

# **Bajaj Allianz General Insurance Company Limited**

Corporate Identity Number: U66010PN2000PLC015329. IRDAI Registration No.113 Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerawada, Pune - 411 006 UIN: IRDAN113CP0027V02202223

#### **SURETY INSURANCE**

#### PROPOSAL FORM / QUESTIONNAIRE

1.	Name of the Proposer	
2.	Current physical address of the Proposer	
3.	Registered address of the Proposer	
4.	Short description of the activity of the Proposer	
5.	Year of incorporation of the Proposer	
6.	Name and address of all the Board Members of the Proposer	
7.	Name and address of the Chairman of the Proposer.	
8.	Total value of the Surety Bond required in INR	
9.	Duration and inception date of the Surety Bond	
10.	Name and address of the Principal / Beneficiary of the Surety Bond	
11.	Circumstances under which Principal can invoke the Surety Bond.	
12.	Whether Proposer's Bank Guarantee provided to the Principal in some other contract has ever been invoked or called?	
13.	If Yes, Please give a short note on these circumstances and outcome	
14.	Whether in past 10 years anytime any Government (Whether Central or State Government) Agency or	



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	department initiated any action against the Proposer?		
15.	If yes, please give a separate note, on the facts, circumstances and outcome of such an action		
16.	Please enclose last 3 Years Audited Accounts and Balance Sheet.		
17.	Please indicate Paid Up and Authorized Capital of the Proposer.		
18.	Any other information, which Proposer feels, can be material and relevant for this proposal.		
desire to have an insurance policy as described herein with the Company and I/We agree that this proposal and declarations hereto shall be the basis of contract between me/us and the Company and I/We agree to accept a Policy subject to the conditions prescribed by the Company.  I/We agree that the Policy shall become null and void, in the event of any untrue or incorrect statement, misrepresentation, non-description or non-disclosure in any material particular in the proposal form/personal statement, declaration and connected documents, or any material information has been withheld by me/us or anyone acting on my/our behalf to obtain any benefit under this Policy.  I/We agree that the issuance of Policy shall be subject to realisation of premium cheque.			
Signature of the Proposer Full name of the signatory Position/Designation of the signatory Date Place			
* Certified that that the contents of the proposal form and documents have been fully explained to the Proposer and that he/they have fully understood the significance of the proposed contract.			
Date: [		Signature (on behalf of the Proposer)	
Place:		Name:	
* This is required only where, for any reason, the proposal and other connected papers are not filled by the Proposer.			

#### **INSURANCE ACT 1938 SECTION 41- 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 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



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renewing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. ANY PERSON MAKING FAULT IN COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO TEN LAKHS RUPEES.