



NICO General Insurance Company Limited

NICO HOUSE, P.O Box 2592, Blantyre; Tel: 01 822699; Fax: 01 822363; E-mail: nicogen@nicogeneral.com
NICO CENTRE, P O Box 30421, Capital City, Lilongwe 3; Tel: 01 751366; Fax: 01 751365; E-mail: llnico@nicogeneral.com
MPICO HOUSE, P.O. Box 226, Mzuzu; Tel: 01 334876; Fax: 01 334564
www.nicogeneral.com

PROPOSAL FOR BUSINESS PREMISES INSURANCE AGAINST FIRE AND LIGHTNING

(Excluding Private Dwellings, Residential Flats and Boarding Houses)

NAME OF PROPOSER(S) (in full).....

(If a partnership, give names of all partners)

NAME OF MORTGAGEE (if any)

POSTAL ADDRESS

PHYSICAL ADDRESS

E-MAIL ADDRESS Tel. No..... Fax. No.

OCCUPATION OF PROPOSER(S).....
(For the purpose of this insurance)

PERIOD FOR WHICH INSURANCE IS REQUIRED: FROM TO.....

PROPERTY TO BE INSURED

N.B. 1 - Each detached building, as well as buildings separated from each other by perfect party walls must have separate sums insured of the building and/or contents.

N.B. 2 - A perfect party wall is a wall built entirely of brick or masonry or concrete of at least 9 inches in thickness of solid material devoid of cavity extending up to and through the roof and 9 inches above the roof, without any aperture.

N.B. 3 - Where two or more buildings are to be covered please draw a sketch plan in the space provided overleaf numbering the buildings as quoted below.

Stand/ Plot No.	Street Name and No.	Town/ City
1	1	1
2	2	2
3	3	3
4	4	4
Construction of External Walls	Construction of Roof	Height in Storeys Including Basement
1	1	1
2	2	2
3	3	3
4	4	4

SUMS TO BE INSURED

	PREMISES 1	PREMISES 2	PREMISES 3	PREMISES 4	TOTAL
*OCCUPIED BY PROPOSER AS:-	
Building and Landlord's Fixtures and Fittings					
Rent(State No. of months and if Value Payable or Receivable					
Machinery Plant Engineers and Boilers					
Trade and Office Furniture Fixtures and Fittings					
Stock-in-Trade the Property of the Proposer					
Goods Held in Trust or on Commission					
.....					
TOTAL					

QUESTIONS TO BE ANSWERED BY THE PROPOSER (FULL REPLIES MUST BE GIVEN)

N.B. 1. - In so far as this Proposal for Insurance relates to a partnership, the answers given shall be deemed to be the answers of the partnership and of the individual members thereof, whether or not signed by all such members.

N.B. 2. - If several buildings and/or their contents are proposed to be insured, a separate answer must be given to each of the following questions relative to each building. Failing to provide more than one answer, the reply will be taken to apply equally and separately to each building.

1. Is power used? YES NO If so, give details.
 What is the total horse power of the power units used?.....
 If any heat is used in any trade process, give details.

2. Are any inflammable oils, spirits, liquid gas or explosives stored on the premises? If so, indicate where and state: (a) Number of gallons of liquid giving off inflammable vapour Under 100° F (b) Number of gallons of liquid giving off inflammable vapour at or over 100° F (This includes Paraffin). (c) Weight of liquid gas (d) Quantity of explosives.	<input type="checkbox"/> YES <input type="checkbox"/> NO (a)..... (b)..... (c)..... (d).....
---	--

3. Is any other commodity of a hazardous nature, or liable to sudden combustion or explosion (e.g. hay, straw, etc.) stored or used in the buildings? If so, state which buildings are used.	<input type="checkbox"/> YES <input type="checkbox"/> NO
--	---

4. (a) Is any automobile or motorcycle housed in or upon the premises? If so, state the number of vehicles and the building(s) concerned. (b) Is spray painting done or intended to be done? If so indicate the building(s) concerned and state what is used, the quantity stored and where it is stored. (c) Are petrol pumps used? If so, state if situate within 20ft. of a building	<input type="checkbox"/> YES <input type="checkbox"/> NO (a)..... (b)..... <input type="checkbox"/> YES <input type="checkbox"/> NO (c).....
---	--

