



The Tatil Group
 * TRINIDAD & TOBAGO INSURANCE LIMITED
 * TATIL LIFE ASSURANCE LIMITED
 11, Maraval Road,
 Port of Spain,
 Trinidad and Tobago, W.I.

Policy No:.....
Producer Name:.....
Producer No.:.....
Branch:.....
Commission:.....

PROPOSAL FOR COMMERCIAL ALL RISK INSURANCE

Please give complete answers (no blanks or dashes) to all questions. Note that where applicable in the context of this proposal, the singular shall include the plural. (Where applicable please tick (✓) the appropriate box).

1. Full Name:
2. Postal Address:
3. Nature of your business, e.g. Printery, Garment Factory, etc Please be specific:.....
4. Territorial scope of cover required: Premises (State address): T&T () Worldwide () English Caribbean ()
5. Period of Insurance required: From: To:.....

VALUES TO BE INSURED

Please give full details of each item, i.e. description, make, model and serial number, For example, Canon fax Phone Model #25, Serial #A297. Use available Specification Listing as necessary.

ITEM (Give full details including Make)	MODEL	SERIAL #	VALUE TO BE INSURED
1.			
2.			
3.			
4.			
5.			
TOTAL			

PARTICULARS OF THE PREMISES WHERE ITEMS ARE USUALLY KEPT:

Construction:

Roof: (e.g. galvanize, concrete, shingles).....

Flooring: (e.g. timber, concrete)

External Walls

Internal Walls/Partitioning:.....

Number of Stories:.....

By whom is the building owned:.....

For what purpose is the building occupied:

Construction and occupation of detachments of neighbouring premises within 15ft:.....

To what extent will the premises be left unattended: (Day, Night, Weekends, etc):.....

6. How is the premises protected against unlawful entry?		
(a) Windows		
(b) Doors		
(c) Air Condition Units.....		
(d) Others		
7. Is the premises protected by an alarm system? Yes () No () If yes, give details (type, monitorings, etc) "		
8. Is the premises protected by a security guard or watchman? Yes () No () Details (what hours, etc.)		
9. Are you presently insured against any of the risks to be insured under this policy? Yes () No () If yes, give details (company, values, etc).		
10. Have you ever made a claim, suffered a loss or an attempted loss which would have been covered under an All Risk Policy? Yes () No () Give full details:		
11. Have you or any Principal in the business ever:		
(a) Been declined Insurance by an Insurance Co. or Broker?	Yes ()	No ()
(b) Had any special terms or conditions imposed?	Yes ()	No ()
(c) Had your insurance cancelled by any insurer?	Yes ()	No ()
(d) Been charged for any act of dishonesty? (Whether convicted or not)	Yes ()	No ()
Details:		
12. Is the property to be insured on Hire Purchase or any encumbrances? Yes () No () Name and address of Finance Company:		
13. Indicate what Policy extensions are required:		
Riot & Strike	Yes ()	No ()
Temporary Removal	Yes ()	No ()
New for Old	Yes ()	No ()
Automatic Reinstatement	Yes ()	No ()
Transit Risks	Yes ()	No ()

DECLARATION: I/we do hereby declare that the above answers are true, that I/we have withheld no information whatever that might tend in any way to increase the company's risk, or to influence the decision of the company regarding the proposal; and I/we undertake to exercise all ordinary and reasonable precaution for the safety of the said property. I/we agree that this Declaration, and the answers above given shall be the basis of the contract between me/us and the company; and further, if the proposal is accepted, I/we agree to accept a policy subject to the usual conditions prescribed by the company and set forth in the policy which is available for inspection upon request.

Signature of Proposer **Dated:.....**
and Company stamp

