



The New India Assurance Company Limited
Head Office: 87, M G Road, Fort, Mumbai-400001

Authorised Agent: Ashadip Medical and Social Welfare Association. **Agency Code:** MI00000130
Phone: 033 64990622 **Website :** <http://www.ashadip.org> **Email:** ashadipmedical@gmail.com

JANATA PERSONAL ACCIDENT POLICY
PROPOSAL FORM

1. Name of Proposer Mr/Mrs: _____
2. Full Address: _____
_____ Pin No.....
3. Age: _____ 4. Date of Birth: _____
4. Occupation: _____ 6. Annual Income: Rs. _____
7. If there is any disability Please specify: _____
8. Name of nominee: _____
9. His/Her Age: _____
10. Relation with Insured: _____
11. His/Her full address: _____

12. Witness to Nomination: _____
a) Name: 1) _____ 2) _____
b) Address: 1) _____ 2) _____
13. Capital Sum Insured: Rs. _____
14. Policy Period (1 year) _____

Date: _____

Place: _____

Proposer's Signature