		Corporate Agen	t (Non-Life) Question Banl	c - English		
Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
1	Life Insurance Corporation of India(LIC) was set up under which of the following acts?	Life Insurance Corporation Act, 1956	The Insurance Act, 1938	Life Insurance Companies Act, 1912	Indian Insurance Companies Act, 1928	1
2	Which of the following social security scheme is a Health Insurance plan?	PMVVY	PMFBY	РМЈАҮ	PMSBY	3
3	In the olden days, Chinese traders used to keep their goods in different boats while sailing through treacherous waters. Analyse why?	Chinese boats were small and they carried heavy goods	The Chinese Government mandated that goods should be distributed among multiple shipping companies so that there is equal distribution of business	Chinese traders placed their goods in multiple boats because it provided insurance against total loss	Chinese traders placed their goods in multiple boats because it was cheap	3
4	What is the cost of risk directly proportional to?	Probability and impact of the loss	Impact of the loss alone	Probability of loss and object of insurance	Impact of loss and the object of insurance	1
5	Which of the below statement is incorrect?	Under mutuality, the funds of various individuals are combined	Mutuality is also known as pooling	Under mutuality we have funds flow from one source to many	Mutuality provides protection against the economic loss arising as a result of one's untimely death. This loss is shouldered and addressed through having a fund that pools the contributions of many who have entered into the life insurance contract	
6	The earliest type of modern insurance was in the form of protection by business guilds or societies in Europe especially in the 14th century.	Spain	France	Germany	Italy	4
7	In terms of Breach of Utmost Good Faith, which of the following is not correct	Concealment is Intentional Non- Disclosure	Concealment is Innocent Non-Disclosure	Fraudulence is Intentional Misrepresentation	Hiding existence of a disease is intentional Non-Disclosure	2
8	Explain difference between peril and hazard.	Peril is the cause of loss and hazard is the consequence of that loss	Peril is the direct cause of loss while hazard increases/decreases the probability of loss	Hazard is the direct cause of loss while peril increases/decreases the probability of loss	Peril is probability of loss while hazard is related to impact of loss	2
9	The IRDA was established in the year under the IRDA Act, 1999.	1999	2000	2002	2003	2
10	Losses caused by an earthquake are	Critical	Collaborative	Corollary	Common	1
11	Who is protected under the In-Contestability Clause included under a Life Assurance Policy?	Insurer	Insured	Insurance Agent	Insurance Broker	2
12	Who among the Following, is Likely to be Exposed to Accidental Hazard, in His or Her Occupation? Choose the Most Appropriate Option.	Medical-Professional	Tourist-Guide	Demolition-Experts	Marketing-Executive, Who is regularly on the Field.	3
13	Which priciple of insurance implies if the same property is insured with more than one insurance company	Contribution	Uberrima fides	Subrogation	Proximate cause	1
14	is a corollary principle of Indemnity	Insurable Interest	Uberrima fides	Subrogation	Proximate cause	3
15	Who among the Following, is Likely to be Exposed to Health-Hazard, in His or Her Occupation?	Yoga-Instructor	Film-Stunt-Artist	Dancer in a Night-Club	Person, Exposed to Mining Dust	4
16	Why Do, Insurers need Material Information?	For Documentation Purposes.	Decide on the Risk- Acceptance, and the Terms and Conditions, Associated.	To Comply with the Regulatory Requirements.	To Improve the Customer-Service.	2

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17	Compare: Gambling and Insurance.	Gambling and Insurance, Both, are the Same.	Gambling has No Insurable Interest involved, but Insurance does have.	Insurance has Only Profitable Outcomes, while, Gambling could result in Losses.	Gambling is Legally Enforceable, but, Insurance is Not.	2
18	Select a Scenario, that showcases the Principle of Uberrima Fides.	Timely Payment of Premium.	Disclosing All Material Information on the Insurance Proposal- Form.	Faking All Material Information on the Insurance Proposal- Form.	Disclosing All Irrelevant Information on the Insurance Proposal- Form.	2
19	Label the Interest, that the Insured has, in the Subject-Matter of Life Assurance. Choose the Most Appropriate Option.	Speculative Interest	Wager Interest	Insurable Interest	Indemnity Interest	3
20	Expections stated under Section 59 of the Insurance Rules 1939 for advance payment of premium.	No risk to be assumed unless premium is received in advance	Insurance cannot be sold on credit basis in India	Accepting premiums in instalment in respect of Sickness Insurance, Group Personal Accident Insurance, Medical Benefits Insurance and Hospitalisation Insurance Schemes subject to certain conditions	None of the above	3
21	Examine the conditions mentioned below and tell us which is not a valid condition for returning a policy during the free look period. I: Option must be exercised within 15 days of receiving the policy document II: Communication has to be in writing III: Communication can be verbal or written	I only	II only	III only	I and III	3
22	Section 45 (Indisputability Clause) of Insurance Act, protects the Insured, from Rejection of Claim, by the Insurer; provided the Policy has completed Choose the Most Appropriate Option.	One Year	Three Years	Five Years	Seven Years	2
23	As per the Suicide Clause, if the Life-Assured Dies, as a Result of Suicide, After 3 Years of the Issue of Policy, What Does the Beneficiary Receive as the Claim?	Nothing	Premium, Paid by the Life-Assured.	(2 × Premium), Paid by the Life-Assured.	Full Face-Amount of the Policy.	4
24	What Does, First Premium Receipt (F.P.R.), signify?	Free-Look Period has ended.	It is the Evidence, that the Policy-Contract has begun.	Policy cannot be cancelled, Now.	Policy has acquired a Certain Cash-Value.	2
25	Identify the Document, that evidences a Contract, between the Insurer and the Insured.	Proposal-Form	Claim-Form	Nomination-Form	Policy-Document	4
26	Which One of the Following Statements, is <u>In-Correct</u> , with Regard to Numerical Rating Method of Underwriting?	Under this Method, Underwriters assign the Positive Rating-Points for All Negative or Adverse Factors.	Under this Method, Underwriters assign the Positive Points for Any Positive or Favourable Factors.	Under this Method, the Total Number of Points, so assigned, will decide How Much Extra- Mortality-Rating (E.M.R.), it has been given.	Under this Method, if the Extra-Mortality- Rating (E.M.R.) is Very High, Insurance may even be declined.	2
27	Which One of the Following Statements, is <u>In-Correct</u> , with Regard to Judgement Method of Underwriting?	Under this Method, Subjective Judgement is used.	This Method is especially used in Case of Complex Cases.	In this Method, the Company may seek Expert Opinion of Medical Doctor.	In this Method, the Underwriter assign Positive or Negative Rating-Points to the Adverse Factors.	4
28	Mr. Vimal is a 32-Years' Old, Healthy, Non-Smoker, Teetotaller Individual; Who applies for Life Assurance from ABC Limited Insurance Company. Which One of the Following Statements, will Hold True, with Regard to Risk Acceptance by the Insurance Company?		Risk will be Accepted With an Extra, Over the Tabular Rate of Premium.	Risk will be Accepted, With a Lien on Sum- Assured.		1

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29	If, Mr. Brijesh, a 40-Years' Old Individual, is perceived as a 'Sub-Standard Risk', by the Insurance Company, then, Which One of the Following Statements, will Hold True, with Regard to Risk-Acceptance by the Insurance Company?	Risk will be Accepted at Ordinary Rates.	Risk will be Accepted at Lower Rates.	Risk will be Accepted With an Extra, Over the Tabular Rate of Premium.	Risk will be Declined.	3
30	What is meant by 'Risk-Classification'? Choose the Most Appropriate Option.	The Process, in which, Individual Lives are Categorised and Assigned to Different Risk-Classes, Depending on the Degree of Risks, they Pose.			The Process, in which, the Applicants, Who are Exposed to Similar Degrees of Risk, are Placed in the Same Premium- Class.	1
31	On payment of claim, the life insurance policy-	Can be reinstated on payment of pro-rata premium	Stands cancelled	Automatically terminates	Continues till the end of the policy period	3
32	On payment of claim, the individual fidelity guarantee policy-	Can be reinstated on payment of pro-rata premium	Stands cancelled	Automatically terminates	Continues till the end of the policy period	3
33	Arbitrators appointwho presides the meeting.	A President	A Chairman	An Umpire	A Judge	3
34	Dispute relating to question of liability are to be settled through	Arbitration	Communication	Litigation	Understanding	3
35	Mr. Nimesh bought a 20-Years' Unit-Linked Insurance Plan (U.L.I.P.). In the Event: Mr. Nimesh dies, Within the Policy-Term, Which of the Following, will be paid?	Surrender-Value will be paid.	Premiums paid will be Returned, After Deducting the Dues.	Lower of Sum-Assured or Fund-Value, will be paid.	Higher of Sum-Assured or Fund-Value, will be paid.	4
36	In Case of Presumption of Death of Life-Assured, Which One of the Following Documents, needs to be submitted, by the Nominee?	Death-Certificate from Municipal Corporation.	Decree from a Competent Court.	Employer's Certificate	Inquest-Report	2
37	Mr. Brijesh purchased a 20-Years' Unit-Linked Insurance- Plan (U.L.I.P.), from ABC Insurance Company. If Mr. Brijesh Dies, Before the Maturity of the Policy, then Insurance Company will have to pay	Surrender-Value	Premiums, After Deducting the Dues.	Lower of Sum-Assured or Fund-Value.	Higher of Sum-Assured or Fund-Value.	4
38	Which One of the Following Claims, can be Payable, Only to the Assignee or Nominee?	Death-Claim	Maturity-Claim	Survival-Benefit	Surrender-Value	1
39	Which One of the Following Documents, needs to be submitted, by the Nominee, in the Event of Natural Death of the Life-Assured? Choose the Most Appropriate Option.	Inquest Report	Death-Certificate	Post-Mortem Report	First Information Report (F.I.R.)	2
40	Which of the below statement/statements is/are true with regard to a proposal form? A) The proposal form can be filled in by the proposer in written or electronic format. B) The proposal form contains the details of imsurance cover, warranties, terms and conditions. C) The insurer can decide whether to accept or reject the proposal for insurance based on the information in proposal form.	A & B	A & C	Only C	All of them	2

