

Bajaj Allianz General Insurance Company Ltd.
Registered and Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune

Transcript of Proposal for Two-Wheeler Package Policy

Dear TARAK KESHAVLAL GAJERA,

We wish to inform you that the contract under policy number 'OG-24-2204-1802-00003537' has been finalized based on the information and declaration given by you, the transcript whereof is mentioned below. You are requested to reconfirm the same. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back within a period of 15 days from date of your receipt of this, failing which it will be deemed that you are satisfied with the correctness of the details mentioned below. Kindly note that as the contents and declarations contained in this transcript is the basis on which we have issued the policy to you, we advise you to please ensure that you have provided/disclosed and or not withheld any material facts/information and declarations, as Policy becomes Void ab initio if material facts are not provided/disclosed and or withheld and in such case no claim, if any, will be considered by us apart from forfeiture of the premium.

Details provided by you:

A. Proposer details

1. Proposer Name : TARAK KESHAVLAL GAJERA
2. Proposer Address : SHREE NATHJI ALKA SOCIETY ST NO-5, NR MALAVIYA POLICE CHOWKI
MAVDI MAIN ROAD RAJKOT
, , RAJKOT, GUJARAT-360004
3. Proposer Mobile Number : 9904087516
4. Proposer Residential Number : 9904087516
5. Proposer e-mail id : BHPIPALIYA@GMAIL.COM
6. Proposer Profession : NA

B.Vehicle Details

Registration Number	Month / Year of Regn	Vehicle Make	Vehicle Model	Vehicle Sub Type	Cubic Capacity/Kilowatt	Fuel Type	Year of Manufacture	Seating Capacity
GJ03MA8680	JUN/2021	ROYAL EN-FIELD	INTER-CEPTOR	650	650	Petrol	2021	2

Engine Number	Chassis Number	Vehicle IDV (in Rs.)	Electrical Accessories IDV (in Rs.)	Non-Electrical Accessories IDV (in Rs.)	CNG/LPG Unit (Extra fitted) IDV (in Rs.)	Total IDV (in Rs.)
1086350	RJT2022	2,00,000.00	0	0	0	2,00,000.00

C. Coverage opted

1. Period of Insurance : From 23-JUN-2023 14:02(Hrs)
To 22-JUN-2024 Midnight
2. Is your vehicle fitted with external LPG/CNG kit : No.
3. Electrical Accessories cover Opted (If Applicable) : No.
4. Non - Electrical Accessories cover Opted (If Applicable): : No.
5. Is Voluntary Excess opted : No.
Amount of voluntary excess opted : Rs.NA.
6. Whether PA cover is opted for owner-driver : Yes.
7. compulsory deductible : Rs.100.00
8. Is any additional compulsory deductible imposed and agreed upon : No.
Amount of additional compulsory deductible imposed : NA.
9. Whether geographical area extension is opted : No.
Details of Countries to which geographical area extension cover is given : NA.
10. Is LL to person for Paid driver/Operation/Maintenance opted : No.
11. Whether PA cover is opted for paid driver other than owner driver : No.
Sum Insured for Paid Driver : Rs.NA.
13. Is TPPD restricted to statutory limit of Rs.6,000? : No.
14. Pre Existing damages in the vehicle : Cost of Repair / Replacement towards the damaged parts noticed during the inspection of your vehicle prior to enrolment under this policy as per Inspection report reference number 2023-08894655 duly signed by you or your representative as well as the photographs shall be excluded in the event of any future claims.
15. 1 Premium for Liability coverage, quoted and agreed upon is :
16. 1 Premium for OD coverage, quoted and agreed upon is :
17. Do you have valid PUC certificate of the vehicle : NA
18. Do you have valid Fitness certificate of the vehicle : NA
19. Total Premium (excluding Goods and Service Tax (GST)) for Liability and OD coverages, quoted and agreed upon is :
20. NCB (No Claim Bonus) claimed by you and granted by us based on your declaration of no claim during your previous policy : 0 %.
21. About the last insurance company
(i) Insurance Provider : NA.
(ii) Previous Policy No : NA , Previous Policy Expiry Date : NA
22. Whether your vehicle is Hypothecated and if so the details of Pledgee whose name is registered by us: No.
Name of Pledgee : NA.
23. Add on Cover(s) optedm2 : Yes, Plan Name:Drive Assure- Silver Plan Description: consumable expenses , depreciation shield , engine protector ,
Please call us on 1800 103 5858 for any emergency.
24. To support our Go Green initiative, send policy copy link on registered mobile number / email id: YES
- Please note Cover Note No. / issued to you basing on the above information.
In case of Disagreement or objection or any changes with respect to information and contents mentioned hereinabove, please contact our toll free number & register your objections/changes/disagreement to the contents of this transcript or you may also send us email or written correspondence at the following details within a period of 15 days from date of your receipt of this transcript along with Policy:
- I/We hereby unconditionally allow the Company to share all my / our information being collected in this proposal form or

through telephonic / email / web-inputs means or other means, as updated from time to time within group entities.

