

RAHEJA QBE GENERAL INSURANCE COMPANY LIMITED



Raheja QBE General Insurance Company Limited

Comprehensive Crime Proposal

Note to the Proposer

Signing or completing this proposal does not bind the Proposer, or any individual or entity he or she is representing to complete this insurance.

Please provide by addendum any supplementary information which is material to the response of the questions herein.

All answers should be given as a group response i.e. if any subsidiary company has different responses these should be provide separately on your headed paper.

Proposer Details

1. Name of Proposer _____
2. Communication address _____

3. Permanent Address _____

4. Date established _____
5. Email id of the Proposed Insured : _____
6. Mobile no. of the Proposed Insured : _____
7. Bank account details :

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Account no. _____

Account Type(Saving/Current) _____

Name of the Bank & Branch _____

MICR Code(9 digit) _____

IFSC Code (11 character code) _____

8. Nomination details:

	1 st Nominee	2 nd Nominee	3 rd Nominee	4 th Nominee
Name of Nominee				
Date of Birth of Nominee	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY
Percentage of Nomination	_____%	_____%	_____%	_____%
Relation with the Insured				
Mobile No.				
Email ID				
Present Address				
Permanent Address				
Details of authorised person in case if the nominee is a minor-				

Bank account details of the nominee

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	1 st Nominee	2 nd Nominee	3 rd Nominee	4 th Nominee
Account no.:				
Account Type- Saving/Current:				
Name of the Bank & Branch:				
MICR code(9 digit)				
IFSC code(11 character code):				

Note: In case of more than 1 nominee, please attach a separate annexure mentioning all the detail of the nominees with their share in %:

9. Principal activities/services of Proposer _____

10. Number of permanent directors _____

11. Number of employees:

(a) Domestic _____

(b) Overseas _____

12. Number of locations:

(a) Domestic _____

(b) Overseas _____

13. Do you wish to avail a physical copy of your policy documents? ☐ Yes ☐ No.



Internal Controls and Procedures

1. Does the company have an employee Handbook/Manual? ☐Yes ☐No

If "yes"

- (a) does it contain written instructions on all aspects of your business? ☐Yes ☐No
- (b) does it clearly define the individual duties of each employee? ☐Yes ☐No
- (c) does it address security procedures (including electronic data security)? ☐Yes ☐No

2. Are employees trained and re-trained, if necessary, on all aspects of:

- (a) physical and electronic data security? ☐Yes ☐No
- (b) operational procedures? ☐Yes ☐No

3. Are all employees required to take an uninterrupted, two week holiday each calendar year? ☐Yes ☐No

4. Are the duties of each employee arranged so that no one employee is permitted to control any transaction from commencement to completion? ☐Yes ☐No

5. (a) Please provide details of the groups recruitment policy including details of your assesment of the suitability for all positions

(b) Please describe your employee leaving procedures.

(c) Please describe your staff rotation procedures.

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6. Are any branches, subsidiaries or associated companies allowed to maintain different operational procedures than the Head Office/Parent Company? ☐Yes ☐No
- If "yes", is prior approval required from Head Office/Parent Company? ☐Yes ☐No
7. Do you maintain dual control over the handling of:
- (a) securities? ☐Yes ☐No
 - (b) company/corporate cheques and drafts? ☐Yes ☐No
 - (c) dormant accounts (if dormant for longer than 6 months)? ☐Yes ☐No
 - (d) access codes, cyphers, test keys? ☐Yes ☐No
8. Is joint custody maintained for the safeguarding of:
- (a) access codes, cyphers, test keys? ☐Yes ☐No
 - (b) access to Property whilst in safes and/or vaults? ☐Yes ☐No

Computer Systems

1. Do you operate or subscribe to any automated teller machine network or electronic point of sale system? ☐Yes ☐No
2. Do you make or receive funds transfer instruction via any of the following methods and what are the average daily transfer limits against each method used?:
- (a) interbank electronic communications systems
 - (i) BACS ☐Yes ☐No
 - (ii) SWIFT ☐Yes ☐No
 - (iii) CHAPS ☐Yes ☐No
 - (iv) Bankwire ☐Yes ☐No
 - (v) Other, please specify _____
 - (b) Internet ☐Yes ☐No

