

BURGLARY PROPOSAL FORM

Please answer every applicable question and attach supporting documents

HOW TO COMPLETE THIS FORM

1. Complete the form in BLOCK LETTERS.
2. Answer every question fully. Where a question does not apply, enter N/A.
3. Attach supplementary sheets where more space is required and identify the relevant question.
4. Tick the appropriate option wherever applicable.
5. Contact the Company's office or your agent for clarification where required.

Information supplied will be treated in strict confidence. 'You' and 'Your' refer to the proposer.

Period of insurance - From

To

PROPOSER INFORMATION

Name of proposer (in full)

Trade, business or occupation

Postal address

Telephone / mobile number

Email address

Business / trade / occupation - full description

PROPERTY AND SUMS INSURED

Category / description	Details	Sum insured (UGX)

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Property and sums insured - continued

PROPERTY AND SUMS INSURED - CONTINUED

Category / description	Details	Sum insured (UGX)

Categories should include stock in trade; goods in trust or on commission; trade fixtures, fittings and office furniture; household goods and personal effects; jewellery and valuables; and other specified articles. Include a final total.

OCCUPATION AND CONSTRUCTION OF THE BUILDING

Construction of building walls and roof

How is the building used?

- ☐ Residence
 ☐ Office
 ☐ Shop
 ☐ Godown
☐ Factory
 ☐ Other

For shops or godowns, describe the goods stored.

For factories, describe the process carried out.

Is night work carried on in the factory?

☐ Yes
 ☐ No

How is the building lit: electricity, gas, oil lamps or other?

PREVIOUS INSURANCE AND BUSINESS RECORDS

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Continued

Give details of past or current insurance on the property.

Give details of any previous burglary or housebreaking loss.

INSURER / UNDERWRITER DECISIONS

Has an insurer ever cancelled your policy?

☐ Yes

☐ No

Has an insurer ever declined to insure you?

☐ Yes

☐ No

Has an insurer ever refused to renew your policy?

☐ Yes

☐ No

Has an insurer ever imposed special terms or an increased premium?

☐ Yes

☐ No

Has an insurer ever repudiated a claim?

☐ Yes

☐ No

If Yes to any question above, give full details.

How frequently is stock inventory taken?

Are account books kept up to date?

When was the last physical stock inventory taken?

How are account books protected when the premises are closed?

SECURITY PRECAUTIONS

Precautions used to secure doors

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Precautions used to protect windows

Precautions used to protect skylights and other entrances

Will these precautions always be used when the premises are closed?

☐ Yes

☐ No

Number of guards / watchmen

Hours when guard services are used

Name of guard service

Do you reside on the premises?

☐ Yes

☐ No

Will the premises be left unoccupied at any time?

☐ Yes

☐ No

If Yes, how often and for how long?

OTHER INSURANCE

Fire insurance amount on contents

Insurance company

Renewal date

Give particulars of any other insurance held with SWICO.

No single article in the valuables or other specified-articles categories is deemed to exceed 5% of the total sum insured for that category unless it is specifically mentioned and separately insured.

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Declaration and intermediary details

DECLARATION

I/We declare that the answers and statements in this proposal are true and that I/we have not withheld any material information. I/We agree that this declaration, the answers given above, and any proposal, declaration or statement made in writing by me/us or anyone acting on my/our behalf shall form the basis of the contract between me/us and the Company. I/We further agree to accept indemnity subject to the conditions endorsed on the Company's policy.

Date of proposal

Signature and stamp of proposer

THE LIABILITY OF THE COMPANY DOES NOT COMMENCE UNTIL THE PROPOSAL HAS BEEN ACCEPTED AND THE PREMIUM HAS BEEN PAID.

AGENT / BROKER / CONTACT PERSON

Name

Date

Signature

Comments