Toll free Number : 1800-102-5858,1800-209-5858
Email address : Bagichelp@bajajallianz.co.in
Website : www.bajajallianz.com

Contact our policy servicing branch at: 2nd Floor, Showroom No 1-2 & Office No 201, Anant The Work Space, Kalawad Road, ,, Rajkot-360001 PH:0281-6696600/6626164.

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 IN BREACH OF COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO RUPEES TEN LAKH. Bajaj Allianz General Insurance Co Ltd



BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED

Regd. Office & Head Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India)

IRDAI Registration No. 113

Corporate Identity Number: U66010PN2000PLC015329

Certificate of Insurance (TWO-WHEELER PACKAGE POLICY)

UIN : IRDAN113RP0026V01200102

Policy Number: OG-24-2204-1802-00003537

Customer ID: 395379399

Particulars of Vehicle Insured:

Registration Number	Place of Registration	Engine Number	Chassis Number	Make & Model
GJ03MA8680	GJ03-RAJKOT	1086350	RJT2022	ROYAL ENFIELD - INTERCEPTOR

Sub Type	Year of Mfg	NCB %	CC	Seating Capacity
650	2021	0	650	2

Name of Registration Authority : GJ03-RAJKOT

Name and Address of Insured : TARAK KESHAVLAL GAJERA
: SHREE NATHJI ALKA SOCIETY ST NO-5, NR
MALAVIYA POLICE CHOWKI MAVDI MAIN
ROAD RAJKOT, , RAJKOT, GUJARAT-360004

Geographical Area : .00

Business or Profession : NA

Effective date of commencement of Insurance for the purpose of act:

Policy Inception Date: From 14:02 O' Clock on 23-JUN-2023

Policy Expiry Date: Midnight on 22-JUN-2024

Persons or Class of Persons entitled to drive:

Any person including the insured:

- a) Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license.
b) Provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

IMT-Endorsements/Add on Package

22, & Plan Name: Drive Assure- Silver & Plan Description: consumable expenses, depreciation shield, engine protector,

Limitations as to Use:

The Policy covers use for any purpose other than

- a) Hire or Reward, b) Carriage of goods (other than samples or personal luggage), c) Organized racing, d) Pace Making, e) Speed testing, f) Reliability Trials, g) Any purpose in connection with Motor Trade

I/We hereby certify that the Policy to which this certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of Chapter X and Chapter XI of M.V. Act, 1988.

Policy issuing office and correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc:

2nd Floor, Showroom No 1-2 & Office No 201, Anant The Work Space, Kalawad Road, , Rajkot-360001
PH:0281-6696600/6626164

Date of issue :21-JUN-2023

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.

Now carry your m-policy on your mobile. Click here to download. <https://bagic.page.link/moJC3b>

For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858(chargeable, add area code before this number in case of mobile call) Email us at Bagichelp@bajajallianz.co.in or Visit our Website www.bajajallianz.com

Corporate Identification Number U66010PN2000PLC015329

Latest Schedule - 21-Jun-2023 14:05:30 PM- Silent Printing (Web) (NA)

A handwritten signature in black ink, appearing to be 'JP', with a long horizontal stroke extending to the right.

