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ASSETS ALL RISKS INSURANCE PROPOSAL FORM

FULL NAME OF PROPOSER:.....

ADDRESS:.....

OCCUPATION/ BUSINESS:.....

TELEPHONE No.:..... FAX No.:.....

Give details of situation or Location of property to be insured:.....

.....
.....

PART "A"

1. Construction of Building: **a. Walls**.....

b. Roof.....

2. State the nature of occupation/ business engaged in the building, whether Ware-
house, Factory, Showroom, Offices, etc:.....

3a. Is it a multiple-tenancy occupancy?.....

3b. If the premises form part of a building, which part of the building do you occupy:..
.....

4. How are the external windows and doors secured?.....
.....

5. For how long have you occupied the premises:.....

PART "B"

6a. Have you ever suffered any loss or damage by Fire or Burglary?.....

6b. If so give details:.....

7. Has any Insurance Company ever refused your proposal, cancelled or refused to
renew your policy?.....

8. Is the property proposed for insurance already insured with another Company?...

.....
 9. Do you have an existing insurance policy with GLICO GENERAL Insurance Company?.....
 If so, what Class/Classes of Insurance?.....

PART “C”

Provide the Values of the properties to be insured below.

- 10. The building, including domestic offices, garage and outhouse ₪.....
- 11. Stock-in-Trade ₪.....
- 12. Goods held in Trust or commission ₪.....
- 13. Office Equipment and Machinery ₪.....
- 14. Furniture, Fixtures and Fittings ₪.....
- 15. Stationery ₪.....
- 16. Any other properties to be insured ₪.....

Kindly provide a Specified List of Items to be covered under items 11 – 16.

I/ We warrant that all the statements made above are true and that I/ We have not with-held or concealed anything affecting the proposal. I/ We also agree that this proposal shall be the basis of the Contract.

Signature of Proposer:..... Date:.....

Broker/Agent:.....