



ལྷོ་མཚམས་ཀྱི་རྒྱལ་ཁབ་འཛིན་ཚད་

ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

“Your partner for growth and security”

HOUSEHOLDER’S INSURANCE PROPOSAL FORM

AGENCY: -

POLICY NO.

Name of Proposer in full: - _____

Occupation: - _____ Marital Status: - _____

Citizen Identity Card No: - _____

Mailing Address: - _____

Contact No: - _____

Period of Insurance: - From _____ To _____

SECTIONWISE PREMIUM DETAILS

Subsection cover/ Perils covered	Plan A Sum insured item covered	Plan B Sum insured item covered	Plan C Sum insured item covered
I. Fire and allied perils including earthquake	Nu.100,000/ house hold personal effects & FFF	Nu.200,000/ house hold personal effects & FFF	Nu.300,000/ house hold personal effects & FFF
II. Burglary/house breaking	Nu. 25,000/ personal effects in house	Nu. 50,000/ personal effects in house	Nu. 75,000/ personal effects in house
III. Personal Accident Cover	Nu. 50, 000 capital sum insured	Nu. 100, 000 capital sum insured	Nu. 150, 000 capital sum insured
Premium Payable (I+II+III)	Nu.635 P.A	Nu. 1,270 P.A	Nu.1,905 P.A

Note: - Subject to 10% deductible of each and every loss subject to minimum of Nu. 1,000.00 applicable under section I and for partial claims only.

Thimphu Post Box # 315 EPABX ☎ +975-2-321037, 321161, 323487, 322426, 324282, 325858, 328307, 323993, 252509, 252482
Pling Post Box # 77 Fax: 02-323677, 336086, 336085, 325725

Email: contactus@ricb.bt, Website: www.ricb.bt Toll Free Nos: Tashi cell-1811, 1511 & B-Mobile-1818, 1515



RICB

"Your partner for growth and security"

ལྷན་ཁུངས་ཀྱི་ཉེན་སྲུང་ལས་འཛིན་ཚོང་ཁུངས་།

ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

Please give the details of the family members between the age of 18 and 65 years who are residing permanently in the house as below:

Sl. No	Full Name	ID No	Sex	Age	Employed / Un-employed	Details of Employment

(If the above-mentioned space is not sufficient, a separate sheet may be attached)

I/We hereby would like to avail the plan no. _____ as per details attached herewith. I/We would like to take the same for my properties contained in Flat No. _____, House No _____ Owned by _____ Located at _____

I/We hereby declare that the particulars contained herein are true and correct and that no material fact has been withheld, misstated or misrepresented and also that this Proposal cum Schedule forming part of the Corporation's standard Policy shall be the basis of the contract between me/us and the Corporation.

I/We further declare that the sum insured herein represents the full value of the property described herein

PLACE:

DATE:

Signature of Proposer

AGENT/FIELD Officer's RECOMMENDATION

I have verified all the above information and are correct to the best of my knowledge

Place.....

Date.....

Signature of Field Officer/ Agents