Authorized Signatory

**BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED**

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113)

Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune-411006(India)

TWO-WHEELER PACKAGE POLICY SCHEDULE**UIN : IRDAN113RP0026V01200102**

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc:
2nd Floor, Showroom No 1-2 & Office No 201, Anant The Work Space, Kalawad Road, , Rajkot-360001 PH:0281-6696600/6626164

INSURED DETAILS	
Insured Name	TARAK KESHAVAL GAJERA
Insured Address	SHREE NATHJI ALKA SOCIETY ST NO-5, NR MALAVIYA POLICE CHOW-KI MAVDI MAIN ROAD RAJKOT , , RAJKOT, GUJARAT-360004 9904087516
Geographical Area	India
Customer ID	395379399
Bank Reference No 1	
GSTIN / UIN	NA
Place of Supply/ State Code/Name	24 - Gujarat

POLICY DETAILS	
Policy Number	OG-24-2204-1802-00003537
Policy Issued on	21-JUN-2023 14:02 PM
Policy Period	From : 23-JUN-2023 14:02 (Hrs)
	To : 22-JUN-2024 Midnight
Cover Note Details	/
Previous Policy No	0
Invoice No	384899390/1
Company GST No	24AABCB5730G1Z3
Company PAN	AABCB5730G

Registration Number		Place of Registration	Engine Number	Chassis Number	Make & Model	SubType
GJ03MA8680		GJ03-RAJKOT	1086350	RJT2022	ROYAL EN-FIELD - IN-TERCEPTOR	650
NCB %	CC/KW	Seating Capacity	Year Of Manufacturing		Hypothecation Details	
0	650	2	2021			
Vehicle IDV		Value For Side Car	Non electrical accessories	Electrical/Electronic accessories	Value of CNG/LPG kit	Total Value
2,00,000.00		0	0	0	0	2,00,000.00
Own Damage Premium(Rs.)			Liability Premium(Rs.)			
Own Damage Premium			4,258.00	Basic Third Party Liability		2,804.00
Special Discount				PA Cover for Owner-Driver - SI - Rs.1500000		331.00
Total OD Premium - A			4,258.00	Period: From 23-Jun-2023 To 22-JUN-2024		
Total Premium (Net Premium) (A+B)			7,393.00	Total Act Premium - B		3,135.00
State GST (9%)			665.00			
Central GST (9%)			665.00			
Final Premium (Rupees Eight Thousand Seven Hundred Twenty Three Only)			8,723.00			

**Note: The above Total OD Premium is inclusive of all applicable Loading /Discounts viz (Automobile association membership, Voluntary Excess, Anti Theft, Handicap Person, Driver Tuition, Fiber Glass, CNG/LPG Unit, Geographical Extension, Imported Vehicle Etc. wherever Applicable)

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year

I/We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Broker Code	78653006	Contact No.	9898966631/9898966631
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For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858(chargeable, add area code before this number in case of mobile call) Email us at gichelp@bajajallianz.co.in or Visit our Website www.bajajallianz.com

Corporate Identification Number U66010PN2000PLC015329

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Broker Name	CLARION INSURANCE BROKING SERVICES PRIVATE LIMITED
E-Mail ID.	polycypdf@clarionbroking.com

Limitation as to Use	The Policy covers use of the vehicle for any purpose other than : Hire or reward, Carriage of goods(other than samples or personal luggage),Organised racing,Pace making, Speed testing, Reliability trials. Any purpose in connection with Motor Trade.
Driver	Any person including the insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle when not used for the transport of goods/passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.
Limits of Liability	Under section II-I(i) of the policy -> Death of or bodily injury : Such amount is necessary to meet there requirements of the Motor Vehicles Act,1988. Under section II-I(ii) of the policy -> Damage to Third Party Property : Rs. 1,00,000.00
No Claim Bonus	The insured is entitled for a No Claim Bonus (NCB) on the Own Damage section of the policy, if no claim is made or pending during the preceding year (s), as per the following: 1. The preceding year: 20% , 2. Preceding Two consecutive years: 25% , 3. Preceding Three consecutive years: 35% , 4. Preceding Four consecutive years: 45% , 5. Preceding Five consecutive years: 50% No Claim Bonus will only be allowed provided the policy is renewed within 90 days of the expiry date of the previous policy.
Existing Damage Details	Cost of Repair / Replacement towards the damaged parts noticed during the inspection of your vehicle prior to enrolment under this policy as per Inspection report reference number 2023-08894655 duly signed by you or your representative as well as the photographs shall be excluded in the event of any future claims.
Nominee Details	Name :NA - Relationship :NA
Subject to Warranties/ IMT-Endorsements/ Add on Package	22, & Plan Name:Drive Assure- Silver & Plan Description: consumable expenses , depreciation shield , engine protector ,
Additional Details	Coinsurance Details: - . Transaction Id: -
Premium Details	Receipt No. 2204-01115446, Date 21-JUN-23 ** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque.
Excess Details	Compulsory Excess: Rs.100.00 Additional Excess: Rs.0 Voluntary Excess: Rs..00

IMPORTANT NOTICE : The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the Certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY.

