

Address: 6th Floor, Blueridge North Eastgate Shopping Centre Harare, Zimbabwe

PROPOSAL FORM

COMPREHENSIVE MOTOR TRADE

Please Note

- 1. Please answer **ALL** questions in full. If there are insufficient spaces on the form please continue on the company letterhead.
- 2. The latest audited Financial Statements / Annual Report / Interim Report MUST be attached.
- 3. This form may be used for new applications or new renewals. In the case of renewals, the underwriters **MUST** receive a completed, signed and dated proposal form, financials/reports and acceptance of renewal terms prior to renewal date, failing which, no cover exists after said date.
- 4. It is the intention of underwriters that any Contract of Insurance with the Proposer shall be based upon the information provided in this Proposal Form as well as any attachments included. If a quotation is offered, it will be the intention of the underwriters to offer cover ONLY in respect of the entities named under Particulars of Proposer.

(No insurance is in force until the Proposal has been accepted by the Company and the premium paid, except as provided by an official Covering Note issued by the Company)

If SKYBRIDGE RE agrees to issue a comprehensive motor trade insurance policy, all of the information, which the company provides, will become part of and shall form the basis of any policy issued to the Company by Skybridge Reinsurance Brokers.

SECTION 1 – PROPOSER'S DETAILS

Name Of Proposer Principal Address	
Postal Address	
Contact Person	
Phone Number	
Fax Number	
Cell Number	
E-Mail Address Website	
Type Of Organisation	
VAT Number	
Date Established	
Principal Activities	



SECTION 2 – THE SUMS PROPOSED FOR INSURANCE (INTERNAL RISK)

Please state the currency you wish to be insured in

S	5/N		/alue ()	
	1	Total Value of Stock In the Garage		
_	2	Average Value of the vehicle		
	3	Other items to be Insured		
		Total		
1.	Are st	ock and sales book maintained?	⊡Yes ⊡No	
	How frequently are these entered? Please state:			
3. I	How o	ften is stock taken? Please State:		
4	A/I= = ==	and there is a locate out of housing and house?		
4.		are these books kept out of business hours?		
5. I		you ever proposed for insurance in respect of burglary, theft with any	□Yes □No	
	compa			
		ny such proposal been declined, withdrawn or accepted with an increased	J ⊡Yes ⊡No	
		special condition?		
	•	u the sole occupier?	□Yes □No	
8. I	If not v	what other tenants are there in the same building		
 0 I		ong have you occupied the above premises?		
		ing have you occupied the above premises:		
		at materials are the premises constructed?		
		·		
11. /	Are th	e valuables secure in safe(s) outside business hours?	□Yes □No	
12. /	Are gla	ass panels on the front door or is there a fanlight?	□Yes □No	
13. I	Is ther	e any security arrangement during the day and/or during the night?	□Yes □No	
14. I	ls mar	ufacturing of any kind carried on in any part of the above premises or	□Yes □No	
á	adjoin	ng buildings?		
15. I	lf so, h	now are the premises cut from the business portion of the premises?		
		e premises be at any time unoccupied?	□Yes □No	
17.	It so, f	or how long?		
18	Δre all	locks bolts and fastenings in a good state of repairs?		
		you ever suffered loss or damage by burglary housebreaking?		
			□Yes □No	
	n so, g occurr	pive details mentioning what precautions have been taken to avoid		
21.		was the amount and against what company		

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SECTION 3 – EXTERNAL RISK

1. Has any person who may drive:		y person who may drive:
	a)	Possess a driving licence?
	b)	For how long?
	c)	Ever been convicted for traffic offence?
2.		y insurer ever: Declined your proposal?
	b)	Required you to bear the first portion of any loss?
	c)	If so, how much?
3.	What is	the:
	a)	Limit per vehicle in transit
	b)	No of vehicles per transit
	c)	Frequency of Transit



DECLARATION

I/We declare that the above statements are true and complete.

At the present time, other than as stated above, I / We have no reason to anticipate any claim being brought against me/s that would constitute a claim under the insurance now being renewed or applied for.

I/We declare that in the event of this being a renewal of a policy, there have been no material alterations to the risk as submitted to the underwriter originally, and if a new application that all material facts have been disclosed.

I/We agree that this declaration shall form, together with the proposal form, the basis of the contract between me/us and the Insurers, and that I/We are properly authorised to sign this declaration.

Full name:

Capacity:

Signature:

Date: