

The Heritage Insurance Company Tanzania Limited Oyster Bay Office Complex | 368 Msasani Road | Oyster Bay P.O BOX 7390 Dar Es Salaam Tanzania (t) 255 22 266 4204/4209 (f) 254 22 266 210 Website: www.heritagetanzania.com https://www.facebook.com/heritagetanzania/

PROPOSAL FORM FOR DOMESTIC PACKAGE INSURANCE

AGENCY and/or BROKER

All questions must be answered in full. Please use block letters or tick as appropriate

SE	CTION 1 - PROPOSER	DETAILS										
a.	Full Name of Propos	ser										E
b.	Contact Details:	(tel):						(fax):				
		(mobile):						(web):				
		(email):					_					
		(postal):				(co	de):		(town/ city):	10000		
C.	Tin Number :								VRN			
d.	Period of Insurance :	From	ו :			То):					
Pł	HYSICAL ADDRESS AN	ID OCCUPA	NCY									
1.	Location of premis	es:	Building									
			Street/Ro	bad					Plot No.			
			Town									
2.	What is the nature	of constru	uction of tl	he foll	owing							
			External	walls					Internal w	alls		
			ſ	Roof					Ceiling			
3.	What is the height	in storeys	?									
4.	-				n in an	y secti	on o	f the pr	emises of which the	Yes	No	
	dwelling forms a p	dwelling forms a part? If so, give particulars										
5.	. Is the premises:											
.ر	a) A private d	welling ho	use?							Yes	No	
	If not	please exp	olain									
	b) A self-conta	uned flat w	/ith separa	ate ent	rance e	evolusi	velv	unders	your control 2	Yes	No	
6.							-	-		☐ Yes		
	Is the dwelling solely in your occupation? (Including your family and servants) (a)Will the dwelling be left without an inhabitant for more than seven (7) consecutive days?											
7.	(a) Will the dwelling If so, state the e	-	ithout an	innadi	tant foi	r more	thar	i seven	(7) consecutive days	S? Yes	No	
			vithout an	inhab	itant fo	or more	e tha	n thirty	(30) consecutive da	ys? 🗌 Yes	No	
	If so, state the ϵ											
	NOTE: Whenever the please notify the cor	0	s to be left	unoccu	ipied fo	r a peri	iod e:	kceeding	g the above stated day	'S		
8.			te of repa	ir and	will the	av ha c	n ma	aintaine	d?			
o. 9.		-	·			-		initanit		Yes	No	
у.	If yes, state amou						/er is	require	ed			
	Amou					ber of						

PROPERTY TO BE INSURED

Section A - the Buildings

The proposer's residence being a private dwelling house or private flat and all domestic offices, stables, garage and outbuildings on the same premises and used in connection therewith and the walls, gates and fences around and pertaining thereto, including Landlord's fixtures and fittings in the said building all situated as above Kshs.

(All the said buildings are brick, stone or concrete built, with tile, concrete, or metal roof Kshs

Total Sum insured on Buildings.

Note: the sum insured for the buildings should be the full reinstatement value. i.e. the cost of rebuilding the house including walls and out buildings, making allowance for architects and surveyors fees and cost of debris removal

Section B - Contents

- Note 1: The sum insured should be the replacement value less depreciation , wear and tear of the property.
- Note 2: No one article (furniture excepted) shall be deemed of greater value than 5% of the total sum insured on the contents unless such article is specifically insured.
- Note 3: The total value of platinum, gold and silver articles, jewelry will be deemed not to exceed one third of the total sum insured on the said contents unless specifically agreed upon with the Insurer. If the said value exceeds this portion the total value of such property should be specified.

Option 1

On furniture, household goods and personal effects of every description the property of the proposer or any member of the proposer's family normally residing with the proposer, and fixtures and fittings the proposer's own or for which proposer is legally responsible, not being landlord's fixtures and fittings, in the building of the proposer's residence.

Detailed description of Contents to be insured	Sum Insured
Furniture	
Household linen	
Cutlery, Glass, Crockery	
Pictures and ornaments	
Wines and Spirits	
Photographic Equipment	
Jewelry and valuable (attach jewelry report valuation)	
.Others (specify)	
Total Sum Insured on Contents	

Specify here any article of greater value than 5% of the total sum insured on the above contents

Item Description	Value

Heritage

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Option 2

Complete the option if you wish to insure each item individually. Proposer's estimate of the value of individual items making up the contents Do not include a value for any item which is to be insured under the "ALL RISKS"

Detailed description of Contents to be insured	Make	Model	Serial Number	Value
Furniture				
Carpets				
Household				
Clothing				
Self				
Spouse				
Children				
Others				
Cutlery, Crockery, Glass				
Kitchen equipment				
Juicers/Blenders				
Microwave Oven				
Entertainment Equipment				
Electric Cooker				
Gas Cooker				
Gas Cylinder				
Refrigerator				
Freezer				
Dish Washer				
Washing Machine				
Vacuum Cleaner				
Sewing Machine				
Pictures and Ornaments				
Wine and Spirits				
Sports Equipments				
Electronic Equipment				
Television set				
Video Cassettes Player				
Radiogram				
Tape Recorder				
Musical Equipment				
Camera				
Video Camera				
Lenses				
Others (Please Specify)				
• >				
• >				
• >				
• >				
• >				
• >				
Total Sum Insured on Contents				

Security Mesures

a. What security arrangements are in place? (Tick appropriate option/s)

🗖 Own Watchman	Others : Please Specify				
□ Security Guard Firm					
Burglary Alarm					

Section C - All Risks

Note: The sum insured should be the replacement value of the property less a deduction for wear, tear and depreciation) Please give a detailed description and state separately the full value of each item as provided here below.

Detailed description of Contents to be insured	Make	Model	Serial Number	Value

Declaration

I/We do hereby declare that the above answers are true to the best of my/our knowledge and belief and that I/We have not withheld any information whatever regarding the proposal. I/We agree that the declaration and the answers given above shall be the basis of the contract between me/ us and The Heritage Insurance Company Tanzania Ltd.

Signature of Proposer____

Date

The liability of the Company does not attach until the proposal has been accepted by the Company and premium has been paid. NOTE: This proposal form must be completed and signed by the proposer.