

AGENT/BROKER/DIRECT COVER NOTE NO.

PROPOSAL NO. POLICY NO.

1. Name of Proposer(s) in full

2. Postal address Postal code

Telephone - Office House Mobile

ID No./Certificate of Incorporation PIN No.

Fax Email

3. Occupation/nature of business

4. Geographical Area

5. Period of Insurance required from to

6. (a) Do the premises comprise: Private house Flat Chambers Apartments Boarding house

(b) Will the premises be occupied exclusively by the Proposer and family? Yes No

(c) How long has the proposer occupied the premises?

(d) Have the premises, to the proposer's knowledge, ever been broken into? Yes No

If 'Yes' give particulars

7. Are the premises left unoccupied regularly for business reasons or on other occasions except for holidays, shopping or visiting? Yes No

If 'Yes' give details

8. (a) Has the Proposer previously insured against Burglary, Theft or 'All Risks' or applied for such insurance? Yes No

(b) If so, with what insurers?

(c) Has any application for such insurance been declined? Yes No

If 'Yes' give particulars

(d) Has the renewal of any such insurance been refused or an increased rate demanded? Yes No

If 'Yes' give particulars

9. Has any loss been sustained by the Proposer or his family residing with him in respect of property similar to that now proposed for Insurance? Yes No

If 'Yes' give particulars

10. Do the articles set out in the Schedule represent the whole of the jewellery, personal gold and silver articles (such as cigarette cases, etc.) and furs of the Proposer and his family residing with him? Yes No

11. State how the values have been ascertained Professional Valuation Personal Estimate

SCHEDULE OF ARTICLES TO BE INSURED

A list of all articles to be insured is required with the value of each separately stated. Receipts or valuations for each article should be submitted so that copies can be taken.

Item Name	Date Acquired	Description	Value KShs.
Total			

The liability of Jubilee General Insurance Limited does not commence until the Proposal has been accepted and the premium paid.

DECLARATION

I/We desire to insure with Jubilee General Insurance Limited and I/We hereby warrant that the above statement(s) and particulars are true and complete and that nothing materially affecting the risk has been concealed by me/us and and I/We further agree that this Proposal shall be incorporated in and taken as the basis of the Proposed Contract between me/us and Jubilee General Insurance Limited, and I/We agree to accept a Policy in Jubilee General Insurance Limited's usual form for this class of insurance.

Date _____ Signature of Proposer _____

(Signing this Form does not bind the Proposer to complete the Insurance)

