



Private Vehicle Insurance Proposal Form

CIC INSURANCE GROUP LIMITED.

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M-Pesa Business No 600112

AGENCY/ BROKER

SECTION A: PROPOSER'S DETAILS

1. NAME OF PROPOSER:
SURNAME: OTHER NAMES:

2. PIN NO: ID NO/PASSPORT NO:

3. DATE OF BIRTH:

4. POSTAL ADDRESS: CODE: TOWN:

5. EMAIL ADDRESS: FAX NO:

6. TELEPHONE: MOBILE:

7. RESIDENCE:

8. OCCUPATION / PROFESSION:

9. NAME OF FINANCIER (IF ANY):

10. DRIVING LICENCE NO:

11. DRIVING EXPERIENCE:

12. DATE FIRST LICENCE ISSUED:

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

14. Are you entitled to any **No Claim Discount (NCD)**?

If yes, attach evidence

15. Name of previous Insurer(s):

16. Has any insurance company

a) Declined your proposal?

b) Cancelled or refused to renew your Policy?

c) Required an increase premium on renewal?

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	CC	Colour	Insured's Estimate of value	Type of body	Chassis No.	Engine No.	Seating capacity	Log Book No.	Comprehensive, Third party fire & theft or Third party only

Indicate extra benefits required (additional premium may apply) Figures in kshs.

Registration Marks	Riots & Strikes	Windscreen (Kshs)	Audio System (Kshs)

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

If no, give details:

2. Is the vehicle used for;

A) Social, domestic and leisure purposes? Y N

B) Carriage of goods or passengers for hire or reward? Y N

C) Carriage of goods in connection with your own or employer's business? Y N

If yes, please give more details:

3. Will the vehicle be driven by other drivers other than the proposed? Y N

If yes, provide names of these other drivers including driving experience.

Name of other driver(s)

Years of driving experience

i)

ii)

If the vehicle is driven by other drivers, other than those listed above, the policy may have an additional excess imposed.

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

(Attach copy of certificate).

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 driving licence Y N

c) Copy of anti theft certificate Y N

d) NCD letter Y N