Warranted that insured named herein or owner of the vehicle insured holds a valid Pollution Under Control (PUC) and / or Fitness Certificate on the date of commencement of the Policy. If the PUC and/or Fitness Certificate is not found to be valid on the date of commencement of the Policy, the Company reserves its right to consider the policy void ab initio.

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.



Authorized Signatory

This document is digitally signed, hence counter signature / stamp is not required.



Consolidated Stamp Duty of Rs.0.5/- paid towards Insurance Stamps vide Challan No. MH018043478202223M Defaced No. 0000250675202324 ORDER NO.CSD/685/2023/2054 ORDER DATED 13.04.2023DEFACED DATE dated 13-APR-23 timing 13:04:23 of General Stamp Office,Mumbai,India.



Principal Location : 4th Floor, Turquoise, Nr. Panchvati Circle, C.G Road, Ellisbridge, Ahmedabad - 380006 PH:079-26432000 | Services Accounting Code : 997134 - Motor vehicle insurance services. No reverse charge is payable on these services.

For help and more information:

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858(chargeable, add area code before this number in case of mobile call) Email us at bagichelp@bajajallianz.co.in or Visit our Website www.bajajallianz.com

Corporate Identification Number U66010PN2000PLC015329

Bajaj Allianz General Insurance Company Ltd.

2nd Floor, Showroom No 1-2 & Office No 201, Anant The Work Space, Kalawad Road, Rajkot - 360001
Contact No: Contact No: 0281-6696600/6626164; Fax No: 6626162

RECEIPT

Receipt Number 2204-01115446

Receipt Date 21/06/2023

Business Channel ML

Received with thanks from TARAK KESHAVLAL GAJERA

(Customer ID : 395379399) a total sum of Rupees Eight Thousand Seven Hundred Twenty Three Only by,

Instrument Type	Instrument No.	Instrument Date	Bank Name	Branch Name	Amount
Credit Card	99272424	21/06/2023	NA	NA	8,723

Total Amount **Rs. 8,723.00**

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

* Cheque/DD/PO receipt is valid subject to realisation of the instrument.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.



Authorised Signatory

Regd. Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006

TWO-WHEELER PACKAGE POLICY : ADD ON COVERS(Plan Name:Drive Assure- Silver): POLICY WORDINGS

S3 - DEPRECIATION SHIELD

A. Endorsement Wordings

(UIN No. IRDAN113RP0026V01200102/A0002V01201112)

In consideration of payment of additional premium, it is hereby agreed and declared that this Policy extends to cover the depreciation amount, partly or fully, on assessed damaged parts allowed for replacement during repairs in the event of a Partial Loss to the **Insured Vehicle**.

In the event **You** have opted for co-payment, **Your** contribution shall be to the extent agreed by **You** as shown in the **Schedule** for the depreciation amount on the assessed parts for each and every Partial Loss claim.

The benefits under 'Depreciation Shield' would be available only if the **Insured Vehicle** is repaired at Our authorized workshops. In case **You** have opted to repair the **Insured Vehicle** at a non-authorized workshop, Our liability will be restricted to 90% of the assessed total claim amount under this cover.

B. Conditions

(1) Claims made by **You** against Us under 'Depreciation Shield' are subject to the terms and conditions set forth under the Motor Insurance Policy. (2) In case of transfer of ownership of the **Insured Vehicle**, the cover under 'Depreciation Shield' shall expire. (3) The benefits under 'Depreciation Shield' can be utilized for a maximum of two times during the Policy Period

C. Exclusions

In addition to the exclusions mentioned under Motor Insurance Policy, **We** will not be liable to indemnify **You** for the following events:

(1) Where the Own Damage Claim made by **You** against Us under the Motor Insurance Policy is not payable (2) Depreciation pertaining to any part/ sub part/ accessories not approved for replacement by Us under Motor Insurance Policy. (3) Loss or damage to tyres and/or battery of the **Insured Vehicle**. (4) Consequential loss of any kind arising out of claims lodged under 'Depreciation Shield'. (5) Where a loss is covered under Motor Insurance Policy or any other type of insurance policy with any other insurer or manufacturer's warranty or recall campaign or under any other such packages at the same time

If **You** do not agree whether any of these exclusions apply to **Your** claim, **You** agree to accept the burden of proving that they do not apply.