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- (c) electronic mail ☐Yes ☐No
- (d) telex..... ☐Yes ☐No
- (e) facsimile ☐Yes ☐No
- (f) voice initiated ☐Yes ☐No
- (g) on-line cash management ☐Yes ☐No
- (h) other, please specify.....
3. Are all fund transfer instructions subject to a verification and authentication process? ☐Yes ☐No
4. Do you secure fund transfer instructions (e.g. through the use of passwords, encryption, testing, call back or other authentication)? ☐Yes ☐No
5. Do you permit the transfer of funds via telephonic instruction? ☐Yes ☐No
- If "yes", in respect of corporate or business accounts only:
- (a) is there a written agreement with customers? ☐Yes ☐No
- (b) does the written agreement contain transfer limits? ☐Yes ☐No
- (c) is verification, by someone other than the initiator of the transfer instruction, required prior to such transfer taking place? ☐Yes ☐No
6. Are passwords used to give varying levels of access to your computer system and funds transfer systems on the need and authorisation of user basis? ☐Yes ☐No
7. Are all key source documents maintained in a secure environment prior to being entered into the computer system in order to prevent unauthorised modification or inappropriate use of data? ☐Yes ☐No
8. Are remote terminals kept in a physically secure location accessible by authorised personnel only? ☐Yes ☐No

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9. Do you utilise any recognised software packages to control access to your computer system? ☐ Yes ☐ No
- If “yes”, do you modify such software to your own specifications? ☐ Yes ☐ No
10. Are your data processing centers physically separated from other departments? ☐ Yes ☐ No
11. Do you have an access control system for your data processing centers? ☐ Yes ☐ No
12. Are data file generations stored and secured off-site in a restricted area? ☐ Yes ☐ No
13. Do you utilise independent contractors to prepare electronic computer programs? ☐ Yes ☐ No

If “yes”:

- (a) are specific parameters in place to restrict their access? ☐ Yes ☐ No
- (b) are their activities overseen when accessing your computer system? ☐ Yes ☐ No
- (c) are safeguards in place to prevent access to your other systems? ☐ Yes ☐ No

Internet Facility/ E-Commerce

1. Do you provide an Internet facility? ☐ Yes ☐ No
- If “yes”, do you offer any of the following?:
- (a) product information only ☐ Yes ☐ No

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- (b) account balance ☐ Yes ☐ No
- (c) pre-authorised account to account transfers..... ☐ Yes ☐ No
- (d) loan applications ☐ Yes ☐ No
- (e) interactive mortgage applications ☐ Yes ☐ No
- (f) business/company account management facilities..... ☐ Yes ☐ No
- (g) insurance products ☐ Yes ☐ No
- (h) on-line securities dealing..... ☐ Yes ☐ No
- (i) other, please specify _____
2. Do you have formal terms and conditions for the use of your Internet facility, which outline the obligations and responsibilities of the users? ☐ Yes ☐ No
3. Is the identity of users verified and authenticated? ☐ Yes ☐ No
- If "yes", please identify the method used
- (a) password ☐ Yes ☐ No
- (b) one-time password ☐ Yes ☐ No
- (c) public/private key encryption ☐ Yes ☐ No
- (d) digital signature ☐ Yes ☐ No
- (e) other, please specify _____
4. Do you encrypt data whilst it is stored or held within your Internet facility? ☐ Yes ☐ No
5. Are firewalls and/or comparable software used to authorise access to your Internet facility? ☐ Yes ☐ No

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If "yes", do you modify such software to your own

specifications ☐ Yes ☐ No

6. Do you use any anti-virus software?..... ☐ Yes ☐ No

If "yes" is this upgraded on a regular basis?..... ☐ Yes ☐ No

7. Do you monitor and produce reports on intrusion/ unauthorised access activity?..... ☐ Yes ☐ No

8. Do you restrict access between your Internet facility and your main computer system?..... ☐ Yes ☐ No

9. Do you have a specific department which maintains your Internet facility (e.g. carrying out program development, testing, firewall maintenance, intrusion monitoring)?..... ☐ Yes ☐ No

10. When was your last independent Ethical Hacking Test, by who was it carried out and what vulnerabilities were highlighted?

.....
.....
.....

What remedial action did you take?

.....
.....
.....

An unsatisfactory answer will necessitate the need for an Independent Ethical Hacking Test at your expense.

