



INSURANCE COMPANY LTD.

P. O. BOX 782, ACCRA

PROPOSAL FOR INSURANCE AGAINST FIRE

FULL NAME OF PROPOSER.....
(State Mr. Mrs. or Miss)
ADDRESS.....

OCCUPATION OR BUSINESS.....NATIONALITY.....

Details of the Proposed Insurance

SITUATION of Property to be insured:.....

CONSTRUCTION: Walls of

 Roofed with.....

	<u>SUM TO BE INSURED</u>
(1) THE BUILDING OF THE PRIVATE DWELLING HOUSE and domestic offices, stables garage and outbuildings (including landlord's fixtures and fittings) on the same premises and used in connection therewith, and walls gates and fences around and pertaining thereto¢
(2) HOUSEHOLD GOODS AND PERSONAL EFFECTS of every description, the property of the Proposer or of permanently resident members of family and of servants in the above dwelling¢
Note: Any article (furniture, pianos and organs excepted) which exceeds in value 5% of this Amount must be specified below and insured separately.	
(3) DESCRIPTION OF ANY OTHER PROPERTY TO BE INSURED (see note above).....¢
(4) Building of business premises occupied for.....¢
¢
(5) On Stock-in-trade consisting of.....¢
(6) On fixtures fitting and utensils in Trade.....¢
(7) Other property to be insured.....¢

TOTAL _____

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

.....

(9) 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.....

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

.....

Insurance to commence the.....200.....for a period of.....months
ending the200.....

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 a cover note issued on payment of the
agreed premium.

Date:..... Signature.....

Agents recommendation. I have known the proposer.....
for.....years and recommend the acceptance of the risk proposed for insurance.

Agent's Signature.....

Rate:.....

Policy No:.....

Premium ¢.....