



THE TATIL GROUP
 Head Office 11 Maraval Road, Port of Spain
PROPOSAL FOR MONEY INSURANCE

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

Please give complete answers (no blanks or dashes) to all questions.

1. Full Name _____
2. Business/Occupation _____
3. Postal Address _____
4. Business Address _____
5. Name and Address of Bankers _____
6. Period of insurance required From: _____ To: _____

TRANSIT RISKS

7.	Maximum amount at risk any one time	Estimated Total amount carried annually
(a) Cash in transit to or from proposer's premises and bank.	_____	_____
(b) Cash in transit from place of collection to premises and/or bank.	_____	_____
(c) Other transits, please explain	_____	_____

PREMISES RISKS

8.	Limit Required
(a) Cash during working hours in or out of locked safe.	_____
(b) Cash outside working hours in a locked safe.	_____
(c) Other locations, please give details.	_____

GENERAL INFORMATION

9. (a) Who carries the Cash to the Bank (b) If Security Firm state what firm and if armed (c) If Employees state how many accompany each sending and if armed. (d) If other state who and if armed. (e) In what manner is the cash conveyed? (f) How often is cash deposited?	(a) Security Firm <input type="checkbox"/> Employee <input type="checkbox"/> Other <input type="checkbox"/> (b) _____ (c) _____ (d) _____ (e) _____ (f) _____
10. Are the employees who handle the Cash insured under a Fidelity Guarantee Policy? If so state the name of the company.	Yes <input type="checkbox"/> No <input type="checkbox"/>
11. With which company are your fire and other property insurances placed? Please give details.	Tatil <input type="checkbox"/> Other <input type="checkbox"/>
12. Give particulars of all previous Cash or Burglary losses, if any.	_____
13. Do you require Personal Accident/hold up cover? If so for how many employees and what are their positions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
14. If cash will be retained overnight in a locked safe, state:- (a) Maker's name and description of safe. (b) Cost price of safe and date purchased. (c) Size of safe(external measurement). (d) Number of keys and by whom they are held.	Was safe purchased New <input type="checkbox"/> or Second-hand <input type="checkbox"/> (a) _____ (b) _____ (c) _____ (d) _____
15.(a) Have you ever proposed for an insurance of this class? (b) If so state result and the name of the Company. (c) Has any Company ever cancelled or refused to renew such an insurance or required an increased premium to continue on risk?	(a) Yes <input type="checkbox"/> No <input type="checkbox"/> (b) _____ (c) Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes please give details.

Definition:- For the purpose of this Insurance the Expression "cash" means and includes bank notes, credit card vouchers, postal and money orders, cheques, current coin, postage stamps.

Declaration:- I do hereby declare that the above answers are true, that I 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 undertake to exercise all ordinary and reasonable precautions for the safety of the said property. I agree that this Declaration, and the answers above given, shall be the basis of the contract between me and the Company; and further, if the proposal is accepted, I agree to accept a Policy, subject to the usual conditions prescribed by the Company and set forth in the Policy.

Signature of Proposer _____ Date of Proposal _____

FOR OFFICIAL USE ONLY	
Annual Premium:	_____
First Premium:	_____