



# নিটল ইন্স্যুরেন্স কোম্পানী লিমিটেড

## NITOL INSURANCE COMPANY LIMITED

Head Office : Police Plaza Concord, Tower-2 (6th Floor), Plot # 02, Road # 144, Gulshan-1, Dhaka-1212, Bangladesh. Phone : +880-2-55045202-05, +880-2-55045210  
Fax : +880-2-55045206, E-mail : info@nitolinsurance.com, claims@nitolinsurance.com  
Web : www.nitolinsurance.com, Call Center: +88 01755 660331

### PROPOSAL FORM FOR COMMERCIAL VEHICLE INSURANCE

Certificate NO.....

ADDRESS OF ISSUING OFFICE

Policy No.....

Proposer's Full Name : .....  
Address:.....  
Business or Occupation: ..... Age of the proposer's (in case of individual).....  
Commencement date.....period of insurance: From..... To :.....

#### PARTICULARS OF THE VEHICLE

Registration Marks & Number	Make of Vehicle	Horse Power or Cubic Capacity	Year of Manufacture	Licenced Carrying Capacity		Type of body
				Goods	Passengers	

Engine No.

Chassis No.

#### BREAKUP OF FULL INSURED VALUE, (FIV)

Vehicle other than Glass Item		Glass Item only		Accessories	Full Insured Value	Electricals/Electronics appliances		
(a)	Tk.	(b)	Tk.	(c) Tk.	(a+b+c) Tk.	T.V. Tk.	Radio, R.PTk.	Airconditions Tk.

Please give a definite answer to each question below (Ticks & dashes are not acceptable as answer)

- Are you the owner of the vehicle and is registered in your name?  
If not, state the name and address of the owner in whose name the Vehicle is registered
- Describe the permit granted by B.R.T.A whether public/Stage/Express/Contract Carriage permit and or other permit ( In case of miscellaneous vehicle)
- Where the vehicle is usually garaged?
- Is the vehicle in perfect condition?
- Please mention the area where the vehicle to be used?
- Have you previously held any Motor Vehicle Insurance?  
If so, please state the name of the underwriter.
- Are you entitled to a No Claim Bonus from your previous underwriter?  
If so, Please attached a clearance certificate from the underwriter, not below the rank of D.G.M. or Vice President.
- Has any underwriter ever a) Declined your proposal .b) Charged any increased premium or imposed special condition c) Retused to renew your policy d) Cancelled your policy ?  
If so, state the reason.
- Driver :**  
a) How long have you been driving the Motor Vehicle ( In case of self-driving)?  
b) Other driver, please state name and age  
c) Date of issue of the driving lincence.
- a) Have you met any accident and lodged any claim during the past three years in connection with this or any other Motor Vehicle owned by you?  
b) If so, please give in details the following Particulars:  
i) No, of accident met:  
ii) No, of claim lodged:  
iii) Total amount of claim lodged:  
iv) Claim paid upto date:
- a) Do you require comprehensive cover?  
b) Policy limited to the cover required by Motor Vehicle Amendment Act (Act liability only).  
c) Do you like to include any extra benefit? If so, please mention the serial number in seriatim furnished on the back page?  
d) Do you like to exclude any of the standard perils, furnished on the back page? if so, please mention the serial number in seriatim.

I/We declare that the above statement and particulars are correct and complete in every respect and that the Motor Vehicle (s) mentioned above is/are/my/our own property, is/are and will be kept in good condition and repaired.I/We agree that these statements and particulars shall be the basis of the contract between me/us and NITOL INSURANCE COMPANY LTD.

Further I/We agree if these statements and particulars are written by any other person shall be deemed to have been by our Agent for the purpose of filing in this form and his/her statements shall be the basis of the contract between me/us and NITOL INSURANCE COMPANY LTD. if the risk is accepted. I/We undertake to pay the premium called upon to do so.

Acceptance of this proposal is subject to the rules and regulations of Nitol insurance Company Ltd.

Date :.....

proposers's signature

**EXTRA BENEFITS WHICH MAY BE INCLUDED AT AN ADDITIONAL PREMIUM**

1. Liability to the Public risk

Increased limit for personal accident including passenger.		Increased limit for property damages	
a) Tk.	20,000.00	Tk.	50,000.00
b) Tk.	40,000.00	Tk.	1,00,000.00
c) Tk.	60,000.00	Tk.	1,50,000.00
d) Tk.	80,000.00	Tk.	2,00,000.00
e) Tk.	1,00,000	Tk.	2,50,000
f) Tk.	1,20,000	Tk.	3,00,000
g) Tk.	1,40,000	Tk.	3,50,000
h) Tk.	1,60,000	Tk.	4,00,000
i) Tk.	1,80,000	Tk.	4,50,000
i) Tk.	2,00,000	Tk.	5,00,000

2. Liability for accident to fare paying passenger.
3. Legal liability to non-fare paying passengers who are employees of the insured but not workmen as per workmen's compensation Act.
4. Legal liability to non-fare paying passenger who are not employees of the insured.
5. Legal liability to person employed in connection with the operation and maintenance and/or. for loading and unloading of the goods carrying vehicle excluding drivers.
6. Legal liability to paid driver and/ or conductor in 'connection with the operation of Buses only.
7. Legal liability under workmen's compensation Act. in respect of carrying of more than 7 (seven) persons of such employees including driver in a goods carrying vehicle.
8. Indemnify to Hirers.

**EXCLUSION OF STANDARD PERILS**

1. Riot and Strike including Malicious.
2. Earthquake (Fire and Shock Damage).
3. Flood, Typhoon, Hurricane, Storm, Tempest, Inundation, Cyclone, Hailstorm and Frost.