : 044-2851 7384

INCOME PROTECTOR PLUS POLICY PROPOSAL FORM

PLEASE ENSURE THAT ALL QUESTIONS IN THE FORM ARE ANSWERED.
PLEASE COMPLETE THE FORM IN CAPITAL LETTERS USING AN INK PEN

Proposer's Full Name :

Name of Person to be insured :

Relationship between the proposer and the person to be insured :

Date of Birth :

Marital Status : Married Single

Address with Pincode :

Daytime Telephone Number :

Evening Telephone Number :

Email ID :

Insurance required : From: ___am/pm on
To : midnight on

Profession / Occupation / Trade / Business :

Insured Persons Details

1. Persons to be covered (please tick your option)	<input type="checkbox"/> Self	<input type="checkbox"/> Spouse
2. Name of the person		
3. Date of birth DD/MM/YY		
4. Occupation		
5. Average Monthly Income		
6. Any physical defects / infirmities / disability.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, give details		

7. Plan Details

Coverages	Ultima	Premier	Excellency	Senator
Death	2000000	800000	400000	200000
PTD	3200000	1400000	700000	320000
PPD	2000000	800000	400000	200000
Monthly Income Benefit	120000	60000	30000	15000
Recovery Benefit	15000	10000	7500	5000
Accident Hospitalisation	15000	10000	7500	5000

8. Plan opted (please tick your option)	<input type="checkbox"/> Ultima <input type="checkbox"/> Premier <input type="checkbox"/> Excellency <input type="checkbox"/> Senator	<input type="checkbox"/> Ultima <input type="checkbox"/> Premier <input type="checkbox"/> Excellency <input type="checkbox"/> Senator
9. Do you have any other Accident Insurance Policies under any other schemes including credit cards, employee schemes etc.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

If Yes, please give the following details

Name of the Person covered	Name of the Company	Policy Number	Period of Insurance	Sum Insured

10. Nomination Details

Insured Person	Nominee Name	Relation	Witness
Self			
Spouse			

I declare that the above particulars contained herein are true to the best of my knowledge and belief and that I have disclosed all particulars affecting the assessment of the risk. I agree that this proposal and declaration shall be the basis of the contract between the Company and myself.

Date:

Place:

Signature or thumb impression of the Proposer

STATUTORY WARNING AS PER SECTION 41 OF THE INSURANCE ACT, 1938

I. PROHIBITION OF REBATES

Payment of rebates is expressly prohibited under 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 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 Ten Lakh Rupees.

Royal Sundaram General Insurance Co. Limited
Corporate Office: Vishranthi Melaram Towers, No. 2/319, Rajiv Gandhi Salai (OMR), Karapakkam, Chennai - 600097
Registered Office: No. 21, Patullos Road, Chennai - 600002
www.royalsundaram.in

Insurance is a subject matter of solicitation