

## PROPOSAL FOR FIRE INSURANCE

<b>AGENT:</b>	<b>POLICY NO.</b>
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**FULL NAME** .....

**FULL ADDRESS:** .....

**TELEPHONE No.** .....

**TRADE OR BUSINESS:**.....

<b>PERIOD OF INSURANCE:</b>	<b>From:</b>	<b>To:</b>
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1. Situation of Property to be insured and amount of Insurance required

a) On Building situated on \_\_\_\_\_.

Amount \_\_\_\_\_ (Kshs)

b) On Furniture and fittings therein \_\_\_\_\_.

Amount \_\_\_\_\_ (Kshs)

c) On Stock in trade therein \_\_\_\_\_.

Amount \_\_\_\_\_ (Kshs)

d) On Machinery and utensils therein \_\_\_\_\_.

Amount \_\_\_\_\_ (Kshs)

e) On Personal effects \_\_\_\_\_.

Amount\_\_\_\_\_ (Kshs)

Total\_\_\_\_\_ . (Kshs)

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You are to disclose in this proposal form, fully and faithfully all the facts that you know or ought to know, otherwise the policy issued hereunder may be void.

**DESCRIPTION OF PROPERTY TO BE INSURED**

1. Of what material are the external walls and roof of the building constructed?

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2. Does the building adjoin other buildings?

Yes       No

If so, describe them and state:

- (a) The construction of the dividing walls.
  - (b) Whether the dividing walls surpass the roof
  - (c) Whether there are any openings in the said walls
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3. If the building does not adjoin other buildings, what is the distance-separating it from the nearest building?

4. (a) What is the height of the building \_\_\_\_\_ . (I.e. the number of storey?)

(b) What is the age of the building \_\_\_\_\_ .  
(State the year of construction where possible).

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5. For what purposes are the premises occupied?

If any machinery is used in manufacturing purposes state the nature of such machinery.

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6. How is the building lighted?

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7. State the nature of stock and other contents of the premises (if any).

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8. Are there any Insurances on the same property in force with this or other insurance Companies?

Yes  No

If so, state the amounts and the names of the Companies.

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9. Has the insurance now proposed or any other insurance proposed by you been declined or canceled by any Insurance Company?

Yes  No

10. Have you ever had a loss by Fire? If so, please give particulars.

Yes  No

**Declaration**

I/We hereby declare that the particulars of this proposal are true, and I/We agree that the proposal shall be the basis of the contract between myself/ourselves and the GA Insurance Limited.

Date. \_\_\_\_\_ Signature of Proponent \_\_\_\_\_

**NOTE:**

***Liability does not attach unless and until the company has accepted this proposal and the premium paid, except as provided by any official covering note issued.***