



BURGLARY INSURANCE PROPOSAL

(BUSINESS PREMISES)

CORPORATE INSURANCE COMPANY LIMITED

HEAD OFFICE: INTERNATIONAL LIFE HOUSE, 8TH FLOOR, MAMA NGINA STREET
P.O. BOX 34172, 00100 – NAIROBI, KENYA TEL:020 7658000; 0728700093

EMAIL:info@cickenya.com, WEBSITE: www.corporate-insurance.com

MOMBASA BRANCH: CORPORATE HOUSE, MVITA ROAD, OFF TREASURY ROAD
P.O. BOX 99397, 80107 – MOMBASA, KENYA TEL:041-2225190229231, FAX:041-2222383

KISUMU BRANCH: MEGA PLAZA, 3rd Floor - Wing B
P.O. BOX 3596, 40100 – KISUMU, KENYA TEL 057-2025703,
EMAIL: kisumu@cickenya.com

AGENCY _____ POLICY NO _____

Period of Insurance

From _____ To _____

Name of Proposer in Full _____ Tel No. _____

(Block Letters, please)

Postal Address. _____

(Block Letters, please)

Occupation _____

| | | | |
|-----------------------------------|----------|------|------|
| Address of premises | Plot No. | Road | Town |
| containing property to be insured | | | |
| _____ | | | |

| | | | |
|---------------|--------|-------|-----------------|
| Construction: | Walls: | Roof: | No. of Storeys: |
| _____ | | | |

Full description of the property to be insured

Unless otherwise arranged the sum to be insured under A and B must represent full value of the property as claims are settled in the proportion that the sum insured bears to the full value at the time of the loss.

A. Stock in trade belonging to Proposer consisting of

| | Sum to be insured |
|---|-------------------|
| | |
| | |
| | |
| | |
| Maximum value of any single article | |
| B. Goods in trust or on commission for which Proposer is responsible consisting of | |
| | |
| | |
| Maximum value of any single article | |

| | |
|---|--|
| C. Business furniture, fixtures, fittings, plant and appliances belonging or for which Proposer is responsible. | |
| Total | |

1. Total sum for which the property described overleaf
Is insured against fire and explosion

2. a) Nature of premises containing the property
whether shop, factory workshop, ware house or offices

b) How long has Proposer occupied the premises? _____

c) To what extent will the premises be left
without a responsible person therein? _____

d) Are the premises guarded by a watchman? _____ (i) during the day _____ . During the
night _____ .

3. Will a complete record of the stock received and sold be kept?
If not how would the exact amount of loss be ascertained? _____

4. Have thieves ever entered or attempted to enter any premises
occupied by proposer _____

If so, give details stating when, how access was obtained, the extent of the loss and the steps taken to
prevent another entry _____

5. State how the following are secured giving make of locks if possible
a) Outer doors _____

b) Front windows _____

c) Trap doors and skylights _____

6. Is any alarm system fitted? If so, give details and state which
parts of the premises are protected _____

7. A) Will articles of value be secured in a safe
when the premises are closed?

B) What will be the maximum value of any single
article left out of the safe? _____

C) Give following details of the safe

- i) Name of maker and date of manufacture _____
- ii) Cost price and weight _____
- ii) Whether thief resistant _____
- iv) Position (State if and how fixed to the structure of the premises) _____
- v) The number of sets of keys and into whose custody they are entrusted _____

8. Has proposer previously insured against Theft or All Risks?

If so, give details, including name of insurers _____

9. Has proposer ever made a claim for theft or fire

In respect of property in these or any other premises?

If so give details _____

10. Has any insurer in respect to the risks to which this proposal relates ever

- | | |
|---|--|
| a) Declined a proposal, refused renewal or terminated an insurance? | b) Required an increased premium or imposed special conditions |
| c) | d) |

If so, give details

Special note for the purposes of this insurance. Theft means theft accompanied by an actual forcible and violent entry into or exit from the premises

Declaration

I/We warrant that the above statements made by me/us or on my/our behalf are true and complete and we agree that this proposal shall be the basis of the contract between me/us and the company. I/we agree to accept a Policy in the Company's usual form for this class of insurance.

Signature: _____ Date: _____

