



Proposal Form for Reliance Workmen's Compensation Policy

Indemnity under the Workmen's Compensation Act 1923 and subsequent amendments of the said Act prior to the date of the issue of the Policy; the Fatal Accidents Act, 1855; and at Common Law.

Pro	ooser's Details																							
1.	Name of the Proposer		Mr. \square	Mrs		1 1																		
2.	Proposer's Business					1 1																		
	Address of the Proposer																							
	Flat Building																							
	Road/Street/Sector			1		1 1		1 1																Ш
	Area																							
	Taluka/Village/District/C	ity 🖳														Pin (ode.							
	State					1 1							L		(Cour	try							
	Phone												N	1obile	e L									
	Email										Fax													
3.	Proposer's trade or occup	ation																						
	Particulars of work																							
	Work Site Address																							
	(Please attach annexure in c of more than one location)	ase				1 1																		
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All p	persons employed mus																							
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4.	Estimated Annual (For Of																							
4.5.	Wages, Salaries and other																							
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9.	Doe	s the above, schedule include	•					
	a)	All persons in your service?					Yes	No
	ь)	All your subcontractors?						No
10.	Are you premises a Factory within the meaning of the Factories Act?							No
11.	a.	Have you any circular saws water electricity or other me		y driven by steam	gas,		Yes	□ No
	i.	If yes, please give details						
	b.	Are your machinery, plant a in good order and condition		enced and guarde	ed and otherwise		Yes	□ No
12.	a.	Is your Boiler registered und	er the Indian Boile	er Act, 1923?			Yes	□ No
	b. If yes, please give details							
13.	Stat	e what acids, gases chemical	s or explosives will	l be used and to v	hat extent?			
14.		you at present insured or hav liability to your employees?	e ever proposed fo	or an insurance in	respect of		☐ Yes	□ No
	If so	o, please give the name of the	e Company or Com	npanies.				
	rene	any proposal for an insurance wal thereof even been declin e the total wages paid and pa	ed or withdrawn?			ast three years.	☐ Declined	d ☐ Withdrawn
	Year	Total Wages	Fat	tal	Perm. Dis	ablement	Tem	np. Disablement
			No.	Cost.	No.	Cost.	No.	Cost.
		Rs.	Rs	5.	l R	5.		Rs.
		Rs.	Rs	j.	R	5.		Rs.
	Rs. Rs. Rs.							Rs.
Com stat abor miss shal	npany emen ve, I/v epres l be th	e undersigned this against my/our Statutory ar t in the form required by the we hereby declare that all the ented or mis-stated any mate he basis of the contract between	nd common Law li Company of all wa above statements erial fact, that I/we	iability above mer ges actually paid, and particulars, w have fairly estim	ntioned. I/We agreated to pay premium which I/We have reated my/our total was a contracted to the contracted my/our total was a contracted my/our total was	ee to render, at m on any wages ad over checked	the end of eac paid in excess of are true that I/	ch period of insurance, a of the amount estimated We have not suppressed
Dat						Signature of	the Proposer	

Section 41 of the Insurance Act, 1938

- 1. No person shall allow or offer to allow, either directly or indirectly as an inducement to 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 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.