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PROPOSAL FOR PUBLIC LIABILITY INSURANCE

Name of Proposer in full).....

Business Address.....

Business of Proposer:.....

| Operations of work people engaged in your business | Number of work people | Annual Wages estimated to be paid to such workpeople (including working Director and partner) | Addresses of all Premises occupied or used by you in connection with your |
|--|-----------------------|---|---|
| | | (a) for work on your premises ₵..... (b) for work away ₵..... | |

1. (a) Do you let sublet any portion of any of the premises?
 (b) If so, please give particulars

2. (a) Do you engage in work away from the premises?
 (b) If so state general nature of such work

3. Please give details of: -
 (a) All power operated lifts, hoists and cranes
 (b) Mechanical plant (other than fixed machinery).....
 (c) Number of cycles
 (d) Explosives, radio active materials and hazardous processes used in connection with your business

4. Are your premises in a good state of repair and are all plant in serviceable Condition?

5. Do you sublet work to other contractors; if so please state: -
 (a) Nature of work sublet
 (b) Estimated amount of payments to sub-contractors

6. Do you wish to insure your liability in respect of goods sold or supplied?
 If so, please state nature of goods and estimated annual turnover?

7. If previously Insured against Public Liability risks, please state name Of Insurance Company

8. Have you ever had insurance of this nature declined or cancelled or Subjected to any special conditions by an Insurer?
 If so, please give details

9. Give particulars of all claims made on you during the last five years ...

10. Please give details of: -
- (a) All power operated lifts, hoists and cranes
 - (b) Mechanical plant (other than fixed machinery).....
 - (c) Number of cycles
 - (d) Explosives, radioactive materials and hazardous processes used in connection with your business
-

11. Are your premises in a good state of repair and are all plant in serviceable Condition?

12. Do you sublet work to other contractors; if so please state: -
- (e) Nature of work sublet
 - (f) Estimated amount of payments to sub-contractors
-

13. Do you wish to insure your liability in respect of goods sold or supplied?
If so, please state nature of goods and estimated annual turnover?

14. If previously Insured against Public Liability risks, please state name of Insurance Company

15. Have you ever had insurance of this nature declined or cancelled or
Subjected to any special conditions by an Insurer?
If so, please give details

16. Give particulars of all claims made on you during the last five years ...

| INDEMNITY REQUIRED | BODILY INJURY | PROPERTY DAMAGE | |
|-------------------------------|--------------------------|----------------------------|-------------|
| ANY ONE: ACCIDENT | | | Premium GH¢ |
| ANY ONE: YEAR | | | |

I/We declare that the above answers are true and agree that this proposal shall be the basis of the Contract between me/us and the GLICO GENERAL INSURANCE CO. LTD. I/We agree to accept a Policy in the usual form issued by the Company for this class of Insurance, and I/We agree to tender at the end of each period of insurance a statement of all wages actually paid, and to pay any additional premium on any wages paid in excess of the amount estimated above.

DATE

SIGNATURE OF PROPOSER