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41	Declaration of the proposer in the proposal form converts of Utmost Good Faith to of Utmost Good Faith.	Legal Duty, Common Law Principle	Contractual Duty, Common Law Principle	Common Law Principle, Contractual Duty	Common Law Principle, Legal Duty	3
42	You are an insurance agent. Mr. Mahesh has approached you as a customer to buy some insurance. You hear from friends that Mr. Mahesh is involved in sale of pirated goods and all the resultant cash is invested in buying life insurance. What should you do?		Report suspicious transaction along with all the information you have about Mr. Mahesh	Blackmail Mr. Mahesh and try to get some monetary benefits out of him	Keep mum about the transaction	2
43	Important information that a prospectus discloses includes: I. Any incentives to reward policyholders for early entry II. Any incentives to reward policyholders for continued renewals III. Any incentives to reward policyholders for favourable claims experience	Only I	I and II	II and III	I, II and III	1
44	If Complex Language is used to word a Certain Policy- Document, and it has given Rise to an Ambiguity, How Will it generally be construed?	In Favour of the Insured.	In Favour of the Insurer.	The Policy will be declared as Void, and the Insurer will be asked to Return the Premium, With Interest, to the Insured.	The Policy will be declared as Void, and the Insurer will be asked to Return the Premium, to the Insured, Without Any Interest.	1
45	Which of the Following, is <u>Not</u> a Part of a Standard Policy- Document?	Policy Schedule	Standard Provisions	Policy-Specific Provisions	Policy Forfeiture Provisions	4
46	Gives us, an Example of a Standard Policy-Provision.	A Clause, Precluding the Death Due to Pregnancy, for a Lady, Who is Expecting at the Time of Writing the Contract.	Suicide Clause	A Clause, Precluding Certain Illnesses.	A Clause, Granting Certain Privileges to the Policy-Holder.	2
47	Potential Value means-	The value of premiums that is arrived at by persuading the customer to buy additional products	Future premiums that may be expected to be received if existing business is retained	The value of premiums that could be derived by persuading the customer to buy additional products	Future premiums that is expected to be received if existing business is retained	3
48	Elements of Trust are A) Communication, B) Attraction, C) Belief, D) Presence	A & B	A, B & C	A, C & D	A, B & D	4
49	is the most important step in sales process.	Interview	Prospecting	Handling objections	Closing the sale	2
50	An agent need not recommend insurance in certain situations. One of the situation can be-	Where the prospect is interested in reducing the cost of handling the risk.	When the risk involved is non-insurable.	Where the risk involved can be managed by means other than insurance.	All of the above	3
51	When is a cover note issued to proposer?	When the underwriting process is complete and policy is issued	When the negotiations for insurance are in progress and policy document is prepared	When the underwriting process is complete and policy not is issued	When the negotiations for insurance are in progress and policy document is issued	3
52	During which period, insurance policy can be returned and refund of premium obtained?	Coverage period	Free Look Period	Waiting Period	Grace Period	2
53	If the policy is being purchased electronically, it is agent's duty to-	Help the customer to open e-Insutance Account through registered insurance repository	Help the customer to register for e- Insurance Policy with OTP through registered insurance repository	Help the customer to open e-vault for Insurance Policy through registered insurance repository	Help the customer to generate e- Insurance Policy through registered insurance repository	1

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54	The customer has choice to continue with same insurer or to switch to another insurance company in following kind of policies:	Term Insurance Policy	Motor Third Party Policy	Endowment Policy	Unit Linked Insurance Policy	2
55	Which of the following is not a contributor towards Customer Lifetime value	Historical	Present	Potential	Speculated	4
56	Which of the following is NOT an example of non verbal communication?	Signaling okay with a hand gesture	Gesturing in an empty room	Wearing jewelry	Raising your voice	2
57	The ability to perform the promised service dependably and accurately, can be termed as	Tangible	Reliability	Assurance	Responsiveness	2
58	The knowledge, competence and courtesy of service providers and their ability to convey trust and confidence, can be termed as	Reliability	Assurance	Responsiveness	Tangible	2
59	Select the Correct Statement, with Regard to Grace- Period. Choose the Most Appropriate Option.	The Standard Length of the Grace-Period is 1 Month or 31 Days.	The Standard Length of the Grace-Period is One Quarter.	The Standard Length of the Grace-Period is One Week.	The Standard Length of the Grace-Period is One Fort-Night.	1
60	No one else in the insurance company has the client's problems as much as an agent does.	ownership of	responsibility towards	duty towards	role in resolving	1
61	In case where the complaint of a customer is not satisfatorily resolved, the complaint may be raised with-	Insurance Grievance Redressal Mechanism	Grievance Redressal Officer	Consumer Complaints Registration System	Integrated Grievance Management System	4
62	IGMS stands for-	Insurance Grievance Management System	Integrated Grievance Management System	IRDAI Grievance Management System	Initial Grievance Management System	2
63	Defect means-	Imperfection in the quality of product / service	deficiency in the nature of product / service	inadequacy in the manner of performance of the product	All of the above	4
64	Consumer dispute redressal agencies are not established at-	National level	District level	City level	State level	3
65	District Commission has the powers of	High Court	Supreme Court of India	Small Causes Court	Civil Court	4
	Appeals against orders passed by State Consumer Disputes Redressal Commission are accepted for hearing	High Court	State Commission	Civil Court	National Commission	4
67	Which Consumer dispute redressal agency is established by the Central Government?	State Commission	National Commission	District Commission	Both District & State Commission	2
68	A complaint can be filed with the Consumer Dispute Redressal Agencies by-	The advocate	The agent authorised by the consumer	The Consumer or his authorised agent	Only the consumer	3
69	The Ombudsman passes an award to insured within from the date of receipt of all the requirements from the insured and insurer.	2 months	15 days	3 months	1 month	3
70		One-tier	Three-tier	Two-tier	Four-tier	2
71	Which of the following statement is incorrect with	No one else other than the complainant himself / herself can file a complaint with the State or National Commission	There is no fee for filing a complaint with State Commission or National Commission	The complaint can be filed personally or can even be sent by post	No advocate is necessary for the purpose of filing a complaint	1
72	If a policyholder wishes to file a complaint against any insurance company directly with State Commission, then in which of the following cases can he / she do so?	Where the value of goods/services and compensation claimed is up to Rs 20 lakh	Where the value of goods/services and compensation claimed exceeds Rs. 20 lakh but does not exceed Rs. 100 lakh.	Where the value of goods/services and compensation claimed exceeds Rs.100 lakh.	Where the value of goods/services and compensation claimed exceeds Rs. 10 crores	2

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73	Which of the following statement is incorrect with regard to the State Commission?	This redressal authority has original, appellate and supervisory jurisdiction	It entertains appeals from the National Commission	It has original jurisdiction to entertain complaints where the value of goods/service and compensation, if any claimed exceeds Rs. 1Crore but does not exceed Rs. 10 Crore	No fees is charged to file a complaint with state commission	2
74	Which of the following rules is incorrect with regards to the Award that can be passed by the Ombudsman?	The Award should be more than Rs. 50 lakh	The Award should be made within a period of 3 months from the date of receipt of complaint	The insurer shall comply with the Award and send a written intimation to the Ombudsman within 15 days of the receipt of such acceptance letter	If the insured does not intimate in writing the acceptance of such Award, the insurer may not implement the Award	1
75	What is the period for which the license is valid that is issued to Corporate insurance agents?	3 years	5 years	10 years	Lifetime	1
76	Corporates agents are regulated by	Ministry of Corporate Affairs (MCA)	IRDAI	Government of India	SEBI	2
77	Mukesh is the priciple officer of XYZ corporate agent. He is a fellow of CII, London. How may hours of theoretical & practicle training does he require	25 hours	50 hours	60 hours	75 hours	1
78	According to new Corporate Agent Regulation an Applicant means	A company formed under the Companies Act 2013	A Co-operative Society registered under Co-operative Societies Act, 1912	A limited liability partnership formed and registered under the Limited Liability Partnership Act, 2008	Any of the above	4
79	The telemarketer of a Corporate Agent shall disclose to the prospective customer	The Name & Registration number of Corporate Agent.	Contact number of the telemarketer and- /or corporate agent.	Name and identification number of the person making the tele-call.	All of the above.	4
80	Which of the following factors are mostly in the control of an individual for maintaining good health	Social factors	Genetic factors	Environmental factors	Lifestyle factors	4
81	Which diseases are spread due to bad hygiene and environmental sanitation	Cancer and AIDS	Hypertension and diabetes	Influenza and chickenpox	None of the above	3
82		No, there is no relationship between the two	Yes, there is a direct relationship between the two	The relationship is indirect	The relationship is uncertain	2
83	What is the main aim of healthcare services	To create more jobs for healthcare providers	To promote, maintain, monitor or restore health of people	To make healthcare facilities expensive	To make healthcare services difficult to access	2
84	the setting up of healthcare facilities	Healthcare facilities should be based	Healthcare facilities should be based on the frequency of less severe illnesses like cold and cough	Healthcare facilities should be based on the availability of nearest railway station	Healthcare facilities should be based on the investment capacity of healthcare providers	1
85	Which of the following statements is true regarding secondary healthcare services	They are provided by primary care physicians	They are only available to inpatients	They are the first point of contact for patients within a health system	They include ambulance facilities and diagnostic services	4
86	Which healthcare provider would Mr. Sagar most likely visit first if he is feeling sick	A specialist at a hospital	A primary healthcare provider	A dentist	A pharmacist	2
87	Which of the following defines primary healthcare	Healthcare services provided by doctors, nurses and small clinics	Healthcare services provided by medical specialists	Specialized consultative healthcare	Ambulance services and pathology services	1
88		Central Government Health Scheme	Employees' State Insurance Scheme	Commercial Health Insurance	None of the above	1

