



INTERNATIONAL INSURANCE COMPANY (SL)LTD.

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HOUSEHOLDERS' COMPREHENSIVE INSURANCE PROPOSAL FORM

(Answers in Block Letters Please)

NAME OF PROPOSER.....

(State Mr., Mrs., or Miss)

ADDRESS

TELEPHONE NUMBERS.....

OCCUPATION OR BUSINESS

SECTION A: PARTICULARS OR PROPERTY AND ARTICLES TO BE INSURED

SUM TO BE
INSURED

- 1. HOUSEHOLD GOODS AND PERSONAL EFFECTS including Wearing Apparels, Books, Cutlery, Clocks, Linen, Wines, Cigars, Musical Instruments, Cycles, Pictures, Prints, Drawings and the like of every description, the property of the Proposer or of permanently resident members of the family and of servants in the above dwelling
Le
- 2. On Furs, Jewellery, Personal Ornaments, Watches and Trinkets Gold, Silver and Electric Plate. Le
- 3. ON FIXTURES, FITTING AND FURNITURE, CHINA GLASS MIRROR GLASSES ETC. Le
- 4. OTHER PROPERTY TO BE INSURED Le.....

NOTE: Any article which exceeds 10% of the total amount must be specified separately.

TOTAL SUM INSURED Le.....

SECTION B -GENERAL QUESTIONS

- 1. Have you ever suffered loss or damage by fire or burglary of any kind. If so, give details.
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- 2. Is the property proposed for insurance already insured with another company? If so, give details.
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- 3. Has any insurance company or underwriter ever refused a proposal from you or imposed special terms, cancelled or refused to insure or declined to continue the insurance cover?

If so state name of company concerned.

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SECTION C - GENERAL INFORMATION AND ADDITIONAL MATERIAL FACTS

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DECLARATION

I hereby declare and warrant that the above questions are fully and truthfully answered and that I have not withheld or concealed any circumstances affecting the proposed insurance and I hereby agree that this declaration shall be deemed to be of promissory nature and effect and the basis of the contract between me and International Insurance Company (SL) Limited, and I am willing to accept a policy subject to the terms and conditions prescribed by the Company therein and to pay the premium thereon.

Insurance to Commence:..... and Expire:

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

NOTE: The liability of the company does not commence until this proposal is accepted by the Company or official cover note issued.

Date Agent's Signature:.....

FOR OFFICIAL USE

Premium Rate
Annual Premium Le.....
Total Amount due Le
Approved by:.....

Policy No:.....