



MONEY INSURANCE PROPOSAL FORM

PLEASE ANSWER EACH QUESTION FULLY – TICKS OR DASHES ARE INSUFFICIENT UNLESS THE QUESTION REQUIRES A DEFINITE 'YES' OR 'NO' RESPONSE.

Name of Proposer:

(If a partnership, give names of all partners)

Postal address : Physical Address:

Plot Number : District:

E-mail address : Telephone Number

Business/Occupation: Industry:

TPI Number: CO. Reg. Number: Date of Registration.....

Contact Person: ID NO: Phone Number:

Period of Insurance - From:/...../..... To:...../...../..... (Both dates inclusive)

1. What do you estimate will be the amount of:
- | | |
|---|----------------|
| "A" Cash, Notes and Open Cheques Postal Orders and Money Orders paid into the Bank (excluding cheques for drawing cash) | K |
| "B" Cash Notes drawn from the Bank | K |
| "C" Payments for the purchase of Postal and Money Orders and current Postage and Revenue Stamp | K |
| Total | K |
-

2. Amount to be insured for any one loss: K

NB: The amount insured would normally be the maximum sum ordinarily drawn from the bank for wages, etc plus other cash likely to be on the premises or the maximum amount taken to the bank, whichever is the greater.

3. Do you hold a Fidelity Guarantee Policy covering any of your employees who handle money? YES NO

If 'YES' who insures that policy

4. When your premises are closed for business, are all the keys of safes and strong room:
- | | | |
|--|-----|----|
| (i) in the personal custody of yourself or a responsible employee? | YES | NO |
| (ii) removed from the premises? | YES | NO |
-

5. Particulars of safes and strong-rooms containing money:-

| Item | Maker's Name | Cost when new | Age | Height | Width | Depth | Are safes built-in or fixed? | Proposed sum insured |
|------|--------------|---------------|-----|--------|-------|-------|------------------------------|----------------------|
| 1 | | | | | | | | |
| 2 | | | | | | | | |

6. Give particulars of previous losses of money:

.....

Has any proposal for this insurance been made previously?

| | |
|-----|----|
| YES | NO |
|-----|----|

If 'YES', to whom and with what result?

Do you have any outstanding Balances which the previous Insurer?

| | |
|-----|----|
| YES | NO |
|-----|----|

If 'YES', how much is the Balance?

7. Has any Company or Underwriter ever:

(a) Declined your Proposal?

| | |
|---------|----|
| (a) YES | NO |
|---------|----|

(b) Required an increased premium or imposed special conditions?

| | |
|---------|----|
| (b) YES | NO |
|---------|----|

(c) Refused to renew your Policy?

| | |
|---------|----|
| (c) YES | NO |
|---------|----|

(d) Cancelled your Policy?

| | |
|---------|----|
| (d) YES | NO |
|---------|----|

If 'YES' to any of the above, give full particulars:

.....

8. Describe routine and precautions taken in conveying money from the time it is handed to your messenger or Employee until delivered at its destination:

.....

In respect of wages, describe method of paying out:

State the nature of all safety precautions taken:

9. If insurance against personal injury to employees resulting from assault by bandits is required, state the maximum number of persons between the ages of 16 and 70 years engaged in carrying money at any one time.

.....

DECLARATION:

I / We, the undersigned, desire to effect insurance in terms of the policy to be issued by the company as above mentioned. I/ We agree to render at the end of each period of insurance a statement in the form required by the company of payments and withdrawals of money and to pay premium on any amount in excess of the total estimated above. I / We hereby declare that the above statements and particulars which I / We have read over and checked are true, that I / We have not suppressed, misrepresented, or mis-stated any material fact that I / We have fairly estimated my / our annual payments and withdrawals of money, and I / We agree that this proposal and declaration shall be the basis of the contract between me / us and the Company.

DATE:

SIGNATURE:

No liability is undertaken until this Proposal has been accepted by the Company except to the extent of any Official Cover Note issued by the Company.