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89	Which section of the Income Tax Act allows individuals to deduct premiums paid towards Health Insurance from taxable income	Section 80 B	Section 80 C	Section 80 E	Section 80 D	4
90	Which type of health insurance policy is allowed to be deducted from taxable income under Section 80 D of the Income Tax Act	Any health insurance policy	Only policies provided by the Government	Only policies provided by life insurers	Only policies provided by non-life insurers	1
91	Which of the following statements is true about the development of health insurance in India	The first standardised health insurance product for individuals and their families in India was introduced in 2001 by private players in the insurance sector	The Central Government Health Scheme (CGHS) was introduced for blue-collar workers employed in the formal private sector	1, ,,	Health insurance in India began with the introduction of commercial health insurance by non-life insurers in 1986	3
92	Which of the following is not a type of private health care provider in India	Solo practitioners	Diagnostic laboratories	Corporate hospitals	Government clinics	4
93	The following intermediary facilitates carrying out of pre-insurance medical examinations in connection with underwriting of the health insurance policies	Insurance Broker	Third Party Administrator	Surveyor and Loss Assessor	Reinsurance Broker	2
94	All the statements given below related to Employees' State Insurance Scheme are true EXCEPT:	This scheme was introduced for central government employees and provides comprehensive health services through a network of its own dispensaries and hospitals	ESIC (Employees State Insurance Corporation) is the implementing agency	All workers earning wages up to Rs. 15,000 are covered under the contributory scheme	Employee and employer contribute 1.75% and 4.75% of pay roll respectively; state governments contribute 12.5% of the medical expenses	1
95	All the statements given below related to Central Government Health Scheme are true EXCEPT:	The Central Government Health Scheme (CGHS), which was introduced in 1954	The CGHS is only for the central government employees including pensioner and their family member working in civilian jobs	It aims to provide comprehensive medical care to employees and their families and is fully funded by the employer (central government)	The services are provided through CGHS's own dispensaries, polyclinics and empanelled private hospitals.	3
96	All the options given below are lifestyle factors that determine the health of any individual EXCEPT:	Exercising	Eating within limits	Safe drinking water	Avoiding worry	3
97	Which of the following is an example of communicable disease caused due to environmental factors like bad hygiene?	Influenza	Malaria	Dengue	Asbestosis	1
98	Which of the following is an example of communicable disease caused due to environmental factors like bad hygiene?	Chickenpox	Malaria	Dengue	Asbestosis	1
99	70	PAN Number	Personal bank details	Detailed information on diseases such as Diabetes, Hypertension, Chest pain or Coronary Insufficiency or Myocardial Infarction	1	3
100	What information does the insurer consider when deciding to accept a proposal	Details of the insured	Details of the subject matter	Previous history of insurance and claim experience	All of the above	4
101	What does UIN in Health Insurance Stand for	The unique identification number of the policy document	The unique identification number of the insurer	The unique identification number of the product	The unique identification number of the policyholder	3
102	What is a condition in an insurance contract	It is a provision in the contract that can be changed at any time	It is a provision in the contract that outlines the rights of the policyholder	It is an optional provision that may or may not be included in the agreement.	It is a provision in the contract that forms the basis of the agreement	4

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103	Which of the following statements about conditions in an insurance policy is true	A breach of condition makes the policy voidable at the option of the insured	A breach of condition makes the policy voidable at the option of the insurer	They are not important in determining the basis of the agreement	They are optional provisions in an insurance contract	2
104	What is an endorsement in insurance policy	A document attached to the policy that covers all perils and exclusions	A document that specifies the standard terms and conditions of the policy	A document that sets out changes or amendments to the policy	A document that provides additional coverage to the policy	3
105	Identify the true statement I. Critical illness policies are usually available for persons in the age group of 21 years to 65 years. II. The sum insured offered under these policies is quite low.	Only I is true	Only II is true	Both I and II are true	Both I and II are false	1
106	Which of the following is an example of package policy? I. Health plus life combi product II. Shopkeepers policy III. Householder's policy	Only I	l and II	II and III	I,II and III	3
107	What is the free look in period for health insurance policies	15 days	20 days	30 days	45 days	1
108	A Life Assurance Company paid the Treatment Costs to the Insured, During the Event of Hospitalisation of the Insured, During the Policy-Term. This is an Example of	Survival-Benefit Payments	Surrender-Value	Rider-Benefit	Conditional Assignment	3
109	Ms. Kavita purchases a Critical Illness (C.I.) Rider, along with, a Term Assurance Plan, from ABC Insurance Company. How Will, the Company ascertain the Claim for the Critical Illness (C.I.) Rider? Choose the Most Appropriate Option.	Claim will be ascertained, as per the Conditions, stipulated in the Policy.	Claim will be ascertained, based on the Dates, which are determined, at the Beginning of the Contract, it-self.	Claim will occur, when the Policy-Holder decides to cancel the Contract.	Claims will be ascertained, based on the Medical and Other Records, provided by the Policy-Holder, in Support of Her Claim.	4
110	What are the two broad categories of health insurance products	Home care covers and personal accident covers	Indemnity covers and hospital cash (fixed benefit) covers	Dental covers and critical illness covers	Out-patient covers and travel covers	2
111	Which category of health insurance products constitutes the bulk of the health insurance	Indemnity covers	Home care covers	Personal accident covers	Hospital cash (fixed benefit) covers	1
112	What is the other name for Fixed benefit covers	Out-patient covers	Travel covers	Dental covers	Hospital cash	4
113	Which of the following is true regarding long term health products offered by Life Insurance Companies	Premium for such products shall remain unchanged for at least a period of every block of four years	Premium for such products shall remain unchanged for at least a period of every block of two years	Premium for such products shall remain unchanged for at least a period of every block of three years	Premium for such products shall remain unchanged for at least a period of every block of five years	3
114	What is the minimum size of a Group for which Group Health Insurance Policy can be issued	3	5	9	7	4
115	What is the maximum tenure for Credit Linked Group Personal Accident policies offered by General Insurers and Health Insurers	5 years	1 year	2 years	3 years	1
116	What is the provision in case an insured has taken health policies from multiple insurance companies that provide fixed benefits	The insurance companies will split the claim payment evenly	Each insurance company will make claim payments independently according to their policy's terms and conditions	The insured must choose one policy to use for all claim payments	The insured must provide proof of which policy they want to use for each claim	2

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117	What is the purpose of IRDA Guidelines on Standardization in health insurance	To provide more confusion among insurers and customers	To make it difficult for customers to compare products and take a considered decision	To remove the confusion among insurers, service providers, TPAs, and hospitals	To limit the number of health insurance providers in the market	3
118	What types of insurance products do the IRDA guidelines on standardization in Health Insurance apply to	All insurance product	All health insurance products, including PA and Domestic/Overseas travel	All health insurance products, excluding group policies	All general and health insurance products, excluding PA and Domestic/Overseas travel - Indemnity based health products Offered by general / health insurers	4
119	What is the purpose of a Hospitalization indemnity policy	To only provide coverage for expenses before and after hospitalization	To indemnify the policyholder by covering expenses during hospitalization	To provide coverage for all medical expenses	To exclude expenses related to hospitalization	2
120	What is the minimum prescribed period of hospitalization after which the policy provisions come into force	24 hours	12 hours	36 hours	48 hours	1
121	Which of the following procedures are covered under the policy	Dental procedures	Eye surgeries	Cosmetic surgeries	None of the above	2
122	Which of the following statements is true about the indemnity based Mediclaim policy	The policy does not cover infants	The policy does not cover Sr.Citizen	The policy does not cover expenses related to hospitalization	The policy covers only inpatient hospitalization expenses	4
123	What are Post hospitalization expenses	Expenses incurred during hospitalization	Expenses incurred after hospitalization	Expenses incurred before hospitalization	Expenses not covered by insurance	2
124	What is the duration of cover for Pre and Post hospitalization expenses	60 days pre and 30 days post	90 days pre and 30 days post hospitalization	30 days pre and 90 days post hospitalization	30 days pre and 60 days post hospitalization	4
125	What is a family floater policy	Only the individual can be covered under this policy	Only the dependent family members can be covered under this policy	A policy that offers a single sum insured which floats over the entire family	None of the above	3
126	In a family floater policy, how is the premium calculated	Based on the age of the oldest member of the family	Based on the age of the youngest member of the family	Based on the sum insured chosen for each individual insured	None of the above	1
127	Why do insurance companies collect details of pre- existing diseases	To charge improper premiums	To exclude coverage for any future diseases	To provide free treatment for such diseases	To decide on accepting the proposal for insurance	4
128	What is a pre-existing disease	Any disease suffered by an insured person within 12 months prior to commencement of the policy	Any disease suffered by an insured person within 48 months prior to commencement of the policy	Any disease suffered by an insured person within 24 months prior to commencement of the policy	Any disease suffered by an insured person within 36 months prior to commencement of the policy	2
129	What is disease-specific capping in health insurance	A limit on the premium charged for policies covering certain diseases	A limit on the number of claims that can be made for a particular disease	A limit on the amount of coverage provided for specific diseases	A limit on the number of diseases that can be covered under a policy	3
130	What is co-payment in health insurance	The portion of the claim amount that the policyholder/insured has to bear	A separate policy taken by the policyholder to cover specific diseases	The percentage of the premium paid by the policyholder/insured	The amount deducted from the Sum Insured after every claim	1
131	Which of the following is a cost-sharing provision in a health insurance policy	Waiting period	Coverage for Day care procedure	Deductible/ Excess	Pre-policy check-up cost	3
132	Who bears the cost of a pre-policy medical check- up in a health insurance policy	Prospective client	Insurer	Government	Healthcare provider	2
133	What is a top-up cover in health insurance	A policy that covers only pre-existing conditions	A policy that covers only day-care procedures	A policy that provides cover for high sums insured over and above a specified amount	A policy that covers only accidents	3

