



INTRA AFRICA ASSURANCE COMPANY LIMITED

(Incorporated in Kenya)

HEAD OFFICE

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BRANCH OFFICE

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PROPOSAL FORM – ALL RISK INSURANCE.

Agency Name: _____

SECTION 1 - BUSINESS DETAILS

a. Full Name of Propose _____

b. Pin number(Attach copy) _____

c. Certificate of Registration/Incorporation/ID/Passport _____
(Attach copy) _____

d. Contact details:

Mobile: _____

Email: _____

Postal: _____

Code: _____

Town/city: _____

Web: _____

Fax: _____

Tel: _____

E. Profession or Occupation _____

Section 2: PROPOSAL DETAILS

i. Period of insurance: From: _____ To: _____

PLEASE ANSWER EACH QUESTION

1. Have you ever been insured before? _____ Yes/No.

If yes, please give name of insurer _____

2. Are you currently insured for the type of cover proposed? _____ Yes/No.

If yes, please give name of insurer _____

3. Has any Insurance company or underwriter ever

A). Cancelled your Policy? _____ Yes/No.

B). Declined to insure you? _____ Yes/No.

C). Refused to renew your policy? _____ Yes/No.

D). Imposed any special terms? _____ Yes/No.

E). Repudiated any claim? _____ Yes/No.

If the answer to any of the above is yes, please give details.

4. Have you in the last three years suffered a loss in connection with the type of insurance now proposed? _____ Yes/No.

If yes, give details

A). Dates of loss _____

B). Amount of loss _____

C). Cause of loss _____

Name of Insurance Company with which the claim was made.

5. Is property belonging to members of your family permanently residing with you to be insured?

If "YES" give names and relationships

6. Are you at present insured under a Householders, Fire, Theft, or All Risks policy in respect of the contents of your residence?

If "YES" please state

a. Name of Company _____

b. Type of Policy _____

c. Amount Insured _____

7. Has your jewelry been examined recently by a jeweler? _____

If "YES" please state:

a. Name and address of jeweler _____

b. Date when last examined _____

8. Is photographic equipment to be insured? _____ Yes/No.

If "YES" is this used for business or professional purposes? _____

9. SCHEDULE

*Evidence of value required for items exceeding Kshs.10,000

Detailed Description of property to be insured	Value in Kshs.

DECLARATION

I hereby declare that all the statements and particulars entered in this proposal are true and I have not withheld any material information. I further declare that the amounts proposed for insurance represent the full value of the property described. I agree that this Declaration shall form the basis of the contract between me and the insurer and I agree to abide by the terms and conditions of the policy to be issued.

Agent _____ Date _____

Proposer's signature: _____