

# Kshema Bharat Sookshma Udyam Suraksha Policy

## Proposal Form

### Important:

1. This proposal is for covering an enterprise whose total value of insurable assets at a location does not exceed ₹ 5 Crore, against Fire and Allied Perils.
2. Read the Prospectus/Key Features Document/Policy Wordings before filling up this proposal form to understand the meaning of the terms used herein better.
3. The property proposed for insurance is not covered until the proposal is accepted and premium is paid.

Policy Issuing Office Address & Code	
Intermediary/Agent Name & Code (if any)	

### A. DETAILS ABOUT PROPOSER AND POLICY PERIOD

Name of Proposer	
Address of Proposer	
Telephone No. (Landline No.)	
Mobile No.	
Email:	
Contact person details (where proposer is not an individual)	A. Name B. Designation
Policy to be issued in favor of (list out all the parties who have insurable interest) including the financial institutions.	
Period of Insurance	From:

	To:
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**B. BUSINESS AND LOCATION OF BUSINESS**

Business of Proposer						
Location of risk/business to be covered - full postal address with Pin Code.	Sl No.	Address	Pin code	Occupancy	Age of unit	Floor*
	1.					
	2.					
	3.					
	4.					
*Floor: Ground Floor (GF) / Mezzanine Floor (MF) / Higher Floor (H).						
Details of insured property	Please tick in the space below:					
Offices, Shops, Hotels etc.	YES <input type="checkbox"/> NO <input type="checkbox"/>					
Industrial / Manufacturing risks	YES <input type="checkbox"/> NO <input type="checkbox"/>					
Storage outside Industrial/ Manufacturing risks	YES <input type="checkbox"/> NO <input type="checkbox"/>					
Tanks / Gas holders outside Industrial/ Manufacturing risks.	YES <input type="checkbox"/> NO <input type="checkbox"/>					
Utilities located outside Industrial/Manufacturing risks.	YES <input type="checkbox"/> NO <input type="checkbox"/>					
Boundary wall	YES <input type="checkbox"/> NO <input type="checkbox"/>					
Basement storage	YES <input type="checkbox"/> NO <input type="checkbox"/> If yes value stored Sl: ₹.....					
Others (please specify)						
If used as warehouse/godown (not located in a manufacturing unit), please give the list of goods stored.						

If used as an Industrial Manufacturing unit give products manufactured at the location proposed (detailed block plan showing various facilities to be enclosed wherever applicable.)	
If used as an Industrial Manufacturing unit, please state whether the factory is working or silent?	
Fire Protection devices installed	Please tick the correct answer in the box below.
	<input type="checkbox"/> Portable Extinguishers <input type="checkbox"/> Small bore hose reels <input type="checkbox"/> Trailer Pumps/Fire engines <input type="checkbox"/> Hydrant System <input type="checkbox"/> Sprinkler System <input type="checkbox"/> Fixed Water Spray System <input type="checkbox"/> Foam System <input type="checkbox"/> Fire Alarm System <input type="checkbox"/> Gas Flooding System <input type="checkbox"/> Others, please specify below.
Indicate whether AMC (Annual Maintenance contract) for the Fire Protection Appliances is in force.	YES <input type="checkbox"/> NO <input type="checkbox"/>
Construction details	
Please state material used	Please tick the correct answer in the box.
Walls	Kutcha <input type="checkbox"/> Pucca <input type="checkbox"/>
Floor	Kutcha <input type="checkbox"/> Pucca <input type="checkbox"/>
Roof	Kutcha <input type="checkbox"/> Pucca <input type="checkbox"/>