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
134	What is the entry age for Elderly health insurance plans	50 years	55 years	60 years	65 years	3
135	What is the claim amount in a fixed benefit insurance plan	A fixed sum irrespective of the amount spent by the insured for the named treatment	The amount spent by the insured for the named treatment	A variable amount based on the severity of the ailment	No claim amount is given	1
136	What is the proof required to process a claim in a fixed benefit insurance plan	Detailed bills and invoices of the treatment	Proof of Hospitalization and coverage of ailment under the policy	Doctor's prescriptions and medical reports	None of the above	2
137	What is a critical illness policy	A policy that provides daily cash benefit to the insured person during hospitalization	A policy that provides a fixed sum on diagnosis of certain named critical illness	A policy that covers treatment costs for minor illnesses	A policy that covers only pre-existing conditions	2
138	What is the waiting period for Corona Kavach and Corona Rakshak	90 days	30 days	15 days	60 days	3
139	What is the maximum sum insured option available under Corona Rakshak	Rs. 1 lakh	Rs. 2.5 lakh	Rs. 2 lakh	Rs. 1.5 lakh	2
140	What is the lump sum benefit payable under the standard policy for vector-borne diseases on positive diagnosis requiring hospitalization for a minimum of 72 hours	50% of the sum insured	75% of the sum insured	100% of the sum insured	125% of the sum insured	3
141	What do Health plus Life Combo Products offer	Life insurance cover only	Health insurance cover only	Both life and health insurance covers	None of the above	3
142	What is the aim of Micro-insurance products?	To aim for the protection of high-income people from urban sectors.	To aim for the protection of low- income people from rural and informal sectors.	To aim for the protection of middle- income people from semi-urban sectors.	To aim for the protection of people from developed sectors.	2
143	Which of the following policies was launched by the Government to provide health insurance coverage for the below poverty line (BPL) families in association with insurance companies?	Ayushman Bharat Scheme	Rashtriya Swasthya Bima Yojana (RSBY)	Jan Arogya Bima Policy	Bima Kavach Yojana	2
144	What is the Sum Insured amount for Rashtriya Swasthya Bima Yojana (RSBY)?	Rs. 5,00,000	Rs. 1,00,000	Rs. 50,000	Rs. 30,000	4
145	Which of the following schemes was launched to achieve the vision of Universal Health Coverage (UHC)?	Ayushman Bharat Scheme	Money Back Scheme	Endowment Scheme	Bima Kavach Yojana	1
146	What is the premium amount for Pradhan Mantri Suraksha Bima Yojana (PMSBY)	Rs. 10/- per annum per member	Rs. 12/- per annum per member	Rs. 15/- per annum per member	Rs. 20/- per annum per member	2
147	What is the maximum sum insured provided for death under Pradhan Mantri Suraksha Bima Yojana (PMSBY)	Rs. 1 Lakh	Rs. 3 Lakh	Rs. 5 Lakh	Rs. 2 Lakh	4
148	Who can avail an Overseas Travel Insurance policy	Only Indian citizens travelling abroad for holiday	Only Indian citizens travelling abroad for business	Indian citizens travelling abroad for business, holiday or studies and employees of Indian employers sent on contracts abroad	Only employees of Indian employers sent on contracts abroad	3
149	What is the most common form of group health insurance	Individual policy	Group policy taken by employers covering employees	Personal policy	Family policy	2

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
150	Identify the true statement I. Health plus life combi products are jointly designed by the two insurers and marketed through the distribution channels of both insurers II. For health plus life combi products, the claims are handled by the insurers jointly	Only I is true	Only II is true	Both I and II are true	Both I and II are false	1
151	What are the benefit payout provided under 'Critical Illness cover'?	Actual medical expenses incurred due to hospitalization	A fixed sum per day for the period of hospitalization	Payout on occurrence of a pre-defined critical illness like heart attack, stroke, cancer etc	All of the above	3
152	Hospital daily cash policy provides towards benefits: I. Incidental expenses II. Expenses not payable under the indemnity policy III. Expenses non payable under Co-pay	Only I	I and II	II and III	I,II and III	2
153	ABC Insurance Company assumes a high interest rate in their premium calculations. This mean that:	Premium charged will be higher	Premium charged will be lower	Premium charged will remain unchanged	Premium charged will fluctuate wildly	2
154	Which of the following health insurance products is a fixed benefit plan for payout on occurrence of a predefined critical illness like heart attack, stroke, cancer etc.?	Indemnity cover	Fixed benefits cover	Critical Illness cover	All of the above	3
155	Why is underwriting necessary	To create a large pool of risks for the	To prevent the insurance company from becoming insolvent	To accept all risks, regardless of premiums	To offer insurance at the lowest possible premium	2
156	Which factor affects morbidity rates in health insurance	insurance company Financial status	Gender	Marital status	Educational qualification	2
157	What is moral hazard in health insurance	The physical hazards associated with a health risk	The cost associated with a health risk	The deliberate intention of taking insurance just to collect a claim	The risk assessment and pricing done by the underwriter	3
158	Which of the following statements is true about moral hazard in health insurance	It can prove costly to the insurance company	It refers to the physical hazards of a health risk	It has no impact on the insurance company	It can be beneficial to the insurance company	1
159	Insurers charge lower premiums for which of the following risk types	Standard risks	Substandard risks	Preferred risks	Declined risks	3
160	Who plays a critical role in primary underwriting	Underwriter	Agent or Company representative	Policyholder	Insurance broker	2
161	Before issuing a policy, the specific consent of the policyholder for any underwriting loading charged over and above the premium must be obtained. This regulation is for the benefit of	The insurance company	The regulator	The policyholder	The insurance agent	3
162	When can porting be done	Anytime during the policy period	Only at the time of policy issuance	Only after a break in the policy	Only at the time of policy renewal	4
163	Who should the insured make a request for porting to		The old insurer	IRDAI	Any insurance agent	2
164	What is the consequence of breach or concealment of information by the insured in insurance	Increase in premium	Policy becomes void	Decrease in premium	Policy remains unaffected	2
165	When are financial documents usually asked for in insurance	Only in high sum assured coverage	When there is a mismatch between stated income/occupation and coverage sought	Both (B) and (C)	None of the above	4

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
166	What is the purpose of medical underwriting in health insurance	To determine the premium amount	To determine whether to offer coverage or not	To determine the number of family members to be covered	To determine the type of hospital where the insured can be admitted	2
167	What are the different categories of risk into which the underwriter can classify a proposal	Accept risk at standard rates, extra premium, or decline the cover	Accept risk at an extra premium	Postpone the cover for a stipulated period/ term	All of the above	4
168	In which cities are the premiums for certain products higher due to higher claims cost	Small towns and villages	Tourist destinations	Metros and 'A Class' cities	Industrial hubs	3
169	Which of the following non-employer groups can be offered group health insurance	Employer welfare associations	Customers of a particular business where insurance is offered as an add- on benefit	Borrowers of a bank	All of the above	4
170	What is the main cover under Overseas Travel Insurance policies	Life cover	Home insurance	Health cover	Vehicle insurance	3
171	Which risk group does a person working in underground mines belong to	Risk group I	Risk group II	Risk group III	None of the above	3
172	What is the general age limit for the working population in employer-employee groups	5-70	18-70	30-70	50-70	2
173	From the below given age proof documents, identify the one which is classified as non-standard by insurance companies.	School certificate	Identity card in case of defence personnel	Ration card	Certificate of baptism	3
174	Out of following underwriting methods the process of underwriting is speedy but the premiums may be relatively higher except	Medical underwriting	Non medical underwriting	Numerical rating method	Group insurance	1
175	Group insurance is underwritten mainly on	Law of Uberrima fides	Law of Insurable interest	Law of averages	Law of mutual benefit	3
176	Which One of the Following Statements, is <u>In-Correct</u> , with Regard to Critical Illness (C.I.) Rider? Choose the Most Appropriate Option.	A Specified Amount is Paid, as per the Policy- Terms, in the Event of Diagnosis of a Critical Illness.	The Illness should have been covered in the List of Critical Illnesses, specified by the Insurance Company.	Critical Illness (C.I.) Rider is an Example of the Claims, that may occur, during the Policy- Term.	The Life Assurance Policy Contract Terminates, After the Rider-Payments are Made.	4
177	Third-Party Administrators (T.P.A.s) are Regulated, by Which of the Following Bodies?	Life Insurance Council and General Insurance Council, Jointly.	Insurance Regulatory and Development Authority of India (I.R.D.A.I.)	Insurance Brokers Association of India	Finance Ministry	2
178	What is the true test of an insurer's performance in insurance?	The colour of the insurance company's logo	The number of employees the insurance company has	The claims paying ability of the insurance company	Location of Company office premises	3
179	Who is the first stakeholder and receiver of the claim?	The insurance agent who sold the policy	The person who processes the insurance claim	The insurance company's shareholders	The customer who buys the insurance policy	4
180	Which of the following statements is true regarding Health insurance claim servicing?	Claims can only be serviced by the insurance company itself.	Claims can only be serviced by Third Party Administrators (TPAs).	Claims can be serviced by either the insurance company or TPAs authorized by the insurance company.	Claims can only be serviced by providers/hospitals.	3
181	What happens from the time a health claim is made known to the insurer/TPA to the time the payment is made as per the policy terms?	The claim is rejected immediately	The payment is made without any verification	The claim goes through a set of well-defined steps	The insurer/TPA ignores the claim	3
182	What is claim intimation in the insurance claim process?	The final stage of the claim process	The process of investigating a claim	The act of informing the insurance company of a planned or emergency hospitalization	The process of determining the amount to be paid for a claim	3

