

FUTURE EVENT INSURANCE PROPOSAL FORM



FUTURE GENERALI

TOTAL INSURANCE SOLUTIONS

Name of the Applicant/ Company	
The Applicant is: (One of the Following)	Individual / Partnership Firm / Company / Corporation / Joint Venture / Others _____ (Cancel whatever Not Applicable)
Postal Business Address	
City & PIN Code	
Title of the Event	
Language of Event	
Period Of Event	Start Date: _____ End Date: _____ Total Number of Days: _____ Number of Production Days: _____ (Actual Shooting Days)
Running Time :	_____ min/ hr
Is the name of the Event in likeness to any living person/ political event which needs permissions?	YES / NO If YES has any such permission been taken? (Attach separate sheet if required)
Is the there any Loan taken from any Bank / NBFI / Self	YES / NO / Self If Yes Name _____ Address: _____ Tel Nos.: _____
Has the Applicant been Black listed by any of the Associations.	YES / NO If YES – When Has it been resolved _____
Is the Applicant member of any Association.	YES / NO If YES Name: _____ Place: _____
Is there any court case pending against you?	YES / NO If YES give brief details (Attach separate sheet if required)
Event Schedule	(Attach separate sheet if required) Time to be spent at each location / country etc.
Details of Safety Feature involved during the entire event	(Attach separate sheet if required)

Give Details of the use of the following	Water Craft / Near Water / Use of Air Crafts / Trains & Railroads / Animals / Pyrotechnics / Expensive Antiques, Jewellery / Auto /Auto / Motorcycle Chase / Crash	
List of any Additional Expenses you wish to include in the Insurable Event Cost:	(Attach separate sheet if required)	
Details of Previous Insurance	Name of the company, Any Claims Made? _____ If YES under what heading: _____	
Cover about the following		Sum Insured
	EVENT CANCELLATION	
	PROPS, SET, STAGE and EQUIPMENTS	
	PUBLIC LIABILITY	
	PERSONAL ACCIDENT	
	CASH IN TRANSIT & SAFE	
Any special computer-generated graphics, animations or other process involved?	Yes / No If so, Please explain.	
Any special effects or equipment?	Yes / No	
Any tele-cine processes involved?	Yes /No	
Name and address if the studio /laboratory to be used		
Vaults to be used		
Cutting rooms to be used		
Will you be using any specialized computer programs to create any images or effects?	Yes / No If YES, please explain and name the software	
Will you be using any special film or cameras?	Yes / No If so, please explain.	
Details of props, set and wardrobe	List of equipments which will be used for outdoor/indoor shooting. (Attach separate sheet if required)	
Equipment owned or hired and value?		
Duration of hire?		
Method of transportation?		
How are you going to protect the property (theft/fire etc.)		
Identify any equipment props, set or wardrobe with a value in excess of Rs 50.000		
Identify any antiques, art work or precious objects valued in excess of Rs 10,000 subject to valuation certificate		
Maximum time needed to rebuild destroyed sets		

Identify any unique/one off pieces of property or unusual locations to be used	
Do you have access to any alternatives?	Yes/No If YES, please explain
Details of miscellaneous equipment	List of equipment which will be used for outdoor /indoor shooting (Attach separate sheet if required)
Equipment owned or hired and value?	
Duration of hire?	
List of item(s) over RS. 50.000	
Brief description of protection of property	
Where will the equipment be kept during use?	
Location to which the equipment will be returned when not in use?	
Details of third party property damage	Are there events involving residential locations? Yes /No
Are equipments / machineries in sound conditions of repair?	Yes/No
Details of surrounding areas/property/ population?	
Events which may cause damage to surrounding?	(Property following fire etc.?) Yes /No

DECLARATIONS:

I/We hereby declare and warrant that the above statements are true and complete in all respects and that there is no other information which is relevant to my application for insurance that has not been disclosed to you. I agree that this proposal and the declaration shall be the basis of the contract between me and FUTURE GENERALI INDIA INSURANCE CO LTD and I/We agree to accept a policy, subject to the conditions prescribed by FUTURE GENERALI INDIA INSURANCE CO LTD

- ☐ I/We hereby declare that the premium for the said policy is paid out of the legally declared and assessed sources of my/our income OR
- ☐ I/We hereby declare that the premium is paid from the Bank Account of Mr. /Ms. _____, the payment is allowed under the Income Tax Act 1961, and there is insurable interest with the payee.

I/we am/are (please tick all that are applicable)

- ☐ High Net Worth Individual/s ☐ Non Residential Indian/s ☐ Politically Exposed Person/s ☐ Jeweller/s
- ☐ Non Governmental Organization ☐ Film Actor/s ☐ Producer/s

PAYMENT DETAILS:

Premium paid by Cash / Cheque No _____ Date _____ Bank _____

Amount (Rs.) _____

PAN _____ (if premium payable is above Rs.1 lac (Please attach proof)

Place: _____ Date: _____ Proposer's Signature: _____

Please fill up the request for authorization form attached with this proposal form to receive Claim/ Refund payments if any, directly into your bank account through NEFT if the premium paid is more than Rs 25000/-

For Intermediary Use Only

Intermediary's Code: _____	Intermediary's Signature : _____
Intermediary's Name: _____	

SECTION 41. OF INSURANCE ACT, 1938-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 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 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. Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to Five Hundred Rupees.

FUTURE GENERALI INDIA INSURANCE COMPANY LIMITED

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IRDA Regn. No. 132, CIN - U66030MH2006PLC165287, Service Tax Registration Number: AABCF0191RSD002

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