

Kshema Sukriti
 UIN: IRDAN162RP0002V05202324

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 (UIN:IRDAN162RP0002V05202324)
Proposal Form

Reference No.	Email ID: customer.support@kshema.co	Website: www.kshema.co	
Distribution Details:			
Channel Name:	Direct/ Agent/ Broker/Bank	Channel Code	
Proposer Details			
Proposer's Name: Mr./Mrs./Ms.:			
Address:		Contact No:	
Insured details:			
Insured's Name: Mr./Mrs./Ms.			
Address	Aadhar Number	Relation with the Farm: Owner / Tenant	Contact No
Is Your Farm Irrigated / Rainfed Land?	Source of Irrigation (If irrigated):		
Owner / Tenant	In the case of Tenant (Provide Owner Name)		
Nominee Details:			
Name of the Nominee	Relation with Insured	Age: *(In case of Minor provide guardian Details)	Guardian Details
Subject Matter Details:			
Name of the Crop	Crop Duration in days	Date of Sowing	Insured Acreage
Location of Farm	District	Tehsil	Village
Coverages select 1 peril from each of the categories.			
Major Perils	Cyclone / Inundation/ Flood / Hailstorm		
Minor Perils	Aircraft Damage / Earthquake / Fire excluding forest fire and bush fire / Animal attack (Monkey/Wild boar/Elephant/Rabbit)		
Do you want any Additional Sum Insured (In units of Rs.5000/-) to a Maximum of cost of Cultivation. (Refer Cost of Cultivation table)			
Please note Additional Sum Insured can be opted at inception of the policy and not later			
Is the insured farm/property geotagged? Yes / No	Survey No. of the proposed farm with acreage:		
Crop Season Kharif /Rabi / Summer	Survey Number	Acreage	

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Documents attached: (Photocopies) Pattadhar passbook / Aadhar Card / PAN Card / Passport Photo / Bank Passbook /Tenant Certificate /Sowing Certificate/ Any other specify.			
	Total		
Premium Payment Mode: Please tick the mode of payment: UPI/Net Banking/Paytm/Debit Card /Credit Card		Transaction No.:	Date of payment:
Period of Insurance:			
Insurance History:			
Any reasons for Decline/Rejection/Loading:			
Name of the Insurance Company	Period of Insurance	Have you received any claim:	Amount of Claim Received
Financial Interest:			
Name of Banker/financer		Address of Financier:	
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.			
Signature/ Thumb Impression of Proposer/Insured.	Date:	Place:	
Office Purpose Only			
Reference No.	Distribution Details:	Channel Name: Direct/ Agent/ Broker/Bank/POSP	Channel 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.

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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 which may extend to ten lakh rupees.

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