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
183	Which of the following statements is true regarding claim intimation in health insurance?	Claim intimation is not mandatory	Claim intimation is required before 48 hours of hospitalization in case of an emergency	Claim intimation is required within 48 hours of hospitalization in case of an emergency	claim intimation is required before hospitalization in case of planned admission, and within 24 hours of hospitalization in case of an emergency.	4
184	How is claim intimation to Insurer / TPA possible according to the statement?	Only Through telegrams	Only Through fax	Through Mobile Apps/ call centres/ internet/ e-mail	Only Through postal mail	3
185	What happens after a company or TPA receives an intimation about Mr. X's claim?	The claim is immediately approved	The documents are ignored		The claimant is asked to provide more documents	3
186	Which of the following is true regarding the scrutiny of claims for final settlement on a reimbursement basis?	Claims are accepted without any scrutiny or verification of documents.	Claims are scrutinized for admissibility, sum assured, deductibles, and sub-limits.	Claims are only scrutinized for admissibility, but not for sum assured, deductibles, and sub-limits.	Claims are scrutinized for sum assured, but not for admissibility, deductibles, and sub-limits.	2
187	What action is taken by the company in case the intimation is for a planned surgery under the Cashless scheme?	Pre-authorization of likely expenditure is given to the hospital	The claim is directly processed	The hospital is contacted for more information	The claim is rejected	1
188		Unani	Siddha	Homeopathy	All of the above	4
189	What is the recent directive of IRDAI regarding	Insurers are not allowed to cover telemedicine in their policies.	Telemedicine is allowed only for non- coronavirus-related medical consultations.	Telemedicine is allowed wherever regular medical consultation is allowed.	Policyholders are required to visit the hospital for all medical consultations.	3
190	· ·	Sum insured available for the member under the policy	Deductible amount	Balance sum insured available under the policy for the member after taking into account any claim made already	Sub-limits	2
191		Charges that are higher than the prevailing charges in the geographical area	Charges for services or supplies that are unique to a particular provider	Charges that are decided solely by the insurer	Charges for services or supplies that are consistent with the prevailing charges in the geographical area for identical or similar services	4
192		Sum insured available for the member under the policy	Balance sum insured available under the policy for the member after taking into account any claim made already	Non-payable items in health insurance	Deductible amount	3
193	How are payments made for a payable claim amount?	By cheque or bank transfer	By cash only	Only by cheque	By transferring the claim money to the insurance company's account	1
194	Which of the following is not a possible reason for	No active treatment; admission is only for investigation purpose	Illness treated is excluded under the policy	Hospitalization is more than 24 hours	The cause of illness is abuse of alcohol or drugs	3
195		5% to 10%	10% to 15%	15% to 20%	20% to 25%	2
196	,	30 days from the date of receipt of claim intimation	60 days from the date of receipt of claim intimation	90 days from the date of receipt of claim intimation	120 days from the date of receipt of claim intimation	3
197	Within how many days of completing the investigation should a claim be settled?	30 days	15 days	60 days	90 days	1

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
198	What are some examples of frauds committed in health insurance?	Impersonation	Fabrication of documents	Inflation of expenses	All of the above	4
199	What options are available for customers if their claim is denied?	IRDAI	The Consumer Commissions	Insurance Ombudsman	All of the above	4
200	What is the first step for a customer covered under health insurance to avail the cashless facility?	The customer approaches the treating doctor for admission	The customer approaches the hospital's insurance desk with insurance details	The customer pays the hospital charges in advance	The customer contacts the TPA directly	2
201	Who takes the decision on whether the cashless authorization could be provided or not?	The hospital	The patient	The TPA	The insurer	3
202	What does the hospital do when the patient is ready for discharge?	Check the amount of credit in the account of the patient approved by the TPA against the actual treatmnet charges covered by Insurance	Request the patient to pay the entire treatment charges in cash	Ask the patient to undergo further treatment	Transfer the patient to another hospital	1
203	What is the purpose of reserving in the context of insurance companies?	To make provisions for all claims in the books of the insurer based on the status of the claims		To ensure that policyholders pay their premiums on time	To estimate the profits that the insurer will earn from investments	1
204	What does the TPA do after studying the information provided in the cashless authorization form?	Approves the cashless authorization without delay	Takes a decision on whether cashless authorization could be provided and, if so, for how much amount	Rejects the cashless authorization immediately	None of the above	2
205	What should mr.X do if he doesn't have his insurance details with him?	He should contact the hospital	He should contact the TPA through a 24 hour helpline	He should wait until they have their insurance details	He should pay for the treatment out of pocket	2
206	What should Mr.X do if the hospital suggested by his doctor is not in the TPA network?	He should choose another hospital in the network of the TPA	He should contact the TPA to check for options where cashless facility is available	He should pay for the treatment out of pocket	He should contact the consulting doctor for further advice	2
207	When should a customer inform the TPA about the discharge?	After the patient is discharged	Before the patient is admitted to the hospital	At the time of filling the pre- authorization form	In advance of the discharge and request the hospital to send to the TPA any additional approval that may be required	4
208	What is the most important document required to process a health insurance claim?	Investigation report	Consolidated and detailed bills	Receipt for payment	Discharge summary	4
209	What is the purpose of investigation reports in health insurance claims?	To provide a summary of the patient's condition	To provide a break-up of the bills	To assist in comparing the diagnosis and treatment	To verify the identity of the patient	3
210	What is the purpose of the claim form in health insurance claims?	To provide a summary of the patient's condition	To request processing of the claim	To provide a break-up of the bills	To assist in comparing the diagnosis and treatment	2
211	Which of the following is an expectation from insurance agents/brokers in addition to selling policies?	Providing legal advice to customers	Delivering groceries to customers	Servicing customers in the event of a claim	Performing home repairs for customers	3
212	Which document may be required for accident claims?	Consolidated and detailed bills	Identity proof	Dialysis/Chemotherapy/Physiotherap y charts	FIR or Medico-legal certificate	4
213	What is the purpose of having a membership with the TPA?	To obtain discounts on medical treatment at hospitals.			To receive medical advice and consultation from a team of healthcare professionals.	3

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
214	What document does the TPA issue to the hospital for cashless treatment?	Medical report	Discharge summary	Pre-authorization or Letter of Guarantee	Prescription for medication	3
215	What is claims investigation about?	Determining the validity of the claim and finding out the real cause and extent of the loss	Assessing the credibility of the claimant's occupation	Verifying the authenticity of the claimant's identity documents	Calculating the premium to be charged for the policy	1
216	What documents are required for name and address verification for AML (Anti-money laundering) purposes?	Birth certificate and rental agreement	Passport and bank statement	Aadhar card and credit card statement	PAN card and telephone bill	4
217	What is the role of assistance companies in overseas claims?	They process claims on behalf of insurance companies	They provide assistance to customers in case of contingencies covered under the policy	They offer tie-up arrangements with hospitals for cashless treatment	They provide legal assistance to customers during claims process	2
218	Which of the following is NOT a service provided by assistance companies during overseas travel insurance claims?	Medical service provider referrals	Interpreter Referral	Delivery of Essential Medicines	Rental car booking	4
219	What is the fee charged by assistance companies for their services?	It varies depending on agreement with the particular insurance company, benefits covered etc.	It is a fixed amount for all customers of the insurance company	It is determined by the insurance company and is the same for all assistance companies	There is no fee charged for the services provided by assistance companies	1
220	Which of the following steps is necessary for hospitalization in case of a travel insurance claim?	Submit a written request to the insurance company	Visit any hospital of choice	Intimate the call centre and proceed to a specified hospital with a valid travel insurance policy	None of the above	3
221	How do hospitals verify the validity of an overseas travel insurance policy?	The hospitals do not verify the validity of the policy before treatment	The hospitals contacts the assistance companies/ insurers on the call centre numbers to check the validity of the policy and verify coverages.		The hospitals relies on the insured's word that they have a valid policy.	2
222	Which type of claim payment is made in foreign currency?	Cashless claims	Reimbursement claims	Both cashless and reimbursement claims	None of the above	1
223	What is the currency conversion rate used while processing reimbursement claims?	The rate as on date of loss	The rate as on date of filing the claim	The rate as on the date of discharge from the hospital	The rate as on the date of admission to the hospital	1
224	What currency is used for payments for admissible claims in reimbursement claims for overseas travel insurance?	British Pound (GBP)	Indian Rupee (INR)	United States Dollar (USD)	Euro (EUR)	2
225	Which document is required to certify the disability of an insured individual?	Birth certificate	Passport	Permanent disability certificate from a civil surgeon or equivalent competent doctors	Driving license	3
226	For a claim to be processed, which of the following are most important documents? I. Documentary evidence of illness II. Payment made to the hospital III. Further advice for treatment IV. Payment proofs for implants	Only I and II	Only I and IV	I, II and III	I, II, III and IV	3

