



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

ALL RISKS INSURANCE PROPOSAL FORM

**This proposal shall be completed and signed by the proposer.
All questions must be answered in full. Please use block letters or tick as appropriate.**

Agency _____ Account Number _____

A.PARTICULARS OF PROPOSER

Individual Applicants:

1. Name of Proposer: Surname _____ Other names _____

Identity Number: _____

Corporate Applicants:

Name _____

2. Business/ Occupation _____

3. Contacts and Postal Address:

P. O Box _____ Postal Code _____ Town _____

Telephone Number/s _____ Mobile No. _____

Fax Number _____ Email Address _____

PIN Certificate Number (please attach a copy) _____

B. PARTICULARS OF INSURANCE

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

And any subsequent period for which the Insured shall pay and the
Company shall accept to renew.

OFFICE CONTENTS

Category A

Fixed office items and other equipment

Category B - Portable equipment (These include Laptops, Video Cameras,
Projectors, photographic equipment, electronic equipment and any other
items which are used outside the premises)

Category C – Any others

List the items for which insurance is here proposed and their respective
values and complete the table below.

Please provide the maker’s serial and model numbers in the table below
where available.

Category	Full description of Item	Model	Maker's Serial Number /Model	Value (Kshs)	Territorial Limits
Total					

C. INSURANCE AND LOSS HISTORY

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

Yes/No

If yes, give name of Insurer and Policy Number _____

2. Have you ever suffered a loss for insurance now proposed? _____

Yes/No If yes state; Date

of Loss _____

Amount of Loss _____

3. What precautions have you taken to prevent a similar or any other loss occurring? _____

4. 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) Declined any claim? _____ YES/NO

If the answer to any of the above is 'YES', please give brief details below.

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 _____

The liability of the Company does not attach until the proposal has been accepted and the premium paid.