



CONSEQUENTIAL LOSS PROPOSAL FORM

AGENT/BROKER/DIRECT COVER NOTE NO.

PROPOSAL NO. POLICY NO.

1. Name of Proposer(s) in full

2. Postal address Postal code

Telephone - Office House Mobile

ID No./Certificate of Incorporation PIN No.

Fax Email

3. Nature of business

4. Location(s) of ALL premises to which the insurance is to apply

5. Nature of process carried on therein

6. Amount to be insured

	Sum Insured (KShs.)
(i) Net profit	<input type="text"/>
Charges:	
(ii) Rent, rates, taxes	<input type="text"/>
(iii) Interest on:	
Debentures	<input type="text"/>
Mortgages	<input type="text"/>
Loans	<input type="text"/>
Bank overdrafts	<input type="text"/>
(iv) Director's fees	<input type="text"/>
(v) Auditor's fees	<input type="text"/>
(vi) Travelling expenses	<input type="text"/>
(vii) Salaries to permanent staff	<input type="text"/>
(viii) Wages to skilled employees	<input type="text"/>
(ix) Insurance premium	<input type="text"/>
(x) Advertising	<input type="text"/>
(xi) Depreciation of buildings, plant and machinery	<input type="text"/>

7. Period of insurance required from to 4.00 p.m. on

8. Are your books regularly audited? Yes No

If 'Yes' state how often, and give the name and address of you auditor

9. Do you require this insurance to include loss of profit through

(a) Fire occasioned by explosion? Yes No

(b) Explosion (direct loss, including fire)? Yes No

(c) Riot and strike? Yes No

Note: Cover cannot be given against these hazards unless your Fire Policy covers have been similarly extended.

10. Do you require this insurance to extend to include loss of profits arising from 'damage' (as defined by the Policy) to premises other than those occupied by yourselves? Yes No

11. Have you at present any insurance covering loss of profits and standing charges? Yes No

If 'Yes' give details

12. What is the total amount of the annual fire insurance with all companies on the contents of the premises to which this insurance is to apply (excluding dwelling houses, offices and stables)?

KShs.

13. What is the total net annual premium paid in respect of such insurance(s)? *KShs.*

14. What is the name of the fire insurance company having the largest share of such insurances?

15. Has any Proposal made by you for fire insurance or loss of profits or standing charges ever been declined, cancelled or withdrawn? Yes No

If 'Yes' give details

16. Have you, either personally or in conjunction with other persons, ever been a claimant on a fire insurance policy or sustained any loss of property by fire? Yes No

If 'Yes' state when, and the name of the insurance company

17. State the period in years that this business has been in existence as a going concern

18. Basis of comparison: Is the insurance to be based upon a comparison with the last financial year? Yes No

If not, what basis is suggested?

19. Building owned by

The liability of Jubilee General Insurance Limited does not commence until the proposal has been accepted and the premium paid.

DECLARATION

I/We hereby apply for an insurance (subject to the current conditions of Jubilee General Insurance Limited's Policies) against loss of net profits sustained and standing charges incurred, limited to a period of consecutive calendar months following each fire that may occur, through reduction of my/our turnover and increase in cost of working necessarily incurred to continue the business due to or arising out of fire in my/our premises, situated as herein, for the amount set out hereunder, and I/We agree that this Proposal shall be the basis of the contract between Jubilee General Insurance Limited and myself/ourselves.

Date _____ Signature of Proposer _____