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
227	Which of the following statement/s is / are correct with regards to 'claim processing and payment services' provided by a TPA? I. TPAs normally receive advance money from the insurer for claim settlement. The TPA is expected to keep an account of the monies and provide periodic reconciliation of the amounts received from the insurance company II. The money can be used for purposes of payment of approved claims and providing other services to the customers	Only I	Only II	Both I and II	Neither I nor II	1
228	Hospital-Admission-Intimation can be made to an Insurance Company, through, Which of the Following Channels?	Fax	Calling the Call-Centre	E-Mail	Any of the Above.	4
229	For a Health Insurance Claim to be Processed, Which of the Following, are the Most Important Documents? I. Documentary Evidence of Illness. II. Treatment-Provided. III. In-Patient Duration. IV. Investigation-Reports.	Only, I and II.	Only, I and IV.	I, II, and IV.	I, II, III, and IV.	4
230	Identify the True Statement: I. Morbidity increases due to Various Adverse Factors, such as, Being Over-Weight or Under-Weight, Personal History of Certain Past and Present Diseases or Ailments. II. Morbidity decreases due to Certain Favourable Factors, like, Lower Age, a Healthy Life-Style, etc.	Only Statement-I is True.	Only Statement-II is True.	Both: Statement-I and Statement-II, are True.	Both: Statement-I and Statement-II, are False.	3
231	What principle begins with the Proposal form for insurance?	Principle of utmost bad faith	Principle of utmost honesty	Principle of utmost good faith	Principle of utmost negligence	3
232	Why does the proposer need to inform details about their previous insurances to the insurer in property insurance?	To ensure that the principle of contribution is applied	To restrict the amount of coverage depending on other PA policies	To give the insurer information about the subject matter of insurance	To decide on conducting risk inspections or collecting further details	1
233	What physical features of the subject matter are included in the proposal form?	Type and quality of construction	Age of the subject matter	Presence of fire-fighting equipment	All of the above	4
234	What is the time frame within which the insurer must process a proposal according to the Protection of Policyholders' Interests Regulations, 2017?	10 days	15 days	20 days	30 days	2
235	When should the premium be paid in an insurance contract?	After the policy period has ended	Before the claim is filed by the insured	Before the expiry of the policy.	In advance, before the inception date of the insurance contract	4
236	What does Section 64 VB of the Insurance Act-1938 state regarding the payment of insurance premiums?	Insurers may assume risks without receiving any premium	Insurers may assume risks without guarantee of premium payment	Insurers must receive the premium in advance or guarantee of payment before assuming the risk	Insurers must receive the premium after	3
237	What is the purpose of the proposal form in insurance?	To assess the policyholder's financial stability	To gather information about the risk to be insured	To determine the premium amount quoted by other insurance companies.	To provide coverage for potential losses	2
238	What is the time limit for an insurance agent to deposit the premium collected on behalf of an insurer?	48 hours	24 hours excluding bank and postal holidays	7 days	1 month	2

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
239	How should any refund of premium due to an insured be paid by the insurer?	By crediting it to the account of the agent	By direct payment to the insured through crossed or order cheque or electronic mode	By sending it to the insurer's bank account	By deducting it from the premium of a new policy	2
240	What is the validity of a cover note?	Up to 1 year	Up to 6 months	Up to 60 days	Up to 30 days	3
241	In which classes of business are cover notes predominantly used?	Health and life insurance	Property and liability insurance	Marine and motor insurance	Homeowners insurance	3
242	When are marine cover notes typically issued?	When all details required for the policy are known	When there is difficulty securing adequate shipping space	When the cargo has already been shipped	When the cargo is being transported inland	2
243	What is the basis of valuation for loss or damage prior to declaration and/or shipment on board the steamer under a marine cover note?	Market value of the goods at the time of loss or damage	Cost of the goods at the time of loss or damage	Prime cost of the goods plus charges actually incurred and for which the assured is liable	Value of the goods declared at the time of issuance of the cover note	3
244	What is the purpose of the certificate included in the Motor insurance policy?	To certify that the insured has paid the premium	A certificate of compliance, certifying that the cover note complies with the Insurance Act, 1938	A certificate of inspection, certifying that the insured vehicle is in good condition	A certificate to the effect that the cover note is issued in accordance with the provisions of Chapters X and XI of the Motor Vehicles Act, 1988	4
245	What types of risks are typically covered by fire insurance proposal forms?	Complex industrial risks	Agricultural risks	Standard risks like houses and shops	Risks located in remote areas	3
246	Which of the following statements is false regarding the Motor Cover Note?	It includes the registration mark and number, or description of the vehicles insured	It does not mention the effective date and time of commencement of insurance for the purpose of the Act	It includes the name and address of the insured	It includes limitations as to use and additional risks, if any	2
247	How long can a Cover Note's validity be extended?	15 days	10 days	30 days	20 days	1
248	Are companies encouraging or discouraging the use of Cover Notes?	It varies from company to company	Neutral	Encouraging	Discouraging	4
249	Who is entitled to drive the insured vehicle according to the certificate of insurance?	Only the insured	Only the person holding an effective learner's license	Any person who is driving on the insured's order or with his permission and holds and effective driving license.	Only the person holding a commercial driver's license	3
250	What is the purpose of a policy document in insurance?	To provide evidence of the contract of insurance	To describe the insured property in detail	To specify the period of insurance	To mention the exclusions from coverage	1
251	Which act governs the stamping of a policy document in India?	Indian Evidence Act, 1872	Indian Contract Act, 1872	Indian Stamp Act, 1899	Indian Insurance Act, 1938	3
252	What is a warranty in insurance?	A separate document from the policy	A condition that is not important for the validity of the contract	A part of both cover notes and policy document	A condition that can be disregarded if it is not material to the risk	3
253	What happens if a warranty is breached in insurance?	The policy becomes voidable at the option of the insured.	The insurer is obliged to cover the loss.	The insurer may process the claims according to norms and guidelines.	The policy becomes voidable at the option of the insurer.	4
254	What is warranted in Fire Insurance for cigarette filter manufacturing?	No hazardous goods shall be stored in the insured premises during the currency of policy	No manufacturing activity is carried out in the insured premises for consecutive period of 30 days or more		The property is guarded by a watchman for twenty four hours	3
255	What is warranted in burglary insurance?	No hazardous goods shall be stored in the insured premises during the currency of policy	_	The property is guarded by a watchman for twenty four hours	Goods must be packed in tin-lined cases	3
256	Which of the following is NOT a reason for issuing an endorsement?	Variations/ changes in sum insured	Change of insurable interest by way of sale, mortgage, etc.	Extension of insurance to cover additional perils/ extension of policy period	Request for a refund of premium by the insured	4
257	What is the purpose of the "Increase in Stock Value Cover" endorsement?	To increase the sum insured of the policy	To cover additional perils	To change the name or address of the insured	To cancel the policy	1

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
258	If a policy is issued in an ambiguous manner, how will it be interpreted by the courts?	In favor of the insurer	In favor of the broker	In favor of the insured	In favor of agent	3
259	If an endorsement contradicts other parts of the contract, which document's meaning will prevail?	The endorsement	The policy	The clauses in italics	The clauses printed or typed in the margin of the policy	1
260	Which part of a policy is given more importance than the wording within the body of the policy?	The standard printed policy form	The clauses in italics	The clauses printed or typed in the margin of the policy	The endorsements	3
261	Which document overrides both marginal clauses and the clauses in the body of the policy?	Clauses in italics	Clauses printed or typed in the margin	Clauses attached or pasted to the policy	Endorsements	3
262	If there is any ambiguity or lack of clarity in a policy, which ordinary rules are applied?	The rules of construction	The rules of grammar and punctuation	The rules of interpretation	The rules of evidence	2
263	What is the principal rule of construction for insurance contracts?	The intention of the parties must not prevail	The interpretation of the court prevails	The intention of the parties is not relevant	The intention of the parties must prevail	4
264	When should technical terms be given their technical meaning in insurance policies?	Only when defined by statute	When indicated by the context	Always	Never	3
265	What is the purpose of a renewal notice in non-life insurance policies?	To inform the insured of the expiry date of the policy	To invite the insured to renew the policy	To incorporate all relevant particulars of the policy	All of the above	4
266	What is the insured's attention drawn to in a motor renewal notice?	The requirement to revise the sum insured	The requirement to pay the premium in advance	The insurer's contact information	The insured's claims history	1
267	What kind of questions are asked in a motor insurance proposal form?	About the proposer's health	Details about the raw material used	About the vehicle, its operations, make, and carrying capacity	Details of the hazardous goods present in the property	3
268	What information is required for a private car insurance proposal?	Person's Overseas Travel Policy	Person's Health Condition	Engine number, chassis number, and registration number	Details of Person's monthly income.	3
269	Which of the following begin with the proposal form of insurance? I. Principle of utmost good faith II. Principle of indemnity III. Duty of disclosure of material information IV. Principle of subrogation	Only II	I and II	I and III	I, II, III and IV	4
270	· · · · ·	I and II	III and IV	I and IV	II and III	3
271	If certain terms and conditions of the policy need to be changed at the time of issuance, it is done by setting out the changes through a document called	Alteration	Addendum	Endorsement	Modification	3
272	What are the details that are collected by insurance company in a proposal form? I. Age II. Occupation III. Build IV. Premium payment details	Only I and II	Only III and IV	I,II and III	I,II,III and IV	4
273	What is the part of both cover notes and policy document?	Insurance	Contracts	Warranty	Agreement	3
274	What is physical hazard in insurance underwriting?	A thorough knowledge of the construction materials used in the building	A thorough knowledge of various hazards to which property and persons are exposed	A thorough knowledge of the policyholder's personal history	A thorough knowledge of the policyholder's financial status	2
275	What is a bad physical hazard for liquid cargo in marine transportation?	Cargo packed in bales	Cargo packed in double bags	Cargo packed in second-hand drums	Cargo packed in new drums	3

