

Notes

1. Prior to signing the proposal form please read the question and answers again, especially if not completed in your hand writing. You are requested to disclose all facts including the same history of you and any person who will drive this vehicle and if you, or any person who will drive this vehicle is suffering from defective vision, hearing, any infirmity or physical defect or any other fact which the Insurer would consider as important in the assessment and acceptance of this proposal. If you have any doubt as to whether certain facts are relevant please disclose them. Failure to disclose any fact which the company would regard as likely to influence the assessment & acceptance of the proposal could result in the insurance being invalidated.
2. Insurance cover will not attach until a cover note or certificate of insurance has been issued by Orient insurance Ltd or on its behalf.
3. Subject to applicable loss the validity of comprehensive insurance will cease on change of ownership of vehicle.
4. No Claim Bonus – If you are entitled to a No claim bonus, please attach the NCB letter from the previous Insurer.

DECLARATION

I/We declare that the proposed vehicle is maintained in efficient and road worthy conditions and to the best of my/our knowledge and belief the statements made in this proposal are true and complete and that I/we have not withheld any material information which would be considered by Orient Insurance Ltd., as important in the assessment and acceptance of this proposal. In the event this proposal is filled by a sales person or any other on my/our behalf, I/we confirm that he/she act as my/our agent for such purpose.

I/we consent to Orient Insurance Ltd., seeking information which would affect this insurance from any other Insurance company or any other third party and I/we authorize the giving of such information. I/we undertake that the vehicle to be insured shall not be driven by any person who to me/our knowledge has been refused any motor vehicle insurance or continuous thereof and I/we agree that this proposal and declaration shall be the basis of the contract between me/us and Orient Insurance Ltd. I/we consent to Orient Insurance Ltd using my/our mobile phone number and/or email address for further communication with me/us in the event this proposal for motor insurance being accepted by the company.

..... Date Proposer's Signature
Including Company seal
where applicable

Producer (Broker/Agent/Other).....

Your new 3 wheeler and the
INSURANCE
for it, all from one place.



Auto Care Plus



Orient Insurance Limited
133, New Bullers Road, Colombo-04, Sri Lanka.
Tel : + 94 11 2030300 Fax: + 94 11 2555589

**ORIENT MOTOR CARE PLUS
THREE WHEELER PROPOSAL FORM**

Personal Details

- Proposer's Name in Full :
- Postal address :
- District : Postal Code :
- Contact details:**
Residence :
Office :
Mobile :
E-mail :
- Date of Birth :
- NIC/Passport/Business Registration No :
- Marital Status:
Married Single
- Gender:
Male Female

Details of Vehicle

- Registration No :
 - Date of Registration :
 - Make : Model :
 - Chassis No :
 - Engine No :
 - Body Color : Year of Make :
 - Engine capacity :
 - Purpose of use: Private Hiring Other
- If the actual usage of the vehicle is different to the purpose of use stated in response to question 13 of this proposal, I acknowledge that Orient Insurance Ltd has the right to decline any liability to settle claims arising therefrom*

- What type of Cover required :
Comprehensive Third Party
- Period of Insurance Cover :
From To
- Market Value of the vehicle. Rs.
- Is this vehicle presently maintained free of any damage? If No please give details
- Is the vehicle subject to any lease or loan if so the name of the financial institution
- Are you the registered owner of the Insured vehicle?
Yes No if not please state the name of registered owner

Premium reduction options (applicable only for comprehensive cover)

- Do you wish to bear voluntary excess on your claim
Yes No
If yes, please select the option
a) Rs 2,500 b) Rs. 5,000 c) Rs. 7,500
d) Rs. 10,000

- Who will drive the vehicle?
Insured Hired Driver Other

Additional covers (Applicable only for comprehensive cover)

- Do you need following additional covers? If "yes" please tick (✓) and where applicable mention amount
I. Strike, Riot and civil commotions
II. Terrorism
III. Natural disaster
ii Exclusion cover
(Applicable only for hiring Three Wheelers Only)

- Workmen's compensation cover (statutory liability only) to a Driver
Please tick the required extension for WCI cover.
a). Strike Riot & Civil Commotion
b). Terrorism
Personal accident benefit cover for
a) Passengers b). Paid Driver
Rs. 100,000/- (Maximum Limit per person)
Please tick the required extension for Personal accident cover.
a). Strike Riot & Civil Commotion
b). Terrorism
- Third party property damage Rs.
(Maximum cover for Three Wheeler Rs.300,000/-)
- Legal liability cover for passengers (max 3 passengers only) Rs.
(Maximum cover per passenger Rs.100,000/-)
If you or any person will learn to Drive in this vehicle Please give.

Name
NIC No.

Insurance History

- State the name of previous insurer and claim/loss history of your vehicle/s including the amount claimed. (If any)
- Is this vehicle presently insured with any other insurer. Yes No
If "yes" state the cover period and the type of cover
- Has any insurer ever declined your proposal, cancelled or refused to renew your policy or required and increased premium or imposed special terms? Yes No
If yes state full details