

PROPOSER DETAILS

Name of proposer: _____

ID/Passport no: _____ KRA PIN: _____

Postal Address: _____ Postal Code: _____

Town/ City: _____ County: _____

Telephone no: _____ Mobile no: _____ Fax: _____

Email address: _____

Trade Name: _____

Legal/Registered Name: _____

Registration Number: _____

Country of Incorporation: _____ Country of Parent Company if any _____

Nature of Business: _____

Name of Financier (If Any): _____

Period of Insurance: From _____ To _____

Proposal details

Mode of conveyance: _____

Territorial limits: _____

If cover is required on specified vehicles, please complete the schedule below:

Vehicles				Trailers			
Make & Description of Vehicle	Reg. Number	Carrying capacity (tonnage)	Sum Insured	Make & Description of Trailer	Reg. Number	Carrying capacity (tonnage)	Sum Insured

How will the goods be packaged whilst transporting? _____

Goods in Transit

Proposal form

Paybill: 886835



Will you transport any of the following;

- a) Wines and spirits? Yes NO
- b) Fragile articles? Yes NO
- c) Explosive or hazardous goods? Yes NO

Will you use hired vehicles? Yes NO

If yes give details: _____

How do you ensure safety of the goods when the vehicle(s) are temporarily garaged during transit? Please explain:

Are the vehicles fitted with;

- i) Tracking Devices Yes NO
- ii) Radio Communication Yes NO
- iii) Engine Immobilizer Yes NO

Any other Devices (please specify) _____

DECLARATION

I/ We do here declare that the information included in the document is true and that I/ We have not withheld no material or information in this proposal

Date: _____

Signature of the proposer

Rubber stamp/ Seal