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
276	Which of the following methods do underwriters use to deal with physical hazards?	Imposition of excess/deductibles	Loading of premium	Applying warranties on the policy	All of the above	4
277	What is the reason for loading of premium in risk exposure?	To reduce the probability of claims	To ignore the occurrence of large claims	To take into consideration the higher probability of claims	To avoid the risk exposure altogether	3
278	What is the purpose of imposing warranties in insurance policies for physical hazards?	·	To reduce the physical hazard	To limit the coverage provided	To delay the claim settlement process	2
279	Which of the following is an example of physical hazard in fire insurance?	The policyholder's occupation	The policyholder's age	The construction materials used in the building	The policyholder's driving record	3
280	What is a no claim bonus?	A bonus given to policyholders who have lodged claims in the previous year	A bonus given to policyholders who have not lodged claims in the previous year	A penalty imposed on policyholders who have lodged claims in the previous year	A discount given to policyholders regardless of whether they have lodged claims or not	2
281	How is the no claim bonus allowed to the insured?	By increasing the total premium at renewal	By deducting a percentage of the total premium at renewal	By providing a cash reward to the insured	By reducing the coverage provided in the policy	2
282	Which of the following is an example of moral hazard due to dishonesty in insurance?	An insured accidentally causing damage to their own property	An insured being unable to pay their insurance premiums	An insured deliberately causing damage to their property to collect a claim	Overestimating the value of the insured property	3
283	Which of the following is an example of carelessness in the context of insurance?	Taking necessary precautions to prevent loss	To adopt careless attitude towards the insured property	Being overprotective of the insured property	Filing claims promptly	2
284	Which of the following involves an element of moral hazard in the employer-employee relationship?	Macroeconomics	Microeconomics	International trade	Industrial relations	4
285	What is a sub-limit in insurance?	A limit on the total payout that can be made to the insured	A limit on the number of claims that can be made in a year	A limit on the total payout separately each for room expenses, surgical procedures or doctor fees	A limit on the amount of premium that can be paid by the insured	3
286	How is premium charged for short period insurance?	On a proportionate basis	At a fixed rate	According to a special scale	Based on the policyholder's claims history	3
287	How can the sum insured be determined in personal accident insurance?	Based on the insured's age	Based on the insured's occupation	Based on the insured's income	Based on the insured's health history	3
288	What does IDV stand for in motor insurance?	Insured Declared Value	Insured Declaration Value	Insured Damage Value	Insured Depreciation Value	1
289	How is the sum insured determined for contents in fire insurance?	Based on their original cost	Based on their current market value	Based on the replacement cost	Based on the appreciation value	2
290	How is the sum insured determined in stocks insurance?	Based on the original cost of the stocks	Based on the replacement cost of the stocks	Based on the appreciation value of the stocks	Based on the market value of the stocks	4
291	What is the basis of sum insured in marine cargo insurance?	Market value of the cargo	Original cost of the cargo	Agreed value between insurer and insured	Replacement cost of the cargo	3
292	Which of the following statements is true about deciding the sum insured for liability insurance policies?	The sum insured is always a fixed amount predetermined by the insurer.	The sum insured is the liability exposure of the industrial units based on the degree of exposure and geographical spread.	The sum insured is based on the insured's income.	The sum insured for liability insurance is the market value of the property.	2
293	Why does the process of manufacturing during the night increase the hazard of a fire?	Due to the use of artificial lights	Due to continuous use of machinery leading to friction	Due to likely carelessness of workers due to fatigue	All of the above	4
294	What is an ignition hazard in relation to occupancy in insurance?	The risk of collapse of upper floors	The risk of damage to adjacent premises	The risk of chemical reactions	The risk of water damage	3
295	Loading of Premium is done for adverse claims ratio, as in case of: a) Motor Insurance b) Health insurance Policy	Neither	Only (a)	Only (b)	Both Option (a) & (b) apply	4

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
296	No Claim Bonus is allowed by way of : a) deduction on the total premium at renewal only b) depending upon the incurred claim ratio for the entire group c) insurance sum	Both Option (a) & (b) apply together	Both Option (a) & (c) apply together	Both Option (b) & (c) apply mutually exclusive	Both Option (a) & (c) apply mutually exclusive	1
297	No claim bonus recognizes the factor of	Moral hazard in the Insured	Physical hazard	Marine hazard	Physical and moral hazard	4
298	Discuss the Difference between Insurance and Assurance.	Insurance: Protection Against an Event, that <i>Will</i> Happen. Assurance: Protection Against an Event, that <i>Might</i> Happen.	Insurance: Protection Against an Event, that Might Happen. Assurance: Protection Against an Event, that Will Happen.		Insurance: Guaranteed Protection, Against an Event, that <i>Might</i> Happen. Assurance: Protection Against an Event, that <i>Might</i> Happen, is Not Guaranteed.	2
299	Mr. Poddar has used Insulated Wiring in His House, so as to Reduce the Chances of Damage, Due to Fire. Identify the Risk-Management Technique, practiced here.	Risk-Avoidance	Risk-Retention	Risk-Transfer	Risk-Reduction and Risk- Control	4
300	What are retail insurance products?	Insurance products purchased by businesses for covering certain interests	Insurance products purchased by individuals for covering certain interests	Insurance products sold in bulk to large corporations	Insurance products exclusively sold online	2
301	What is the Bharat Griha Raksha policy?	A mandatory policy offered by all general insurers for fire and allied perils insurance business		A policy that covers only losses from theft and burglary	A policy that covers only personal accidents of the insured and spouse	1
302	Does the Bharat Griha Raksha policy provide waiver of underinsurance?	Yes, the policy settles claims up to twice the Sum Insured	No, the policy only settles claims for losses from fire and natural catastrophes	Yes, the policy gives complete waiver of underinsurance	No, the policy only settles claims proportionately	3
303	Is the RIV method allowed for stocks and stocks in process?	Yes	No	It depends on the insurance company	It depends on the nature of the stocks	2
304	What is the difference between reinstatement value and market value?	Reinstatement value is based on the age of the property while market value is based on the reconstruction cost	Reinstatement value is the cost to reconstruct the home while market value is the sale value of the home	Reinstatement value is the cost to repair the home while market value is the rental value of the home	Reinstatement value is based on the location of the property while market value is based on the demand for the property	2
305	What are the two methods of fixing the Sum Insured for fire insurance?	Fire Value (FV) and Replacement Value (RV)	Market Value (MV) and Reinstatement Value (RIV)	Cash Value (CV) and Recovery Value (RV)	Purchase Value (PV) and Restoration Value (RV)	2
306	What is the difference between "All Risks" and "Named Perils" insurance policies?	"All Risks" policies cover any risk not specifically excluded, while "Named Perils" policies cover only specific listed perils.	"All Risks" policies cover only specific listed perils, while "Named Perils" policies cover any risk not specifically excluded.	"All Risks" policies are less comprehensive and priced lower, while "Named Perils" policies are more expensive and cover a wider range of risks.	"All Risks" policies and "Named Perils" policies are the same thing.	1
307	What is the definition of robbery in insurance terms?	Unforeseen and unauthorised entry to or exit from the insured premises with the intent to steal contents	House trespass for the purpose of committing an offence	Theft of contents at the insured's premises using aggressive and violent means against the insured and/or employees	Intentional and fraudulent taking of property without permission or consent	3
308	Who is required to take motor insurance?	The person who sold the car	The person who last drove the car	The person in whose name the vehicle is registered with the Regional Transport Authority	The person who is currently driving the car	3

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
309	What must vehicle owners in India carry as proof of insurance?	A certificate of insurance	A driver's license	A registration certificate	A pollution control certificate	1
310	What is the purpose of Third-party insurance?	Protection against legal actions of another party	Protection against damage to one's own property	Protection against natural disasters	Protection against theft	1
311	Which of the following statements is true about Package Policies?	They don't cover physical assets such as buildings and contents.	They cannot include personal lines or liability covers.	They provide a combination of covers under a single document.	They have different terms and conditions for each section.	3
312	What happens if the policyholder chooses to take a stand-alone CPA policy?	The CPA cover offered as part of the Liability Only or Package policy shall remain in effect	The CPA cover offered as part of the Liability Only or Package policy shall be reduced	The CPA cover offered as part of the Liability Only or Package policy shall be deleted	The policyholder cannot opt for a stand- alone CPA policy	3
313	What are some of the important exclusions under the policies?	Wear and Tear, Breakdowns, Consequential Loss	Loss due to driving with invalid driving license or under the influence of alcohol	Use of vehicle not in accordance with 'limitations as to use '	All of the above	4
314	What does the sum insured of a vehicle in a Motor Policy refer to?	Motor Value (MV)	Insured's Declared Value (IDV)	Reinstatement Value (RIV)	Market Value (MV)	2
315	What does shopkeeper's insurance usually cover?	Damage to the shop due to insect infestation	Loss of income due to employee absenteeism	Damage to the shop structure and contents due to fire or flooding	Coverage for employee medical expenses	3
316	Which of the following is not an additional cover that can be opted for under a shopkeeper's insurance policy?	Personal accident cover	Infidelity/dishonesty of employees cover	Coverage for loss of stock due to spoilage	Legal liability cover	3
317	What is business interruption protection in shopkeeper's insurance?	Protection against shoplifting	Coverage for loss of income due to unexpected events causing interruption of business operation	Protection against natural disasters	Protection against employee theft	2
318	What is FLEXA in Householder's Insurance coverage?	Losses from fire, lightning, explosion, and aircraft fall/impact damage	Losses from flood and inundation	Losses from electrical and mechanical failure of appliances	Losses from personal baggage during travel	1
319	In Market Value (MV) method who is paid the amount does not replace value of property	Insured	Agent	Broker	Insurer	1
320	Any lost income or additional expenditure in the event of an unexpected claim are covered under:	Health Insurance	Shop keeper's insurance	Motor Insurance	Market Value (MV) Insurance	2
321	Compensation for accidents arising out of and in the course of employment is known as insurance for covering	Sum assured	Legal Liability	Baggage	Infidelity	2
322	Scooters & Motorcycles, Private cars and Commercial vehicles are covered under the following policies except	fire Insurance	Third-Party Insurance	Motor Insurance	Liability Insurance	1
323	does not cover theft by employees, family members or owner.	Consequential Loss Insurance	Burglary Insurance	Money Insurance	Bankers Indemnity Insurance	2
324	Which of the following movable and immovable properties can be insured under the Standard Fire and Special Perils Policy	Only buildings and plant and machinery	Only stocks at suppliers/ customer's premises	Both movable and immovable property located at a particular premises	None of the above	3
325	What is covered under the perils of the Fire policy for commercial risks	Riot strike and malicious damage	Theft	Earthquake	Life	1
326	What type of enterprises are Bharat Sookshma Policy and Bharat Laghu Policy suitable for	Small and Medium Enterprises (SMEs)	Large Business Enterprises	Both a) and b)	None of the above	1
327	What is the waiver provided under the Bharat Sookshma Udyam Suraksha policy	Waiver of premium payment	Waiver of policy coverage	Waiver of claim settlement	Waiver of underinsurance to the extent of 15%	4
328	What does a reinstatement value policy cover	Stocks	Buildings, plant, machinery, furniture, fixture, fittings	Both (a) and (b)	None of the above	2
329	What is the sum insured for a declaration policy based on	Market value	A fixed value determined by the insurer	The highest value expected to be stored in the godown during the policy period	The value of stocks at the beginning of the policy period	3

