

Kshema El Niño Index Insurance

Proposal Form

Reference No.	Email ID: customer.support@kshema.co	Website: www.kshema.co	
Distribution Details			
Intermediary Name			
Intermediary Code			
SP Name			
SP Code			
Proposer Details			
Proposer's Name: Mr./Mrs./Ms.:			
Address			
Contact No			
Insured details			
Insured's Name: Mr./Mrs./Ms.			
Address			
Contact No			
E mail ID			
Relation with the Farm	☐ Owner ☐ Tenant		
If Tenant? Please Provide Owner Name			
Subject Matter Details			
Name of Crop	Kharif	Rabi	Annual
Insured Acreage			
Location of Farm	District		
	Tehsil		
	Village		
Documents attached: (Photocopies)	☐ Land record ☐ Aadhar Card ☐ PAN Card ☐ Passport Photo ☐ Bank Passbook ☐ Tenant Certificate ☐ Sowing Certificate ☐ Any other specify. _____		

Survey No. of the proposed farm with acreage

Survey Number	Acreage
Total	

Premium Payment Mode

☐ UPI ☐ Net Banking ☐ Paytm ☐ Debit Card ☐ Credit Card

Transaction No.

Date of Payment

Period of Insurance

Declaration

I hereby declare that the provisions of the scheme have been read and understood /explained by to me in detail before completing the Proposal Form. I hereby further declare that the particulars furnished above are true and correct. I have sown/intend to sow the crop mentioned in this Proposal Form. Further, I undertake to inform the insurance company if there is a change in crop and if there is any difference in premium which becomes payable, I agree to pay the same. I have not submitted any other crop insurance proposal covering the above-mentioned crop grown in the above-mentioned Polygon ID during the Year and season mentioned in this proposal under any other Scheme either through Directly or PACS or Insurance intermediary or any other Bank branch or any other Scheme or with any other Insurance Company.

I understood that the claims payout shall be as per the term sheet designed for this policy and my payout shall depend on the breach of trigger that has been set against the parameters covered. I further agree that the company shall determine the breach of trigger based on the data obtained from recognized source.

I hereby declare that the mobile number and email ID mentioned in the proposal form are registered in my name. Therefore, I hereby authorize Kshema General Insurance Limited to send any communication during the policy period, including but not limited to claim-related information, payment confirmations, and claim repudiations, to my mobile number [] and email ID [].

- Source Of Fund

Salary _____ Business _____ Others _____ (In case of others, please specify)

I/we hereby declare and confirm that the premium has been paid out of legally acquired sources of income and the subsequent premiums if any, will continue to be paid out of legally declared and assessed source of income.

- CKYC

I/we hereby give my/our consent to the Company to verify and obtain my/our identity/address proof through Central KYC Registry or Goods and Service Tax Portal or Ministry Of Corporate Affairs Portal or National Securities Depository Limited portal for the purpose of undertaking KYC.

I hereby grant consent to Agent/Broker/Corporate Agent or any other licensed intermediary to share my KYC (Know your Customer) and customer due diligence information with kshema General Insurance Limited for the purpose of my insurance proposal.

- Electronic-Insurance Account:

Do you want to open e-IA account: Yes /No

If Yes, Please provide e-IA No. to deposit your insurance policy. E-IA No. _____

"I hereby consent to the collection, use, and disclosure of my personal information by Kshema General Insurance Limited for the purposes of providing insurance services, including underwriting, claims processing, and customer service. I understand that my personal information may be shared with third-party service providers in relation to the insurance services and to meet the statutory & regulatory compliances. I acknowledge that I have the right to access, correct, or delete my personal information at any time by contacting at customer.support@kshema.co. This consent is valid for the duration as specified in the Insurance Regulatory and Development Authority of India (Maintenance of Information by the Regulated Entities and Sharing of Information by the Authority) Regulations 2025 and any other applicable law"

Signature/ Thumb Impression of Proposer/Insured.		Date:	Place:	
Office Purpose Only				
Reference No.	:	Intermediary Name:	☐ Direct ☐ Agent ☐ Broker ☐ Bank	
Distribution Details		Intermediary Code		
Name:				
Designation				
Employee ID				
Location				
Verification Date:	Signature of Officer:			

NOTE: This Proposal Form is not proof of insurance unless the premium is realized by US & Policy is issued.

INSURANCE ACT 1938 SECTION 41- 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 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 3 [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

KSHEMA GENERAL INSURANCE LIMITED

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UIN: IRDAN162RPCR0031V01202627

kshema

which may extend to ten lakh rupees.

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