5. (a) Give details of fire extinguishing appliances on premises. (b) Are your premises so situate that they would be entitled to the services of any public fire brigade? If so, give details and distances from the brigade station.	(a)..... <input type="checkbox"/> YES <input type="checkbox"/> NO (b).....
---	--

6. Do you require your policy to be extended to include any of the following perils?

(a) Explosion	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(b) Storm Perils (State percentage of cover required)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(c) Riot, Strike and Malicious Damage	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(d) Earthquake.	<input type="checkbox"/> YES	<input type="checkbox"/> NO

7. Do you require cover against Loss of Profits resulting from the perils you now propose to cover? See page 4 for details) (If so, a separate proposal form must be completed.)

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

8. (a) For how long have you conducted your present business?
 (b) Have you previously carried on business elsewhere? If so, please give details.

(a)

(b) YES NO

9. (a) Do you keep a set of books showing complete record of business transacted including all purchases and sales both for cash and credit, together with the last inventory of the business?
 (b) How often do you take inventory of the business?
 (c) Do you keep the above-mentioned books and inventory securely locked in a fire proof safe at night, and at all times when the premises are not actually open for business? If not, what precautions are taken for their safe custody?
 (d) What is the value of the stock at last stock-taking and date when taken?

(a) YES NO

(b)

(c) YES NO

(d) K.....
 Month.....Year.....

10. Have you:

(a) ever been insolvent, compounded with your creditors or assigned your estate?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(e) any existing insurance in addition to this proposal in respect of the property now to be insured?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(c) ever sustained loss from fire or any of the perils now to be covered?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(d) Ever had a proposal for insurance or a renewal of policy Declined? Or	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(e) ever had a policy terminated? or	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(f) ever had special conditions or rates imposed at any time?	<input type="checkbox"/> NO	<input type="checkbox"/> NO

If any of the answers to the above are in the affirmative, please give details.

.....

DECLARATION

I/We hereby declare that the above particulars and statements are true, correct and complete and contain all information known to me/us affecting the risk to be insured, and that this and any other written statement made by me/us or on my/our behalf for the purpose of the proposed insurance shall be the basis of and incorporated in, the Contract between me/us and the Company, and shall be promissory. I/We further agree to accept insurance on the terms and conditions set forth in the Company's Policy.

Date:.....Signature of Proposer.....

AGENT'S REPORT:-The Proposer has been known to me foryears, is of good character and repute, and I recommend the acceptance of the risk.

Date.....Agent's Signature.....

No liability is undertaken until this Proposal has been accepted by the Company except to the extent of any Official Cover Note issued by the Company.

FIRE INSURANCE

An ordinary Fire Policy covers damage to a Building and its Contents. It does not compensate for Loss of Trade.

A Loss of Profits Policy Covers

- 1. Loss of net Profit** due to the partial or total stoppage of the business in consequence of FIRE AND LIGHTNING
- 2. Payment of continuing Overhead Expenses** such as Rent, Rates and Taxes, Interest on Debentures, Mortgages and Loans, Insurance Premiums, Advertising, Salaries to Permanent Staff and Wages to Employees, Travelling Expenses and like charges which will continue to be payable during Interruption of business.
- 3. Increase in Working Expenses** necessarily incurred to overcome or to minimise the effect of the fire, such as Rent of temporary premises, Hire of Machinery, etc.

The rate of premium varies with the period of indemnity, that is, with the period after any fire during which compensation is desired, e.g. three, six, nine or twelve months or longer.

Further particulars of this type of policy may be obtained from the Branch Office of the Company.

GROUND PLAN

To enable us to form an opinion of the Risk and to facilitate correct rating you are particularly requested to supply a Ground Plan (however simply drawn) of the buildings described (showing distances from one another), together with buildings which adjoin or which from their situation may add to the risk. Doors and windows should be shown thus: Doors- D; Windows W. etceteras where you can provide an explanation of abbreviations used to ease understanding of your sketch.