



ASSETS ALL RISKS – PROPOSAL FORM

PLEASE COMPLETE THIS FORM IN BLOCK LETTERS

1. FULL NAME OF PROPOSER: _____

2. ADDRESS: _____
3. OCCUPATION / BUSINESS: _____
4. TELEPHONE NO.: _____
5. EMAIL: _____

DETAILS OF THE PROPOSED INSURANCE

6. Physical Address of property to be insured _____

7. Nearest Landmark _____

PART A

8. Give details of the construction materials of your building(s).
(a) Walls _____
(b) Roof _____
9. Please indicate year of construction _____
10. State the use of the building (i.e. Warehouse, Factory showroom Offices etc)
11. _____
12. Is the tenancy multiple? Yes No
If yes, which part of the building do you occupy?

13. How are the external windows and doors secured?

14. For how long have you occupied the premises? _____



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PART B

15. Have you ever suffered any loss or damage to the property being insured?

Yes No

If yes, give details _____

16. Has any insurance company ever refused your proposal, cancelled or refused to renew your policy? Yes No

If yes, give details _____

17. Is the property proposed for insurance already insured with another Company?

Yes No

PART C

Provide the Values of the properties to be insured below.

SUM INSURED

18. The building including domestic offices, garage and outhouse _____

19. Wall, fences and gates _____

20. Stock-In-Trade: Raw Materials _____

Work In Progress _____

Finished Goods _____

21. Goods held in trust or commission _____

22. Office equipment, fixtures and fittings etc _____

23. Any other properties to be insured _____

24. Please indicate any extensions required:



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PERIOD OF INSURANCE

Insurance to commence on _____ 20 ____ to _____ 20 ____

DECLARATION

It is the duty of the proposer to disclose all material facts relevant to the risk. A material fact is one that is likely to influence our judgment and acceptance of your proposal. If your proposal is a renewal, it should include any change in facts previously advised to us. If you are in any doubt about facts considered material, disclose them. Please note that failure to disclose a material fact or if any information provided proves to be incorrect, we may void your policy and decline to pay any claim.

I/We declare that the statements and particulars made by me/us in this proposal are, to the best of my/our belief, complete and true and I/we agree that this proposal, together with any other information supplied by me/us, shall form the basis of the contract of insurance effected thereon.

I/We further declare and agree that if the statement and particulars above have been completed in the handwriting of any other person other than the undersigned, such person is deemed to be the representative of the proposer for the purpose of completing this proposal.

Signing this proposal form does not bind the INSURER to complete this insurance.

Date: _____ **Signature:** _____

Agent /Broker: _____