

I. Windscreen & window glass - additional cover if breakage arises but no other PREMIUM CALCULATION
damage is sustained by your vehicle, claims will be accepted up to the limit any one claim
chosen without loss of no claim discount or deduction of any excess. KShs_____.

2. Has the Vehicle(s) been fitted with approved Anti-theft devices?

Yes No

If so attach Certificate of fitting.

3. Has the vehicle been modified altered or adapted or been fitted with any additional equipment to give
increased performance above the makers standards?

Yes No

If so give details.

4. Circle cover required:

Comprehensive I Third party fire & theft I Third party only/ Act only.

5. Is the vehicle your property?

Yes No

If not in whose name is the vehicle registered?

6. Are you the owner of the vehicle?

Yes No

If not, give name and address of owner of the Hire Purchase Company where applicable.

7. Has any Insurer in respect of yourself or any other person who will drive ever:-

(a) Declined a proposer or cancelled or refused to renew a policy?

Yes No

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

Yes No

(c) Required you or such person to carry the first amount of any loss?

Yes No

8. State whether to the best of your knowledge and belief, you or any other person who will drive:-

a) Suffer from defective vision or hearing or from any physical or mental infirmity.

Yes No

If so, state particulars

(b) Have been convicted of any offence in connection with the driving of any motor vehicle or have such prosecution pending ?

Yes No

If so, state date and nature of penalty.

9. (A) Have you ever made a claim under any Motor Vehicle Policy?

Yes No

If so, please give particulars.

(b) Have you ever met with any accident whilst driving a Motor Vehicle?

Yes No

If so, please give particulars.

10. Are you now or have you ever been insured in respect of any Motor Vehicle?

Yes No

If so, give name and address of insurers, their Policy Number and the Registration Number of the vehicle.

II. Are you entitled to a No Claim Discount?

Yes No

If so, please attach letter of confirmation from your previous Insurers.

12. (a) Will the vehicle be used for social, domestic and pleasure purposes?

(b) If not, state for what purpose it may be used:

(i) By- you for professional purposes

(ii) By you personally in connection with your own or your employer's business.

(iii) By employees or other parties in connection with your own or your employer's business.

(iv) For the carriage of samples or trade goods or farm requisites, produce or livestock?

(v) Do you undertake cartage for other persons?

Yes No

(vi) Will the vehicle be used for?

Hire

Reward

(vii) Are the passengers carried for?

Hire

Reward

(viii) For any other purpose

13. Is the vehicle kept in locked garage at night?

Yes No

14. Are there any accessories (other than standard) fitted on your car (vehicle /s)

Yes No

15. Will any trailer be used?

Yes No

If so, state number and type.

PARTICULARS OF ALL DRIVERS INCLUDING PROPOSER

16: This section must be full completed regardless of whether proposal is for Comprehensive or Third Party Cover.

Name.....

Occupation.....

Age.....

State.....

(A) license held is full or provisional and

(B) Period of driving experience Driving License No.

(C) Details of accidents and /or claims during past 3 years

TO BE ANSWERED ONLY BY PROPOSERS FOR MOTOR CYCLE INSURANCE

17. Will the motor cycle be used by only one person?

Yes No

If so, please state the person's particulars under section 15.

The attention of proposers for Motor Cycle Insurance is drawn to the fact that a motor cycle policy does not cover liability to pillion passengers.

DECLARATION:

I/We do hereby declare that the Vehicle described is and shall be kept in good condition and that the answers given above are in every respect true and correct. And I/We hereby agree that this Proposal and Declaration shall be the basis of the Contract of Insurance between the company and myself/ourselves. I/We agree to accept a policy of Insurance according to the above Proposal, subject to the terms, exceptions, and conditions to be expressed in and on the Policy and undertake to pay the premium when called upon to do so.

I/We undertake that the vehicle to be insured will not be driven by any person who to my/our knowledge has been refused any Motor Vehicle Insurance or continuance thereof.

Date. _____ **Signature of Proponent** _____

LIABILITY DOES NOT COMMENCE UNTIL THIS PROPOSAL HAS BEEN ACCEPTED BY THE COMPANY AND THE PREMIUM PAID, EXCEPT

AS PROVIDED BY ANY OFFICIAL COVERING NOTE ISSUED