11. Do you have a fully tested disaster recovery and business continuity plan? ☐ Yes ☐ No

If "yes", does it include an off-site back-up facility? ☐ Yes ☐ No

Lending Procedures

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1. Do you operate and maintain a formal loan policy manual or similar internal document? ☐Yes ☐No

If “yes”, does this include:

- (a) individual lending limits? ☐Yes ☐No
- (b) tiered authority levels? ☐Yes ☐No
- (c) lending criteria? ☐Yes ☐No
- (d) collateral requirements and authentication procedures (e.g. property, letter of credit, bill of exchange, certificate of deposit, securities and the like)? ☐Yes ☐No
2. Are all loans independently reviewed to ensure compliance with the loan policy manual or similar internal document? ☐Yes ☐No

Fund/Investment/Asset Management Companies

Only complete if the Proposer offers such services to third parties

1. Are transactions only entered into on the basis of appropriate authorisation in accordance with management criteria? ☐Yes ☐No
2. Has management defined and communicated formal trading policies and dealing limits? ☐Yes ☐No
3. Are trading transactions and positions reviewed for compliance with formal trading policies manual or similar internal document? ☐Yes ☐No

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4. Are accounts of trades which exceed set limits identified or rectified or referred to senior management for immediate action? ☐Yes ☐No
5. Do counterparties receive authorised confirmation for all deals prior to settlement ? ☐Yes ☐No
6. Is the book of investments and securities periodically substantiated and evaluated against recorded values independently of the dealer and fund managers ? ☐Yes ☐No
7. Are responsibilities for investment decisions segregated from accounting activities and custodial responsibilities?..... ☐Yes ☐No

Insurance Companies

Only complete if the Proposer offers such services to third parties

1. Do you operate and maintain a formal underwriting manual in respect of all classes of insurance written? ☐Yes ☐No
2. Please indicate where business production is obtained from as a percentage of the following:
 - (a) agents on commission _____
 - (b) direct sales _____
 - (c) brokers/consultants _____
 - (d) other, please specify _____
3. Are clients/brokers/agents instructed to pay premium in the Proposer's name? ☐Yes ☐No

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4. Is the department/ individual designated to receive premium completely divorced from the day to day handling of business? ☐Yes ☐No
5. Is responsibility for claims inspection/settlement completely divorced from underwriting? ☐Yes ☐No
6. Are all claims examined and agreed by a minimum of two authorised individuals before payment is made who ensure that claim payments are made direct to your insured? ☐Yes ☐No

Audit and Compliance

1. Do you have an internal audit department which has separate duties from the auditing services provided by an external accountant? ☐Yes ☐No
- If "yes",
- (a) is there a formal written audit programme which includes EDP audit? ☐Yes ☐No
- (b) is there an established audit cycle which encompasses all operations? ☐Yes ☐No
- (c) are the internal audit department independent of any other function? ☐Yes ☐No
- (d) are written reports made to either an audit committee or an individual that reports to the Board of Directors? ☐Yes ☐No
- (e) do you have procedures in place to monitor the implementation of recommendations made by the internal audit department? ☐Yes ☐No
- (f) does the audit team periodically review the segregation of duties, accuracy of records, management and supervisory procedures and the physical and non-physical internal controls? ☐Yes ☐No

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2. (a) are you audited annually by a chartered accountant? ☐Yes ☐No
- (b) do they review the internal controls and report their findings? ☐Yes ☐No
- (c) has your accountant made any recommendation in the last two years? ☐Yes ☐No
- If "yes",
- (i) have such recommendations been complied with? . ☐Yes ☐No
- If "no",
- (ii) have you adopted alternatives arrangements to the satisfaction of your accountant? ☐Yes ☐No
3. Do you have a compliance officer who monitors and implements all regulatory directives, rules, principles and guidelines? ☐Yes ☐No

Values at Risk

1. Please state the maximum value of securities (including negotiable collateral, unissued stock certificates etc.):
- (a) at head office _____
- (b) at branches _____
- (c) with custodians _____
2. Please state the maximum amount of cash:
- (a) at head office _____
- (b) at branches _____

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(c) at individual tellers _____

(d) within automated teller machines _____

(e) with custodians _____

3. Please state the maximum amounts/ values carried by:

(a) armoured motor vehicle:

(i) cash _____

(ii) securities _____

(b) messengers:

(i) cash _____

(ii) securities _____

Loss Information

1. Please give brief details of any loss sustained by the Proposer (whether insured or uninsured) during the past 5 years as follows:

Nature of Loss	Date of Discovery	Location	Amount of Loss
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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2. Does the Proposer, after full enquiry, or any of its directors, officers, partners or trustees have any knowledge, of any act, omission, fact, event or circumstance which might give rise to a loss under this proposed insurance? ☐Yes ☐No

If "yes", please provide details on a separate sheet.

