



IFFCO-TOKIO GENERAL INSURANCE CO. LTD
Regd. Office: IFFCO Sadan, C-1, Distt. Centre, Saket, New Delhi-110017

INDIVIDUAL PERSONAL ACCIDENT INSURANCE PROPOSAL FORM

1. Name of the Proposer :
2. Permanent Address:
3. Address for Correspondence:
4. (a) Have you ever proposed for Personal Accident/Life Insurance
(b) If so, please give the name of each Company and Amount of Insurance.
5. Please tick mark (✓) the plan desired. For the benefits, kindly refer the annexure-I

Base Plan	1500	1250	750	500	300
A					
B					
C					
D					

6. Period of Insurance From.....To.....
(both days inclusive)
7. Details of persons to be insured

Name of Family Member	Relationship with proposer	Date of birth	Occupation	Name of the Nominee	Relationship of the nominee with the insured	Annual Income

In case any member is suffering from any disability or decease, kindly give full details.....

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

It is also declared that neither I or any of my family members proposed to be covered under the policy indulge in the following activities :

- i) Racing on wheels or Horseback
- ii) Big game hunting
- iii) Mountaineering
- iv) Winter sports, skiing or ice hockey
- v) Ballooning or polo or Sports of similar nature

Place:

Proposer's Signature

Date:

PROHIBITION OF REBATES

The following is the copy of 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 or risk relating to lives or property in India any rebate of the whole or part of commission payable or any rebate or the premium shown on the policy nor shall any person taking out or renewing continuing a policy except any 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 five hundred rupees.

DESCRIPTION OF BENEFITS

Annexure 1		
S. no.	Benefits Description	Amount of Compensation
1)	Death	100% of sum insured mentioned under death benefit table
2)	Loss of two limbs, two eyes, or one limb and one eye	100% of sum insured mentioned under permanent total disablement benefit table
3)	Loss of one limb or One eye.	50% of sum insured mentioned under permanent total disablement benefit table
4)	Permanent total Disablement (PTD) from Injuries other than those named above which permanently totally and absolutely, disable the insured from engaging in any employment or occupation of any description whatsoever	100% of sum insured mentioned under permanent total disablement benefit table
5)	Permanent Partial Disablement (PPD)	Percentage (as mentioned in annexure 2) of the sum insured mentioned under Permanent Partial Disablement benefit table
6)	Temporary Total Disablement (TTD)	Weekly benefit of 1% of Sum insured mentioned under Temporary Total Disablement benefit table
7)	Medical expenses necessarily incurred by the insured in connection with the injury, provided the claim otherwise is admissible	Actual expenses incurred, or 20% of the death benefit or 50% of the admissible personal accident claim amount, whichever shall be less.