

**PROPOSAL FORM**  
**NEW INDIA FLEXI FLOATER GROUP MEDICLAIM POLICY**  
**(FOR CANARA BANK ACCOUNT HOLDERS)**

**CORPORATE AGENCY CODE: BN00001697**

<p>1. NAME &amp; ADDRESS OF THE ACCOUNT HOLDER (in CAPITAL letters)</p> <p>Mobile No: _____ Aadhar No: _____ E-mail ID: _____</p> <p>2. SUM INSURED PER FAMILY OPTED : _____</p> <p>2.A PREVIOUS POLICY NUMBER : _____</p>	<p align="center">(To be filled by the Bank)</p> <p>3 a. Branch Name _____</p> <p>b. Branch DP Code <table border="1" style="display: inline-table; width: 80px; height: 20px; vertical-align: middle;"></table></p> <p>c. City _____</p> <p>d. Proposal from (Pl. Tick) Rural/Semi Urban/Urban</p> <p>4. Account No..... SB/CA/FD/others (Pl. specify)</p>
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5. DETAILS OF PERSONS TO BE COVERED :

SLNO	NAME OF THE INSURED PERSON (in CAPITAL letters)	DOB	GENDER F / M	RELATIONSHIP WITH ACCOUNT HOLDER
1				
2				
3				
4				
5				
6				

6. Period of Insurance: One year from the date of receipt of premium.

7. TWO STAMP-SIZE PHOTOGRAPH OF THE INSURED PERSONS :

ACCOUNT HOLDER	SPOUSE	CHILD 1	CHILD 2	PARENT 1	PARENT 2

8. Name of the Nominee : \_\_\_\_\_ Relationship : \_\_\_\_\_

I have read the covers offered in the policy and willing to accept the cover subject to the terms and conditions of The New India Assurance Company Ltd. I understand that the information provided by me will form the basis of the insurance policy, is subject to the Board approved underwriting policy of the insurance company and that the policy will come into force only after full receipt of the premium chargeable.

**Non-disclosure of facts material to the assessment of the risk, providing misleading information, fraud or non-co-operation by the insured will nullify the cover under the policy and no benefits or refund shall be payable.**

PLACE .....

DATE ..... SIGNATURE OF THE PROPOSER

This is to certify that Sri/Smt .....(Name of the account holder) is maintaining account with the bank ,bearing No. ....(Account number).

SIGNATURE/CODE OF SPECIFIED PERSON SIGNATURE OF BRANCH MANAGER

\*\* This Proposal is meant for renewal of existing policies of Account Holders.