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PROPOSAL FORM – VEHICLES USED TO CARRY PASSANGERS FOR HIRE OR REWARD

NOTE: Please give a definite reply to each question on the form and use BLOCK LETTERS

1. State period of Insurance: From..... To
2. (a) Name of Proposer (in full).....
 (b) Address (in full).....
 (c) Business Occupation (for the purpose of this insurance).....
3. Particulars of all vehicles to be insured:

Index and Registration No.	Make of Vehicle	Cubic Capacity of Engine	Year of manufacture	Max. No. of passengers permitted at any one time (excl. driver)	Date of purchase	Price paid by proposer Kshs.	Proposer's Estimate of present value (incl. accessories and spare parts) Kshs.

4. a) State type of cover required:
 a)Third Party only b)Third Party, fire and theft c)Comprehensive

5. a) Are you a licensed tour operator/
 b) Indicate the purpose for which each vehicle is used:
 Omnibus Public hire matatu Private hire
 c) If any of the vehicle(s) are used for Private hire, then do you hire them to other operators for their own use? Yes No
 If yes, do you enter into a written contract with them? Yes No
 (If yes please submit a copy of the contract)

Note: The policy to be on this proposal form will not operate if some other operator's employee is driving.

6. a) Are any of the vehicles licensed as public service vehicle? If so, state which:.....
 b)What is the max. Legal passengers carrying capacity(excl. the driver) of each vehicle?.....

7. State the number of employees licensed to drive.....

8. To the best of your Knowledge and belief, have you or has any other person to your knowledge will drive:

- a) i. defective vision or hearing?.....
 ii. now or within the last 5 years experienced diabetes, fits or any complaint of the heart?
 iii. any other physical or mental infirmity?..... (If yes, give details)

- b) Been convicted of any offence in connection with driving any motor vehicle?.....
 If so, give date and nature of penalty.....

- c) Only passed his test during the past 24 months? Yes / No

- d) Has less than 36 months experience and details in driving Omnibus or heavy lorries? Yes / No

9. a) Will the vehicle(s) be driven by any person(s) under 25 years of age?.....
 If so, give name(s), length of driving experience and details of all accidents or losses during the past 3 years

NOTE: The insurance may be inoperative or special terms applied to drivers under 25 years.

10. Are you now or have you been insured with respect of any motor vehicle?
 If so state name and Branch office of insurers and Policy No. (if known)

11. **Have any insurer ever**

- a) Declined your proposal or cancelled or refused to renew your policy?
- b) Required and increased premium or imposed special condition?
- c) Required you to carry the first portion of any loss?

12. a) State the number of Motor Vehicles/trailer (including motor cycles) owned by you within each of the three years.

Year	20.....	20.....	20.....
Vehicle owned			

b) Give particulars in the following schedule of all accidents or losses, during the past 36 calendar months in connection with all vehicle(s) and trailers owned or driven by you, including the vehicle(s) and trailers which is subject of this proposal. All accidents and losses must be included whether insured or uninsured and whether resulting in claim or not.

	Date	Cost (paid or estimated)	Type of payment e.g. own damage, Third party etc)	Brief details

13. **Is each vehicle**

- a) Your own property?
- b) Registered in your name?

14. If a hire purchase Company is interested in the vehicle(s), trailer(s), state name of such company and indicate which vehicle(s)

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PLEASE READ THE FOLLOWING DECLARATION VERY CAREFULLY AND READ AGAIN THE QUESTIONS AND ANSWERS RESPECTIVELY ESPECIALLY IF NOT COMPLETED IN YOUR OWN HANDWRITING, BEFORE SIGNING THE FORM.

I/We agree that this proposal and declaration shall be the basis of the contract between me/us and the insurers and shall be deemed to be incorporated in the contract.

Date Proposer's Signature.....

Name of signatory in capital letters.....

If signing an authorized capacity on behalf of "the proposer" state: (i) Whether partner.....

(ii) Position in Company or Firm

(Impress here with Company / Firm Rubber Stamp)

AGENCY/BROKER

The ability of the insurer does not commence until the acceptance of the proposal has been formally intimated by the insurers and windscreen Certificate of Insurance has been issued. Any untrue, incorrect or misleading answer to the above questions could make the insurer invalid and uncooperative in respect of claims arising.