# **RABBIT INSURANCE**

# 1. APPLICABILITY

All breeds of rabbits in India

# 2. AGE GROUP

Under the age group of 3 months to 3 years till they complete the age of 30 days, is not covered.

### 3. **IDENTIFICATION**

Leg bands/Ear Tagging/Tattooing.

### 4. SCOPE OF COVER

Death of rabbits due to accident and/or diseases contracted during the period of insurance.

# 5. EXCLUSIONS

### (A) Common exclusions

As per Cattle Market Agreement.

### (B) Specific exclusions

- 1. Transport by air and sea
- 2. Permanent and partial disablement of any nature
- 3. Pasteurellosis
- 4. Culling
- 5. Cannibalism, intentional slaughter
- 6. Undergrowth
- 7. Myxomatosis. This disease is covered if the rab bits are successfully inoculated and necessary Veterinary Cert. Is supplied to the company.
- 8. Coccidiosis. This disease is covered if suitable and effective coccidiostats are administered in food or water

# 6. VALUATION AND SUM INSURED

Valuation should be done by a qualified veterinary surgeon at the time of proposing the insurance. The sum insured will be 100% of market value. Insured is to be compensated on 70% indemnity basis. A valuation table indicating the value of rabbits from three

months onwards to 4 years as certified by veterinary surgeon should be submitted to the company.

# 7. **RATE OF PREMIUM**

For Non-IRDP-4 to 7% p.a. rabbits used for furs should be rates high. For IRDP & other scheme animals 2.75% p.a.

# 8. VETERINARY EXAMIN ATION

A veterinary certificate showing the following details is necessary for acceptance of risk:-

- (a) Type of rabbits (pure/hybrid etc.)
- (b) Age
- (c) Identification
- (d) Details regarding housing, light, ventilation, temperature, insulation, floors, feeders, water and sanitation
- (e) Vaccination particulars
- (f) Condition of health
- (g) Type of feed used and source

Note : Fresh veterinary examination is not necessary in case of renewal provided the renewal is made on or before the expiry date of the policy.

# 9. CLAIMS PROCEDURE

In the event of death, the following should be submitted.

- (a) Duly completed claim form.
- (b) Veterinary Death Certificate giving reason for death/outbreak.
- (c) Postmortem report if required by the company.

# 10. SALVAGE

A salvage value of Rs.10/-per rabbit to be deducted at the time of claim.

# 11. AGENCY COMMISSION : 15%

#### The Oriental Insurance Company Limited

Read & Head Office : Oriental House, P.B. No. 7037, A-25/27, Asaf All Road, New Dolhi-110 002.

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#### RABBIT INSURANCE PROPOSAL FORM 1. Name of the Insured Farm ł 2. Address : 3. Name of the Insured Name of the financing Bank 4 5. Details of the insured rabbits Identification Purchase Sum Coloin Sex Breed No. Age Premium Insured Date Age Source Value 3 4 5 6 7 8 9 10 11 1 Purpose for which reared : 6. a) Expected Age of disposal in each type : b) Value of rabbit at different ages (vieek-wise upto 3 months and monthwise thereafter) c) Expected No. of additions and sale during policy period Housing 7. : a) Type of housing : b) Type of rearing : Cage/on ground 8. Equipment : 1. No. of feeders 2 No. of waterers 3 Other equipments Veterinary Service/Management a) is there any qualified veterinarian strached to the farm : YES/No b) His name and address : c) If no whose services were availed name and address : d) Who is staying in the farm premises permanently :

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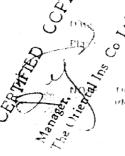
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- 11. Source of feed supply
- 12 Programs experience in the rabbit rearing :
- 1.3 Consistent any epidemic in the last 6 months starts
- 14. Do you stock essential medicines
- 15. Do you maintain the following records
  - a) that stock position
  - to Date feed consumption
  - Daily mortality.
  - d) Daily purchase/safe
  - e) Books of Account
- 16 Have you ever proposed for to an Rabbit insurance, if so give name of the Company.
  - the file any company declined to issue a policy to you
  - a Darlined to continue insurance
  - In the invited renewal of policy
  - imposed any restrictions or special conditions
- 17 Parind of insurance

#### DECLARATION

EW- hereby declare that the foregoing statements are true to the best of my/our knowledge and that I. We have disclosed all Particulars affecting the assessment of the risk. Contract the proposal and declaration shall be the basis of the contract between me/us contract.



The Sum insured should include the maximum value of all the rabbits including the editions made during the currency of the policy.

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Signature of the proposer

# The Oriental Insurance Company Limited

#### RABBIT INSURANCE

#### CLAIM FORM

• (The issue of this form is not to be taken as an admission of liability)

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Name of the Intered -

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3. Description of it's Rabbits claimed for

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4	When th	e tabbit were fi	rst seen ill :				
5,	When wa surgeon :	as the native sent	to Veterinary	n an			
6.	Date of :	attenriance	• • •				
		as first and last s	icen by				
		ry Docter :					1
ŝ.	Name an attended	d address of Ver	erinary Doctor				
Q	Flace of	death with date					
10	Cause of	l death .		•			
	e) If Ir for	ión ditexte, hou it	do you account		• • • • • • • • • • • • • • • • • • • •		
	b) If Ir năn	ión al cioent, ho re of the lin horg	s did it occur an e during the even	d it ? ,			
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12.	Amount	of Claus					-
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13 Are the Pablits insured elsewhere ? Are you receiving compensation from any other cource? If so, from whom?

14. What stops were taken by you after the disease was noticed to prevent the same ?

15 When was premium paid ?

I/We, the abovenamed do hereby to the best of my/our knowledge and belief warrant of foregoing statement in every respect and affirm that proper treatment and care was generablits. If We agree that if I/We have made or in any further declaration the Company mergins respect of the said accident shall make any false statement or any suppression or concertance. Folicy shall be void and all right to recover thereunder in respect of past or future accident forfeited.

Signature of Insured

Date :

Place :

Witness :

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