



Answers  
in block

Letters, please

**PROPOSAL FOR INSURANCE AGAINST FIRE**

FULL NAME OF PROPOSER .....

ADDRESS .....

OCCUPATION or BUSINESS ..... TELEPHONE/E-MAIL.....

NATIONALITY ..... (if not Ghanaian)

SITUATION of Property to be insured:

(i) Plot / House No. .... (ii) Name/No. of Street .....

(iii) Name of Suburb/Locality ..... (iv) Name of Town/City .....

CONSTRUCTION: - walls of .....

Roofed with .....

**SUM TO BE INSURED**

1. **THE PURPOSE OF BUILDING:** Residence/Office/Shop/ Factory/Warehouse/Other (**Please Tick**) GH ₵
    - a) Where there is more than one building, please indicate separate values for each
    - b) Is the Building Detached with an Outhouse / Semi-Detached / Flat / Storey?
    - c) If Storey, state the number of Storeys
    - d) If building is under-construction, please indicate
    - e) If building is fenced, please indicate GH₵
  2. **CONTENTS INCLUDING HOUSEHOLD GOODS AND PERSONAL EFFECTS** of every description, the property of the Proposer or permanently resident members of the family and of servants in the above dwelling ..... GH ₵
 

Note: Any article (furniture, pianos and organs excepted) which exceeds in value 5% of the Amount must be specified below and insured separately.
  3. On **Stock-In-Trade** consisting of ..... GH ₵
  4. On **Fixtures, Fittings** and Utensils in Trade ..... GH ₵
  5. On **Plant and Machinery** therein ..... GH ₵
  6. Other Property to be insured ..... GH ₵
  - ..... GH ₵
- TOTAL GH ₵** \_\_\_\_\_

7. Has the Proposer ever suffered loss or damage by fire or burglary?  
If so, give details.

8. Has any Insurance Company or Underwriter ever refused a Proposal from you or cancelled or refused to renew a Policy? If so, state name of Company concerned.

9. Is the property proposed for insurance already insured with another Company?  
If so, give details.

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Insurance to commence the ..... 20 ..... for a period ..... months ending the ..... 20.....

***Note: The information furnished in the replies to the above questions will constitute the basis of the insurance and will regulate the rate of the premium. The responsibility of the Company does not commence until the proposal is accepted and cover note issued on payment of the agreed premium.***

Date ..... Signature .....

Agent's recommendation. I have known the proposer, .....

for ..... years and recommend the acceptance of the risk proposed for insurance.

Date ..... Signature of Agent ..... No.....