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
330	What are floater policies	Policies issued for covering stocks stored at various specified locations under one sum insured	Policies issued for covering stocks on market value basis	Policies issued for covering hazardous goods held in storage areas	Policies issued for covering industrial complexes only	1
331	What does Business Interruption Insurance provide indemnity for	Loss of gross profit and increased cost of working	Loss of merchandise goods	Loss of property damage	Loss of standing charges	1
332	What risks are covered under burglary insurance	Loss of property due to natural calamities	Loss of property due to employee negligence	Loss of property due to power failure	Loss of property following actual forcible and violent entry into the premises or loss followed by actual, forcible and violent exit from the premises or hold up	4
333	What is the key clause in the cash cover of the burglary insurance policy	Cash lost from the safe following the use of the original key to open is covered only where such key has been obtained by violence or threats of violence or through means of force	Cash lost from the safe following the use of the original key to open is covered without any conditions	Cash lost from the safe following the use of any key to open is covered	Cash lost from the safe following the use of any key to open is not covered	1
334	What is meant by PML in First Loss Insurance	Probable Maximum Liability	Probable Minimum Liability	Probable Maximum Loss	Probable Minimum Loss	3
335	What does Fidelity Guarantee Insurance cover against	Fire and theft	Natural disasters	Fraud and dishonesty of employees	Product liability	3
336	What is the basis on which Bankers Indemnity Insurance policy is issued	Discovery basis	Occurrence basis	Loss basis	Negligence basis	1
337	What are the items covered under Jeweler's Block Policy	Furniture and fixtures	Electronics and appliances	Jewellery, gold & silver articles, diamonds, precious stones, and wrist watches	Clothing and accessories	3
338	Which policy covers damage due to any cause except those specifically excluded	Machinery Breakdown Policy	All Risks Policy	Boiler Pressure Plant policy	Electronic Equipment Policy	2
339	Which of the following is covered under Boiler and Pressure Plant Policy	Damage, other than by fire, to the boilers and/or other pressure plant and to surrounding property of the insured	Damage caused due to fire	Damage caused due to natural calamities	Damage caused due to wear and tear	1
340	What does Electronic Equipment Policy cover	Only computer systems	Various kinds of electronic equipment, including the entire computer system, keyboards, monitors, printers, etc., and auxiliary equipment	Only auxiliary equipment such as air- conditioning, heating and power conversion	Only loss and damage due to burglary, housebreaking, and theft	2
341	Who is Electronic Equipment Policy available to	Only the owner of the equipment	Only the lessor of the equipment	Only the hirer of the equipment	All of the above, depending on their responsibility or liability	4
342	How many sections does Electronic Equipment Policy usually have	1	2	3	4	3
343	What kind of machinery is covered under the Contractors Plant & Machinery Policy	Machinery used in agriculture	Machinery used in the food industry	Machinery used in construction	Machinery used in the textile industry	3
344	Who is the Deterioration of Stock Policy suitable for	Cold storage owners and lessees	Building owners and lessees	Car owners and lessees	Boat owners and lessees	1
345	Which policy is suitable for the principal or contractors of a project whereas plant and machinery is being erected as it is exposed to various external risks	Contractors Plant & Machinery (CPM) Policy	Erection All Risks (EAR) Policy	Deterioration of Stock Policy	Civil Engineering Completed Risk	2
346	What is the Industrial All Risks Policy designed to cover	Only manufacturing facilities	Only storage facilities	Industrial properties - both manufacturing and storage facilities	Commercial properties	3
347	What does marine cargo insurance cover	Loss of goods during transit within the country only	Loss of goods due to sea misadventures only	Loss of goods during transit by road and sea only	Loss of goods during transit by rail, road, sea, air or registered post	4

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
348	Who can insure the cargo under marine cargo insurance	Only the seller of the goods	Only the buyer of the goods	Both the seller and the buyer of the goods, depending on the contract of sale	Only the carrier of the goods	3
349	Under which Act is liability imposed on those who handle hazardous substances	Public Liability Insurance Act, 1991	IRDA Act 1999	Insurance Act 1938	Income Tax Act 1968	1
350	What is the maximum compensation payable for temporary partial disablement under Compulsory Public Liability Policy	Rs. 25,000	Rs. 1,000 per month, maximum 3 months	Rs. 12,500	Rs. 3,000	2
351	What does Employee's Compensation Insurance provide indemnity for	Legal liability to pay compensation to third parties	Legal liability to pay compensation to employees who sustain personal injury by accident or disease arising out of and in the course of employment	Legal liability to pay compensation for damage to property	Legal liability for pollution liability	2
352	The earliest kind of risks to be handled through the concept of insurance was losses due to:	Train accidents	Road accidents	Misadventure at sea	Earthquakes	3
353	Insurance covers factories and shopping complexes.	Medical	Life	Commercial	Agricultural	3
354	For EAR Policies the Premium chargeable depends on the nature of the project, its cost and tenure, the location of execution and	The Nature of Goods	The Period of Testing	The Probability of Failure	The Apportioned Loss	2
355	The insurance which provides cover in respect of breakdown of machinery and contractors plant	Marine insurance	Universal health insurance	Hull insurance	Engineering insurance	4
356	Suggest a Class of Insurance, that will provide the Protection against Loss of Goodwill.	Life Assurance	Property Insurance	Liability Insurance	Personal Insurance	3
357	Under which type of policy is notice required to be served on the Railways?	Life insurance policies	Fire insurance policies	Marine insurance policies	Cargo rail transit policies	4
358	Who conducts the investigation to determine the cause and extent of loss if the claim amount is small?	An officer of the insurer	An independent licensed professional surveyor	A court of law	The insured	1
359	Why is an investigator's report sometimes necessary to assess a fire claim?	To determine the cause of the fire	To confirm the value of the insured property	To verify the insured's identity	To determine the insured's eligibility for coverage	1
360	Which of the following is NOT true about how motor insurance claims are assessed in India?	Motor third party claims involving death and personal injuries are assessed on the basis of doctor's report	Claims involving third party property damage are assessed on the basis of a survey report	Motor own damage claim is assessed on the basis of police report	The amount to be paid for third party claims is decided by factors like age and income of the claimant	3
361	What is the purpose of investigation in the context of insurance claims?	To assess the amount of loss or damage incurred	To ensure that a valid claim has been made and rule out any doubts about the claim	To determine whether a claimant has a good driving record	To decide whether or not to approve the claim based on the policyholder's past claims history	2
362	Who hires surveyors and loss assessors?	The policyholder		The government	The surveyors and loss assessors themselves	2
363	What regulations govern the work of surveyors?	The Indian Contract Act, 1872	The Consumer Protection Act, 1986	The Insurance Act, 1938, Insurance Rules 1939, and specific regulations issued by IRDAI		3
364	What is the maximum claim amount for which a surveyor need not be appointed under Section 64 UM of the Insurance Act?	For the claim more than Rs. 50,000 for motor own damage and Rs. 1 lakh for other property damage claims	Rs. 1 lakh for motor own damage claims and Rs. 50,000 for other property damage claims	Rs. 50,000 for all property damage claims	Rs. 1 lakh for all property damage claims	1

Sr.No	Question Body	Alternative 1	Alternative 2	Alternative 3	Alternative 4	Correct Alternative
365	How should an insurance company fulfill its promise to policyholders?	By providing unfair and inequitable service	By avoiding payment to policyholders	By providing prompt, fair, and equitable service	By increasing premiums for policyholders	+
366	What kind of report may be necessary for cyclone damage claims?	A report from the Meteorological office	A report from the Fire Brigade	A report from the Police	A report from the Coroner	1
367	Why is settling claims professionally important for an insurance company?	To avoid paying claims	To increase profits	To attract more policyholders	It is regarded as the biggest advertisement for the company	4
368	Which inscription was found in the board room of a non- life insurance company?	"Honesty is the best policy"	"We always pay our claims"	"Pay if you can; repudiate if you must"	"Insurance is a scam"	3
369	To apply for a claim, in case of damage caused by flood or cyclone, a report from would be necessary	Police Department	Meteorological Office	Fire Department	Surveyor/ Loss Assessor	2
370	A police report may not be needed in the following case	Damage by Cyclone	Damage by Fire	Damage In Road Accident	Damage In Transit	1
371	·	To settle claims of policy holders on the happening of a loss event	To settle balance of policy holders on the happening of a profit event	To settle sum amount of policy holders	To settle claims of policy holders	1
372	In case of Fire, claim is assessed on the basis of	An agent report	A police report	Survey report	Policy report	3
373	To Submit reports to an insurance company, the surveyors and Loss Assessors expected to a) examine the property in question b) Verify the causes and circumstances of the loss c) Estimate the quantum of the loss	Only Statement (a) is correct	Both (a) & (b) are correct	Both (a) & (c) are correct	(a), (b) and (c) are correct	4

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