D. Definitions

The words and phrases listed have special meanings **We** have set below whenever they appear in bold type and initial capitals. Please note that references to the singular or to the masculine also include references to the plural or to the female the context permits and if appropriate.

(1) **You, Your, Yourself**: The person or persons **We** insure as set out in the **Schedule**. (2) **We, Our, Us**: Bajaj Allianz General Insurance Company Limited. (3) **Accident, Accidental**: A sudden, unintended and fortuitous external and visible event. (4) **Policy/Motor Insurance Policy**: Two Wheeler Package Policy issued by Us to which this cover is extended (5) **Insured Vehicle**: The vehicle insured by Us under the **Motor Insurance Policy** and as shown on the **Schedule**. (6) **Policy Period**: The period between and including the commencement date and expiry date as shown in the **Motor Insurance Policy Schedule**. (7) **Schedule**: The **Schedule** and any Annexure or Endorsement to it which sets out **Your** personal details and the insurance cover in force. (8) **Own Damage Claim**: The claims raised by **You** against Us for loss or damage to the **Insured Vehicle** due to the perils mentioned under Section 1 of **Motor Insurance Policy**. (9) **Total Loss/ Constructive Total Loss**: A loss under the **Motor Insurance Policy** where the aggregate cost of retrieval and/ or repair of the **Insured Vehicle**, subject to terms and conditions of the Policy, exceeds 75% of the IDV of the **Insured Vehicle**. (10) **Partial Loss**: Any loss falling into a category other than (A) the loss mentioned under Sr. No. 9 above and (B) theft of the **Insured Vehicle**

S4 - ENGINE PROTECTOR

(UIN No. IRDAN113RP0026V01200102/A0015V01201314)

A. Endorsement Wordings

In consideration of payment of additional premium, it is hereby agreed and declared that this Policy extends to cover the consequential damage to the internal child parts of the engine of the **Insured Vehicle** arising out of water ingress/ leakage of lubricating oil and/or damage to gear box of the **Insured Vehicle** arising out of leakage of lubricating oil due to Accidental means. Under this cover, **We** will compensate **You** for the following:

(A) Repair or replacement of the internal child parts of the engine such as pistons, connecting rods, crank shaft and cylinder head. (B) Repair or replacement of the internal parts of the gear box such as gears or shafts in the gear box housing. (C) Labour cost incurred by **You** to overhaul the damaged engine and gear box

B. Conditions

(A) Claims made by **You** against Us under 'Engine Protector' are subject to the conditions set forth under the Motor Insurance Policy. (B) Claims made by **You** against Us under 'Engine Protector' would be admissible if:

- There is evidence that the **Insured Vehicle** stopped in water logged area resulting into damage to the internal parts of the engine due to water ingress
- There is evidence of under carriage damage to engine and/or gear box leading to oil leakage and resulting into damage to internal parts of the engine and/or gear box
- The loss or damage is not payable under Motor Insurance Policy

TWO-WHEELER PACKAGE POLICY : ADD ON COVERS(Plan Name:Drive Assure- Silver): POLICY WORDINGS

(C) In case of transfer of ownership of the **Insured Vehicle** , the cover under 'Engine Protector' shall expire

C. Your Obligations

(A) **You** should avoid driving the **Insured Vehicle** through water logged area as far as possible. If it is unavoidable, the vehicle should be driven in low gear and/or high engine RPMs. (B) **You** should not try to crank or push start the engine once the **Insured Vehicle** had stopped in the water logged area or undercarriage damage had taken place. (C) **You** should intimate Our nearest office for spot survey and to obtain help from an expert technician

D. Exclusions

We will not be liable to indemnify **You** for the following:

(1) Where a loss is covered under any other type of insurance policy with any other insurer or manufacturer's warranty or recall campaign or under any other such packages at the same time. (2) Any consequential loss apart from the damage to the internal child parts of the engine due to water ingress/ leakage of lubricating oil and/or damage to gear box arising out of leakage of lubricating oil due to Accidental means. (3) Cost of engine oil and consumables in case of flushing of engine. (4) Loss or damage including corrosion of engine due to delay in intimating Us or delay in retrieval of the **Insured Vehicle** from the water logged area. (5) Where reasonable care has not been taken by **You** to protect the loss or damage to the **Insured Vehicle**

If **You** do not agree whether any of these exclusions apply to **Your** claim, **You** agree to accept the burden of proving that they do not apply.

