



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:

**MOTOR
COMMERCIAL
PROPOSAL FORM**

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

Period of Insurance: From: To: _____

Please select type of cover: THIRD PARTY THIRD PARTY/
FIRE & THEFT COMPREHENSIVE

Sum Insured:

SECTION A: PROPOSER'S DETAILS

1. Agency / Broker:

2. Name of Proposer:
Corporate name of the Company:

3. PIN No: ID/Passport No: Date of Birth: _____

4. Postal Address: Postal Code: Town: _____

5. Telephone Number: Mobile Number:

6. Email Address: Occupation:

7. Residence: Name of Financer (if any):

8. Driving License No: Driving Experience:

9. Driving License Date of Issue:

10. Details and amount of losses in the last 5 years:

11. Are you entitled to any No Claim Discount (NCD)? Yes: No: If yes, attach evidence
Name of Previous Insurer(s):

12. Has any insurance company:

a) Declined your proposal? Yes: No:

b) Cancelled or refused to renew your policy? Yes: No:

c) Required an increase premium on renewal? Yes: No:

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

13. Are you currently insured by PACL under any other Cover/Policy? Yes: No:
If Yes, please give details

14. Is the vehicle registered in your name? Yes: No: If No, give details

15. Is the vehicle used for;
a) Social, domestic and leisure purposes? Yes: No:
b) Carriage of goods or passengers for hire or reward? Yes: No:
c) Carriage of goods in connection with your own or employer's business? Yes: No:
If Yes for b) or c) give details

16. Will the vehicle be driven by other drivers other than the proposer? Yes: No:
If yes, provide names of these other drivers including driving experience.

Name of other driver(s)	Years of driving experience
i)	
ii)	
iii)	

In the event of an accident while the vehicle is under the care of a young and inexperienced driver, additional excess will be applicable as per the policy.

17. Is any anti-theft device installed? Yes: No:
(Attach copy of certificate)

SECTION B: MOTOR VEHICLE(S) DETAILS

Registration Marks	
Log Book Number	
Seating Capacity	
Engine No.	
Chassis No.	
Type of Body	
Colour	
CC	
Year of Manufacture	
Make & Model	

