Attachment to Proposal Form in case of UPIS  
(For Chitradurga & Belagavi Districts only)

**UNIFIED PACKAGE INSURANCE SCHEME DETAILS**

Name of the Proposer S/o, D/o, W/o, C/o

ID Card type ID Card No.

(Along with Crop Insurance any two of the following should be opted)

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Insurance opted for</th>
<th>Premium (inclusive of service tax)</th>
<th>Policy No.</th>
<th>Name of the Insurance Company</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PMSBY (Accidental Death Insurance)</td>
<td></td>
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<tr>
<td>2</td>
<td>PMJJBY (Line Insurance)</td>
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<tr>
<td>3</td>
<td>Fire and Allied Insurance</td>
<td></td>
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<tr>
<td>4</td>
<td>Agriculture Pump set Insurance</td>
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<tr>
<td>5</td>
<td>Student Safely Insurance</td>
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<tr>
<td>6</td>
<td>Agriculture Tractor Insurance</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Signature of the Proposer
(Name)