



Commercial Vehicle Proposal Form

CIC INSURANCE GROUP LIMITED

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M-Pesa Business No. 600111

AGENCY / BROKER

SECTION A: PROPOSER'S DETAILS

1. NAME OF PROPOSER:
LAST NAME OTHER NAMES

2. PIN NO: ID/PASSPORT NO

3. POSTALADDRESS: CODE: TOWN:

4. EMAILADDRESS: FAX NO:

5. TELEPHONE: MOBILE:

6. RESIDENCE:

7. OCCUPATION/PROFESSION:

8. NAME OF FINANCIER (IF ANY):

9. DRIVING EXPERIENCE:

10. DATE FIRST LICENCE ISSUED:

11. Details and amounts of losses in the last 5 years:

12. Are you entitled to any No Claim Discount? (NCD) Y N If yes, attach evidence

13. Name of previous Insurers

14. Has any insurance company

a) Declined your proposal? Y N

b) Cancelled or refused to renew your Policy? Y N

c) Required an increased premium on renewal? Y N

If yes to any of the above, please give details

SECTION B: MOTOR VEHICLE(S) DETAILS

Please fill in

| Registration Marks | Make & Model | Year of Man. | Tonnage | Colour | Insured's Estimate of value | Type of body | Chassis No | Engine No | No of passen- gers | Log Book No. | Comprehensive, Third party fre & theft or Third party only |
|--------------------|--------------|--------------|---------|--------|-----------------------------|--------------|------------|-----------|--------------------|--------------|--|
| 1 | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
| 3 | | | | | | | | | | | |
| 4 | | | | | | | | | | | |
| 5 | | | | | | | | | | | |

Indicate Extra Benefits Required (additional premium may apply)

| Registration Marks | Riots & Strikes | Windscreen | Audio System | Passenger legal Liability - indicate number of passengers |
|--------------------|-----------------|------------|--------------|---|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

1. Is the vehicle registered in your name? Y N

If no, give details

2. Is the vehicle used for;

- a) Carriage of own goods? Y N
- b) Carriage of goods for hire or reward? Y N
- c) Carriage of passengers NOT for hire or reward? Y N
- d) Carriage of passengers for hire or reward? Y N
- e) Carriage of goods of an inflammable nature? Y N

3. Is any anti-theft device installed? Y N

(Attach copy of certificate).

NOTE : That if no operational anti theft device is fitted, theft cover will not attach .

Period of Insurance: From: To:

DECLARATION

I/We do hereby declare that the above answers and statements are true, and that I/we have withheld no material information regarding this proposal.

Date:

Signature of Proposer
Rubber Stamp/Seal

FOR OFFICIAL USE ONLY

Are these documents attached?

- a) Copy of log book Y N
- b) Copy of anti theft certificate Y N
- c) NCD letter Y N

Premium Computation:

| | |
|---------------------------|--|
| Basic | |
| Riot & Strike | |
| Windscreen | |
| Radio Cassette | |
| Passenger Legal Liability | |
| Others | |
| TOTAL | |