

FIRE AND SPECIAL PERILS INSURANCE PROPOSAL FORM

1. Name of proposer:
2. Office address:
3. a) E-mail Address:b) Telephone number:
4. T.I.N NO:
5. Type of business:
6. a) Does proposer own the property to be insured? Yes No
- b) Does any bank or financial institution have an interest in the property to be insured? Yes No
- If so, please state:
- i. Name of institution:
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- ii. Extent of interest:
-
- c) Do you wish to assign the policy to the above institution? Yes No
7. Address or addresses of the premises to which the insurance is to apply.
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8. When would you like cover to start?
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9. a) Is cover required for (i) Fire only? Yes No
- OR (ii) Fire & special perils Yes No
- b) Do you also require "Burglary Cover" on the above-mentioned property? Please State Yes No

If so, please state the "FIRST LOSS LIMIT" required SCR.....

NOTE: "FIRST LOSS LIMIT" means the maximum amount which you presume a thief is likely to steal at any one time.

10. **SCHEDULE OF PROPERTY TO BE INSURED**
 (Please delete items not required)

SUM INSURED

On building(s) (value should be given for each building to be insured):	SCR.....
On outbuildings (if any):	SCR.....
On stock in trade consisting of:	SCR.....
On goods in trust or commission for which proposer is responsible	SCR.....
On furniture, fixtures, fittings and utensils in trade	SCR.....
On machinery and plant, tools in trade:	SCR.....
On office equipment	SCR.....
On raw materials or work in progress	SCR.....
On loss of rent (month (s))	SCR.....
On others (please specify).....	SCR
.....	SCR.....
TOTAL SUM INSURED	SCR.....

11. a) Description of premises, i.e. shop, office, factory, Warehouse etc.

b) Specify the outbuildings (if any) in respect of which insurance required, their construction and protections.

c) Is proposer sole occupier of the building? : Yes No
 If not, state which floor(s) occupied:

d) What trades are carried on in adjoining building?

12. How long has the proposer carried on business in this or other names?
 a) In the premises?
 b) Elsewhere?
 c) State other names previously used (if any)

13. a) Will the premises be unoccupied after business hours?.....
- b) If so, at what time?
14. a) Will the rest of the building to your knowledge be unoccupied after business hours?
- b) If so, at what time?
15. a) Can the occupiers of the residential portion (if any) enter the shop/ boutique/ office/ factory from the inside the building?.....
- b) Are the above premises closed at lunch time? Yes No
- c) If closed at lunch time, does a responsible person remain in the above premises or in a room communicating with the premises?
16. Are the premises protected by a burglar alarm? Yes No
- If so, give particulars
17. Has the proposer any fire extinguishing appliances? Yes No
- If so, please give brief description
18. State construction type of the:-
- a) External walls of the building
- b) Roof
- c) Ceiling
- d) Floor.....
19. Give details of protections, including types of locks, etc.
- a) Outer doors (including fanlights) and gates of buildings
- b) Ground floor windows
- c) Cellar flaps or other basement entries
- d) Skylights, roof doors or trap doors
- e) Proposer's show windows, if any, (state if inside grills are fitted and if windows are shuttered or otherwise protected during closing hours)
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20. a) How are the premises lighted?

.....

b) How are the premises cooled?

.....

21. a) Does proposer keep bound stock and sales books and / or ledgers? () Yes () No

b) If so, where are they, deposited when the premises are closed?

c) How often are they written up?

d) State the name of your auditors

e) How often is stocktaking carried out?

(Note: it is a condition of this insurance for stock in trade that stock and sales books and ledgers are removed from the business premises after closure of business or they are securely locked in a fire resistant safe / strong room.)

22. Has the proposal for similar insurance been? *(Please tick where appropriate)*

() Declined () Cancelled () Discontinued

() Agreed to continue only on special terms?

23. Has proposer ever sustained a loss or losses?

If so, please give brief particulars with date and amount of each.

24. Has proposer any machinery on the premises worked by electrical power? If so, for what is it used? Give brief description

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DECLARATION

I/We, in effecting insurance in accordance with the information provided in this proposal, declare and warrant:

- The statements in this proposal form are true.
- I/We have disclosed all matters which to my/our knowledge you should be aware of.
- In signing this form it does not bind the proposer to complete the insurance, but it is agreed that this form shall be the basis of the contract should a policy be issued.
- No insurance company has ever cancelled, declined or refused to renew or imposed special terms or cancelled any policy held by me/us.
- That I/We agree to accept the terms, exclusions, conditions and limitations of the Alliance Vehicle Insurance Policy.

Signature of Proposer:..... Date:.....