



OCCIDENTAL INSURANCE COMPANY LIMITED

Crescent Business Centre, 7th Floor, Parklands Road, Parklands,

P.O. Box 39459-00623, Nairobi, Kenya,

Tel: 0709-896000, 020-2362602, 0734-600485.

E-Mail: enquiries@occidental-ins.com

Website:www.occidental-ins.com

BURGLARY INSURANCE PROPOSAL FORM

Agency _____ Account Number _____ Client No _____

All questions must be answered in full. Please use block letters or tick as Appropriate.

A. PARTICULARS OF PROPOSER

Individual Applicants:

Name of Proposer: Surname _____

Middle Name: _____

Other _____

Corporate Applicants:

Name/s _____

Contact Persons _____

B. PROFESSION /OCCUPATION _____

Postal Address: P. O Box _____ Code _____

Town _____

Contact: Telephone Number/s _____

Fax Number _____

Email Address _____

PIN Number. _____

Period of Insurance : From: To..... (both dates inclusive)

C. FINANCIERS INTEREST IF ANY _____

D. PHYSICAL ADDRESS AND OCCUPANCY

1. Location of premises: Building _____

Street/Road _____ Plot No. _____

Town _____

2. What is the nature of construction of the following

External walls _____ Internal walls _____

Roof _____ Ceiling _____

3. Are you the sole occupant of the Premises? Yes/No

If not, what other occupants are there?

4. How long have you occupied the Premises?

5. Will the premises be left unoccupied at any time? Yes/No

If yes, please explain

E. SECURITY ARRANGEMENTS

1. Who is responsible for the security arrangements?

2. What security arrangements are in place? (Tick appropriate option/s)

a) Own Watchman

b) Security Guards Firm

c) Burglar Alarm

d) Any other (Please specify)

3. If you engage a Security Guard Company state the name of the firm.

4. How have you secured:

a) Windows? _____

b) Show windows? _____

c) Front Door/s? _____

d) Rear Entrance? _____

e) Sky Lights ? _____

f) Trap doors? _____

g) Others ? Please specify _____

F. INSURANCE/CLAIMS HISTORY

1. Are you now or have you been Insured for this type of Insurance?

Yes/No

If yes, please give name of Insurer and Policy Number

2. Have you ever suffered a loss by theft ?

Yes/No

If yes state;

a) Date of Loss? _____

b) Extent of Loss? _____

c) What precautions have been taken to prevent another loss?

3. Have you taken out Fire Insurance cover for the proposed premises? Yes/No

(It is mandatory that Burglary and Fire policies run concurrently)

4. Do you require the following extensions to your Policy?

1. Hold up cover YES/NO

2. Riot and strike YES/NO

5. Has any Insurance Company ever;

a) Cancelled your Policy? YES/NO

b) Declined to insure you? YES/NO

c) Declined to renew your Policy? YES/NO

d) Imposed any special terms? YES/NO

e) Repudiated any claim? YES/NO

If the answer for any of the above reasons is 'YES', please give details.

G. BUSINESS RECORDS

a) Do you keep proper Books of Accounts records? Yes/No

b) Are the Stock books and Sales books updated regularly Yes/No

c) Can the amount of loss be ascertained from them ? Yes/No

d) When was the last physical Stock taking done?

If you don't maintain stock records, describe how you would verify the amounts of goods stolen in case of a burglary. _____

H. SCHEDULE – PARTICULARS OF PROPERTY TO BE INSURED

NB- If property is contained in two or more buildings the sum to be Insured in each building must be specified.

Description	Sum Insured

DECLARATION

I/We do hereby declare that the above answers are true to the best of my/our knowledge and belief and that I/We have not withheld any information whatever regarding the proposal. I/We agree that the declaration and the answers given above shall be the basis of the contract between me/ us and Occidental Insurance Company Limited.

Signature of Proposer _____ Date _____

(Note: This proposal shall be completed and signed by the proposer.)