



Follow the instructions bellow to complete this form:

1. Open this form with *AdobeAcrobat*.
2. Carefully fill in the form by clicking on the provided fields.
3. Don't input incorrect information, ask for assistance if you're uncertain.

For appending of signature;

4. Click on the signaturefield
5. Click *Configure New Digital ID*
6. Click *Create a new Digital ID* then click *Continue*
7. Click *Save to File* then click *Continue*
8. Save the form every time a digital signature is added.
9. Once you've completed the form, save and email or whatsApp it and the associated documents

Please attach the following documents after completing the form:

Need assistance?

Call or email us for quick assistance.

Mobile:

Email:

**FIRE & PERILS INSURANCE
PROPOSAL FORM**

M-PESA Paybill Business No: 100500 **Account No.** **Policy No.**

Agency / Broker:

Period of Insurance: From: To:

Name of Insured: S

Postal Address: Code: Town:

Email Address: Telephone: Mobile:

PIN No: ID/Passport No:

Name of Financier (If Any):

Location of The Premises/Business: Town: _____ Street: Plot No:

State details of the trade / Business carried out by the proposer:

State the usage of premises by the immediate neighbors:

State materials used in the construction of: (i) Walls (ii) Roof

Details and amounts of losses in the last 3 Years:

Name of previous Insurer(s):

Has any insurance company

- | | | |
|---|------|-----|
| a) Declined your proposal? | Yes: | No: |
| b) Cancelled or refused to renew your Policy? | Yes: | No: |
| c) Required an increased premium on renewal? | Yes: | No: |

If yes to any of the above, please give details:

SECTION B:**PROPERTY TO BE INSURED:**

PROPERTY INSURED	DESCRIPTION	SUM INSURED (KSHS)
1. Buildings		
2. Stocks comprising of		
3. Goods held in trust comprising of		
4. Furniture, fixtures and fittings		
5. Office equipment		
6. Machinery, business plant		
7. Rent Payable/Receivable (in the event consequential cover is needed)		
8. Political Risks and Terrorism		
9. Others (specify)		

If space provided above is not enough attach a schedule

DECLARATION

I/we hereby declare and warrant that the statements given over are true and that I/we have not suppressed or misrepresented any material fact and I/we undertake to use all necessary and proper precautions for the safety of the general public, and I/we agree if the premium be wholly or in part based on wages or other variable factor to keep proper record thereof and at the end of each period of indemnity to supply to the Company the correct statement of the requisite particulars for the purpose of adjusting the premium and to pay any consequent extra premium due, and I/we further agree that this proposal and declaration shall be the basis of the proposed contract between the company and Myself/Ourselves and that I/we accept the Company's policy subject to its terms, exceptions and conditions. Any error, omission, deliberate suppression and/or misrepresentation of material facts or incorrect statements will render this insurance contract null and void.

Proposers Signature/ Official Stamp:

Date:

FOR OFFICIAL USE ONLY**Premium Computation**

FIRE	
CONSEQUENTIAL LOSS	
POLITICAL RISKS & TERRORISM	
LEVIES	
TOTAL	

HEAD OFFICE: PIONEER HOUSE, MOI AVENUE

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FAX: 020-2224985

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