3. In the event that a loss has been discovered, has the Proposer taken remedial action to prevent or avoid recurrence? ☐Yes ☐No

(if So please provide full details on a separate sheet)

SIGNING THIS PROPOSAL DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE.

Declaration for compliance with anti money laundering regulations

I declare that statements and particulars in this proposal form are true and no material facts have been misstated or suppressed after full enquiry. I agree that this proposal, together with any other information supplied shall form the basis of the contract of Insurance affected thereon. I undertake to inform Insurers of any material alteration to those facts occurring before the completion of the contract of Insurance.

I/We hereby give my/our consent to Raheja QBE General Insurance Company Limited ('the Company') to verify and obtain my/our identity/address proof as well as the identity /address proof of the insured through Central KYC Registry or UIDAI or through any other modes for the purpose of undertaking KYC.

I/We hereby declare and confirm that the premium has been paid out of legally acquired sources of income and the subsequent premiums if any, will continue to be paid out of legally declared and assessed source of income.

I/We agree that the Policy shall become voidable at the option of the Company, in the event of any untrue or incorrect statement, misrepresentation, non-description or non-disclosure in any material particular in the personal statement, declaration and connected documents, or if any material information has been withheld by me/us or anyone acting on my/our behalf to obtain any benefit under this Policy.

I hereby declare and warrant that to the best of my knowledge and belief the answers given above and documentation submitted are true, complete and accurate and that I have not withheld any information material to this proposal. I agree that the information in this form and the accompanying documentation submitted shall form the basis of the contract proposed between me and the Company.

Are you or any of the proposed applicants/beneficial owner a PEP or a close relative of a PEP*? YES / NO*

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If yes, please give details:.....

**Politically Exposed Persons (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States/ Governments, senior politicians, senior government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc*

Declaration when the proposal form is filled by a person other than the proposer/ the proposer signs in a vernacular language/ proposer is illiterate.

I hereby declare that I have read out and explained the content of this proposal form and all other connected documents incidental to availing the insurance policy from Raheja QBE GIC Ltd. to the proposer and that he/ she confirmed that he/ she has understood the same and that he/ she agrees to abide by all the terms & conditions of the same.

I hereby declare that I have fully explained to the proposer the answers to the questions that form the basis of the contract of insurance have also explained the contents in this form to the proposer in _____ language, that I have truly and correctly recorded the answers give by the proposer and that the proposer has affixed his/ her thumb impression on the proposal form in my presence, after fully understanding the contents thereof. Further, this declaration does not confirm issuance of policy or assumption of risk thereof.

I hereby state that the contents of the form and documents have been fully explained to me and that I have fully understood the significance of the proposed contract.

Data protection requirement

"I/We hereby understand, declare, consent and authorize the Company that all details of the policy and financial information, as provided to the Company may be utilized for processing the claim made under the Policy. I/We hereby also understand, declare and consent that the Company shall have right to retain and disseminate the same to any service provider for providing services related to insurance"

Sharing of information clause:

The information sought from the insured is strictly for the purpose of policy issuance and policy servicing. This information sought and the details of policy are kept confidential and will not be shared with any external party in any circumstances whatsoever. However, in instances when such information/ details is sought by any governmental bodies / regulatory authorities or when the Company is directed to share such information in accordance with any law/ regulations or direction from any such governmental bodies / regulatory authorities, the Company will be bound to abide to such directions.

Name of Proposer _____ Name of Witness _____

Signature of Proposer _____ Signature of Witness _____

Date: _____ Place: _____

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Relationship with Proposer: _____

Address of Witness: _____

A material fact is one which would influence the acceptance or assessment of the risk.

Signed

Title

(authorised signatory of the Proposer)

Date

Please Enclose With This Proposal Form

The latest Annual Report and Accounts for 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 or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the 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 lakh rupees.