<b>Note:</b>			
<b>Kutcha:</b> Building(s) having walls and/or roofs of wooden planks/thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt/ canvas/tarpaulin and the like are treated as Kutcha Construction.			
<b>Pucca:</b> Buildings other than Kutcha are treated as Pucca constructions			
a) Number of Floors			
b) Age of the Building		Less than 5 Years 5- 10 Years 10-20 Years Above 20 Years	
Distance between the risk to be covered and nearest Fire Brigade			
Whether You have insured the same property with any other Insurance Company with the same type of coverage (Give details)			
Whether Insurance was declined by any other Company (Give details)			
Premium / Claim details for the past 36 months excluding the expiring policy period.	Year	Premium	Claim
		₹	₹
		₹	₹
		₹	₹
		₹	₹
	Total	₹	₹
<b>C. SUM INSURED AND OTHER DETAILS OF INSURED PROPERTY</b>			
(Indicate Sum Insured on the following basis:			
<ul style="list-style-type: none"> <li>For Building, Plant and Machinery, Furniture, Fixture and Fittings and other contents: Reinstatement Value;</li> <li>For raw material: Landed Cost;</li> <li>For stock in process: Input cost;</li> <li>For finished stock: Manufacturing cost of the finished stock or the Contract Price* of goods sold but not delivered, as applicable.</li> </ul>			
* Contract Price is in respect only of goods sold but not delivered, for which You are responsible			

and with regard to which under the conditions of the sale, the sale contract is cancelled by reason of any Damage insured under this Policy either wholly or to the extent of the Damage. The Company's liability shall be based on the Contract Price).

1)	Descript ion of Block	Building including plinth, Basement and additional structures	Plant & Machinery	FFF & Other Equip ment	Raw materials	Stock in Proces s	Finishe d Stock	Other content s	Total

**D. DETAILS FOR IN-BUILT COVER FOR FLOATER**

2)	Floater Cover (for stocks at various locations)	<table><tr><td>Location (Postal Address with Pin Code)</td><td>Sum Insured (in ₹)</td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> <p>i) Maximum value at any one location: ₹.....</p> <p>ii) Whether stocks stored in open: Yes/No</p>	Location (Postal Address with Pin Code)	Sum Insured (in ₹)						
Location (Postal Address with Pin Code)	Sum Insured (in ₹)									

**E. STANDARD ADD-ON**

3)	Stocks which fluctuate in value to be covered on (monthly) declaration basis: Amount (₹):
Do You want to opt for Declaration Policy? -- Yes/No (strike off what is not applicable). If Yes, give details below: Below are the Additional Add-on's under this policy	
Architect's, Surveyor's, and Consulting Engineer's fees	YES <input type="checkbox"/> NO <input type="checkbox"/>
Removal of Debris	YES <input type="checkbox"/> NO <input type="checkbox"/>
Deterioration of Stocks in Cold Storage premises due to accidental power failure consequent to damage at the premises of Power Station due to an insured peril.	YES <input type="checkbox"/> NO <input type="checkbox"/>
Deterioration of stocks in cold storage premises due to change in temperature arising out of loss or damage to the cold	YES <input type="checkbox"/> NO <input type="checkbox"/>

storage machinery (ies) in the Insured's premises due to operation of insured peril.		
Impact Damage due to Insured's own Rail/Road Vehicles, Forklifts Cranes, Stackers and the like and articles dropped there from.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Loss of Rent	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Rent for Alternate accommodation	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Spoilage Material Damage cover	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Leakage	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Leakage and Contamination Cover	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<b>F. Premium Details</b>		
3)	Mode of Payment	
	Payment Details	
	Amount	

**F. Declaration by Insured**

I / We hereby declare that the value of insurable assets is less than ₹ 5 Crore (Rupees Five Crore) and the statements made by me / Us in this Proposal Form are true to the best of my/ Our knowledge and belief and I / We hereby agree that this declaration shall form the basis of the contract between me/Us and the

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 [.....].

"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 [customer.support@kshema.co](mailto: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"

If any additions or alterations are carried out in the risk proposed after the submission of this proposal form, then the same should be conveyed to the insurers immediately.

Date:

Place:

Signature of the Proposer

**INSURANCE ACT 1938 SECTION 41- Prohibition of Rebates**

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 a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.

ANY PERSON MAKING DEFAULT IN COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO TEN LAKHS RUPEE.

kshema

KSHEMA GENERAL INSURANCE LIMITED

Kshema Bharat Sookshma Udyam Suraksha Policy

UIN: IRDAN162RPPR0016V01202425

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