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ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

"Your partner for growth and security"

CROP INSURANCE PROPOSAL FORM

Name of the proposer	
Address with Phone No. if any	
Address with Filone No. If any	
Account number, Name & Address of the Bank	
(from which loan is availed)	
Crop and Variety Cultivated	
Total Area under cultivation (in Acres)	
Details of area where the crop is grown and	
proposed for insurance (Village, Thram no. etc.)	
Expected date of planting:	
Plant Spacing & Plant Population per Acre	
Duration of crop:	
Europeted data of how costing.	
Expected date of harvesting:	
Coverage	
Sum Insured per Acre (Nu.)	
Premium per Acre (Nu.)	
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No. of Acres	
Total Premium (Nu.)	





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DECLARATION

I/We hereby declare that all the information furnished by me/us in this proposal form are true and correct to the best of our knowledge and belief. I/We agree that the Policy shall become voidable at the option of RICB, in the event of any untrue or incorrect statement, misrepresentation, non-description or non-disclosure in any material particular in the proposal form/personal statement, declaration and connected documents, or any material information has been withheld by me/us or anyone acting on my/our behalf to obtain any benefit under this Policy. I/We, authorize the concerned Bank/financial institution to deduct requisite premium towards insurance and remit the same to RICB.

Signed at.....day of.....

(Signature of the Proposer)

Verified by: The Dzongkhag/Gewog Agricultural Officer

Signature:

Name and Place: