



# Commercial Vehicle (General Cartage) Proposal Form

## Intra Africa Assurance Company Limited

(Incorporated in Kenya)

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Agency name: \_\_\_\_\_

### 1. PROPOSER'S DETAILS (Whether BUSINESS or INDIVIDUAL)

Full name of proposer: \_\_\_\_\_

KRA Pin Number: \_\_\_\_\_ (please attach copy)

Certificate of Registration/Incorporation/ID/Passport: \_\_\_\_\_ (please attach copy)

### 2. CONTACT DETAILS

Website: \_\_\_\_\_ Email: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Code: \_\_\_\_\_ Town/City: \_\_\_\_\_

Tel Numbers: \_\_\_\_\_

Occupation: \_\_\_\_\_ DOB/Date of Business Inception: \_\_\_\_\_

Period of Insurance: From: \_\_\_\_\_ To: \_\_\_\_\_

### 3. VEHICLE (S) DETAILS

Registration Number	Make & Model	Type of Body & colour	Cubic capacity	Year of Manufacture	Engine Number	Chassis Number	Carrying Capacity	Proposer's estimated value (Including Accessories) in Kshs.

Log Book Number (s): \_\_\_\_\_ (Attach copies)

Are there any Special / non-standard accessories on the vehicle that will need to be separately insured at an additional premium? \_\_\_\_\_ Yes/No

Examples are Starter, Special Lights or Lamps, Roof Rack, Sunshade, Alloy Rims, Side Mirrors, Refrigeration Equipment, etc

If Yes indicate the type of each accessory and its value: \_\_\_\_\_

### 4. TYPE OF POLICY REQUIRED: (Please indicate from the 3 scopes)

**A. Comprehensive**

**B. Third Party Fire & Theft**

**C. Third Party Only**

### 5. ANTI-THEFT DEVICES

(i). Indicate the Type of Anti-Theft Devices fitted on the vehicle: \_\_\_\_\_

(ii). Are they in working condition: \_\_\_\_\_

**6. OWNERSHIP DETAILS**

(a) Are you the owner of the registered vehicle(s) \_\_\_\_\_ Are they registered in your name? \_\_\_\_\_  
If not, State Name and address of registered owners \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) State names and addresses of the Financiers (if any) who have an interest in the vehicles \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**7. NATURE OF GOODS / BUSINESS / TRADE FOR WHICH THE VEHICLE(S) WILL PRIMARILY BE USED**

**8. USE LIMITATION**

Will the vehicles be used exclusively for carriage of the goods or for business / trade indicated in 7 Above? \_\_\_\_\_  
If not, please indicate for what OTHER purposes it will be used:

- A. Carrying any other Goods for Hire and Reward? \_\_\_\_\_
- B. For Social, Domestic and Pleasure purposes? \_\_\_\_\_
- C. By you or your employees in connection with your own business? \_\_\_\_\_
- D. For carriage of samples of trade goods, farm produce, Live-stock, etc ? \_\_\_\_\_

**9. CLAIMS HISTORY:**

Has the vehicle suffered any loses or damages in the past, to the best of your knowledge? \_\_\_\_\_  
If yes, indicate dates, nature of loss, insurers and claim amounts involved \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10. ADVERSE RISK : HAS ANY COMPANY OR UNDERWRITER EVER:**

- (i) Declined your proposal? \_\_\_\_\_
  - (ii) Required an increase in premium or imposed condition? \_\_\_\_\_
  - (iii) Cancelled your policy at their behest? \_\_\_\_\_
  - (iv) Refused to renew your policy? \_\_\_\_\_
- If YES in any of the above, give details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**11. RESIDENCE / PLACE WHERE VEHICLE IS ORDINARILY GARAGED**

\_\_\_\_\_  
\_\_\_\_\_

	<b>PREMIUM ITEMS &amp; COMPUTATIONS</b>	<b>Amounts in Kes</b>	
1.	Comprehensive BASIC Premium (Including Riot & Strike, Special Perils) –		
	Third Party Fire & Theft BASIC Premium (Including Riot & Strike)		
	Third Party Only BASIC Premium		
2.	Own Damage No Blame No Excess 0.5% Minimum 5,000/=		
3.	Own Damage Excess Protector @ 0.5% - Minimum 5,000/=		
4.	Political Violence & Terrorism @ 0.5% - Minimum 5,000/=		
5.	Starter @ 10%		
6.	Windscreen Value above 30,000/= @ 10%		
7.	Radio Cassette Value above 30,000/= @ 10%		
8.	Alloy Rims @ 10%		
9.	Special Lights @ 10%		
10	Special Side Mirrors @ 10%		
11	Passenger Liability @ 2,500/= per seat		
12	Third Party Property Damage Limit above 5,000,000/= @ 10%		
13	Third Party Bodily Injury Limit above 3,000,000/= @ 10%		
14	Refrigeration Equipment @ 10%		
15	Roof Rack / Sunshade @10%		
16	Any Other (Specify)		
	<b>TOTAL BASIC / COMPANY PREMIUM</b>		
	<b>INSURANCE TRAINING LEVY</b>		
	<b>POLICY HOLDERS COMPENSATION FUND</b>		
	<b>STAMP DUTY</b>	40	
	<b>TOTAL</b>		

## 12. DECLARATION

I/We willingly desire to insure with Intra Africa Assurance Company Limited the items described in this proposal. I/We hereby warrant that the above statements and particulars are true to the best of my /our knowledge. I/We have not withheld, suppressed, misrepresented or misstated any material fact. I/We also agree that this declaration shall, save as varied by subsequent written instructions, form the basis of the contract between me/us and Intra Africa Assurance Company Limited.

Date: \_\_\_\_\_ Signature of Proposer(s): \_\_\_\_\_

**Cover does not attach until the proposal has been dully completed and accepted by the company. The company shall not be liable until the full premium has been paid, acknowledged and received by the company.**