E. Definitions

The words and phrases listed have special meanings **We** have set below whenever they appear in bold type and initial capitals. Please note that references to the singular or to the masculine also include references to the plural or to the female the context permits and if appropriate.

(1) **You, Your, Yourself:** The person or persons **We** insure as set out in the **Schedule** . (2) **We, Our, Us:** Bajaj Allianz General Insurance Company Limited. (3) **Accident, Accidental:** A sudden, unintended and fortuitous external and visible event. (4) **Policy/Motor Insurance Policy:** Two Wheeler Package Policy issued by Us to which this cover is extended. (5) **Insured Vehicle** : The vehicle insured by Us under the **Motor Insurance Policy**. (6) **IDV:** Insured's Declared Value (Sum Insured) of the **Insured Vehicle** under the **Motor Insurance Policy**. (7) **Total Loss/ Constructive Total Loss:** A loss under the **Motor Insurance Policy** where the aggregate cost of retrieval and/ or repair of the **Insured Vehicle** , subject to terms and conditions of the Policy, exceeds 75% of the IDV of the **Insured Vehicle** . (8) **Policy Period:** The period between and including the commencement date and expiry date as shown in the **Motor Insurance Policy Schedule** .(9) **Schedule** : The **Schedule** and any Annexure or Endorsement to it which sets out **Your** personal details and the type of insurance cover in force .(10)**Own Damage Claim:** The claims raised by **You** against Us for loss or damage to the **Insured Vehicle** due to the perils mentioned under Section 1 of **Motor Insurance Policy**

S17:CONSUMABLE EXPENSES

(UIN No. IRDAN113A0022V01201314)

A. Endorsement Wordings

In consideration of payment of additional premium, it is hereby agreed and declared that if the **Insured Vehicle** is damaged by a covered peril mentioned under the own damage section of the **Motor Insurance Policy** and needs to be repaired, We will cover cost of consumables required to be replaced/ replenished during the repair of the damaged vehicle. Consumable for the purpose of this cover shall include engine oil, gear box oil, power steering oil, coolant, AC gas oil, brake oil, AC refrigerant, battery electrolyte, windshield washer fluid, radiator coolant, nut & bolt, screw, oil filter, fuel filter, bearings, washers, clip, wheel balancing weights , and items of similar nature excluding fuel.

B. Conditions

(a) This cover is applicable if it is shown on **Your schedule**. (b) Claims made by **You** against **Us** under '**CONSUMABLE EXPENSES**' are subject to the terms and conditions set forth under the **Motor Insurance Policy**. (c) In case of transfer of ownership of the **Insured Vehicle** , the cover under '**CONSUMABLE EXPENSES**' shall expire. (d) The benefits under **'CONSUMABLE EXPENSES'** would be available only if the **Insured Vehicle** is repaired at **Our** authorized workshops.

C. Exclusions

In addition to the exclusions mentioned under **Motor Insurance Policy**, **We** will not be liable to indemnify **You** for the following events: (1) Where the **Own Damage Claim** made by **You** against **Us** under the **Motor Insurance Policy** is not payable. (2) Consumables pertaining to any part/ sub part/ accessories not approved for replacement by Us under **Motor Insurance Policy**. (3) Where a loss is covered under **Motor Insurance Policy** or any other type of insurance policy with any other insurer or manufacturer's warranty or recall campaign or under any other such packages at the same time.

D. Definitions

The words and phrases listed have special meanings **We** have set below whenever they appear in bold type and initial capitals. Please note that references to the singular or to the masculine also include references to the plural or to the female the context permits and if appropriate.

(1)**Authorized workshop / garage / service station** - A motor vehicle repair workshop / garage / service station authorized by us. (2)**Insured Vehicle:** The vehicle insured by Us under the **Motor Insurance Policy** and as shown on the **Schedule**. (3)**Policy/ Motor Insurance Policy:** Motor Package Policy issued by Us to which this cover is extended.

TWO-WHEELER PACKAGE POLICY : ADD ON COVERS(Plan Name:Drive Assure- Silver): POLICY WORDINGS

(4)Schedule: The Schedule and any Annexure or Endorsement to it which sets out Your personal details and the insurance cover in force. **(5)We, Our, Us:** Bajaj Allianz General Insurance Company Limited. **(6)You, Your, Yourself:** The person or persons We insure as set out in the Schedule.