

Proposal Form No: _____

AVIATION HULL ALL RISK AND/OR AVIATION LIABILITY INSURANCE - COMMERCIAL - PROPOSAL FORM
Proposer's Details (To be filled in BLOCK LETTERS)

Proposer's name in full:	☐ Mr. ☐ Ms. ☐ Mrs. F I R S T M I D D L E L A S T			
Proposer's address:				
City:		State:		
Pincode:				
Proposer's Business				
or Occupation:				

DETAILS OF AIRCRAFT TO BE INSURED:

Make, Type & Series No.	Year Of Construction	Air Plane			Number & date of issue of last renewal of C of A	Engines	
		Licensed	Declared for purpose this in insurance	Registration/ Identification Marks		Number and type	Maximum all UP Weight of aircraft in kgs.

1. Value of the Aircraft:

Year of Purchase	Price Paid (Rs.)	Present value of the aircraft with standard instruments and equipments	Extra equipments and accessories fitted to or carried in the aircraft		Total value of the aircraft for the purpose of insurance (Rs.)
			Details	Value (Rs.)	

Total Sum Insured

2. Purpose for which the aircraft will be used	
3. Geographical limits for which cover is required	
4. Will aircraft be flown at night?	

5. By whom will the maintenance & running repairs be carried out

6. (a) Where will the aircraft usually be kept?

(b) Is the aircraft normally kept in a hanger?

(c) If so, state type of construction of hanger

7. Give details of pilots who fly the aircraft.

Particulars	Pilot	Pilot	Pilot
Name			
Age			
Types of aircraft flown			
Flying experience (in hours)			
Total day			
Total Night			
During last 3 months			
On type & make of aircraft proposed for insurance			
Current Licence No			
Date of Expiry			
Classification			
Details of accidents, if any, during last three years			

8. Details of insurance required:

A. SECTION I – LOSS OR DAMAGE TO THE AIRCRAFT - Aviation Hull Comprehensive - All Risk

Whether cover required?

If so, risks to be covered

(state 'flight', 'Taxiing', 'Ground',

'Moored' as the case may be) :

B. SECTION II – THIRD PARTY LIABILITY

Whether cover required?

If so, limit of Indemnity



indusindinsurance.com



022 4890 3009 (Paid)



74004 22200 (WhatsApp)



(any one accident)	
C. SECTION III – PASSANGER LIABILITY	
1. Whether cover required:	
2. Limit of liability per passenger:	
D. BAGGAGE LIABILITY	
Whether cover required?	
Limit of indemnity per passenger:	

9. Period of Insurance	From _____ To _____
Place: _____	
Date: _____	Signature of Proposer _____

PEP DECLARATION:	
Are you a Politically Exposed Person (PEP)?	☐ Yes ☐ No
If yes, please mention the position held	
Is any of your close relation or family member a PEP?	☐ Yes ☐ No
If yes, please mention the name and relation and the position held by such close relative/family member.	
I hereby declare that in future if me, any of my close relatives or any of my family member attains a position of PEP then I shall confirm the same to IndusInd General Insurance Co. Ltd as a mandate. I understand that this is a crucial information under the PMLA Rules and AML/CFT Guidelines and shall confirm that the answers given by me is true. In case the company comes to know that this is a misrepresentation and concealment of information then the policy shall be put on hold for scrutiny by the company and I shall be solely responsible for the same. Note : "Politically Exposed Persons" (PEPs) shall have the meaning assigned to it under sub clause (db) of clause (1) of Rule 2 of the Prevention of Money Laundering (Maintenance of Records) Rules, 2005." (db) "Politically Exposed Persons" (PEPs) are individuals who have been entrusted with prominent public functions by a foreign country, including the heads of States or Governments, senior politicians, senior government or judicial or military officers, senior executives of state-owned corporations and important political party officials".	

AML Guidelines

1. I/We hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been /will be paid out of proceeds of crime related to any of the offense listed in Prevention of Money Laundering Act,2002.
2. I Understand that the Company has the right to call for document to established sources of funds.
3. The Insurance Company has right to cancel the insurance contract in case I am/have been found guilty by competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

Place: _____

Date: _____

Signature of Proposer

PROHIBITION OF REBATES - SECTION 41 OF THE INSURANCE ACT, 1938 AS AMENDED BY INSURANCE LAWS (AMENDMENT) ACT, 2015.

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 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 liable for a penalty which may extend to ten lakh rupees.

