

Farm Venture

Insurance Agency

www.farmventure.co.ke, info@farmventure.co.ke tel: 0721843429

PRIVATE CAR INSURANCE PROPOSAL FORM

PERSONAL DETAILS:

1. Name _____
2. Address _____ Tel.No. _____ Email _____
3. PIN Number _____ ID Number _____
4. Nature of business _____
5. State period with dates, of your car driving licence _____

PROPOSAL DETAILS

- a) Insurance Period: From _____ To _____
- b) Location of usual garage of the car _____
6. Give the particulars in full of each vehicle proposed for Insurance

Make & Model of Car	Body Type	Reg. Number	Engine CC	Year of Manufacture	Est. Value of car, incl. accessories	Seat Capacity incl. driver	Modification made to original design of body or engine

*Please attach a copy of logbook for each vehicle

7. Are the vehicles currently insured or have they been insured before? _____ if yes, state name of insurers _____ Policy Numbers _____ (you can draw a separate list).
8. Has any insurer a)declined or increased premiums or cancelled insurance in respect of yourself or any person that will drive your vehicle? _____ if so, give details

9. Will the car be used for social, domestic and pleasure purposes and for the insured's business? _____
10. Will the vehicle be used on any airports /airstrip or along runways or taxiways where the public do not normally have access? _____ if yes give details:

11. Do you , or any person who will drive suffer from defective hearing, vision, or any mental or physical conditions? _____ If yes, give details:

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12. Have you or any driver intended to drive this vehicle been convicted or awaiting conviction of a traffic offence within the past 5 years? _____ if so, give details

13. Do you have a current licence to drive motor vehicles? _____

14. Are you the owner of the car and is it registered in your name? _____

If no, give details of the hire purchase company _____

15. Give details of Car Anti Theft Device fitted _____

16. Are you entitled to a No Claims Discount from your previous insurer? _____ if yes, attach a No Claim Discount Certificate

17. Give the information below on other persons who to your knowledge will drive your vehicle(s)

Name of person	Occupation	Age	Age of driving licence in Kenya	Details of Accidents had in the last 3 years	Car Driving Experience (yrs)

18. Has any vehicle owned by you been involved in an accident in the past 3 years? _____ Give details below:

Past 3 years	Total number of vehicles owned each year	Total number of accidents	Monetary damage to vehicles	Third Party Amount

COVER PROPOSED (tick appropriately)

- A. Comprehensive
B. Third Party Fire & Theft
C. Third Party Only

If cover is required for accessories other than the standard accessories fitted by the manufacturer, give details below (only applicable for Comprehensive Cover only). Tick appropriately:

- a) Radio Cassette Value(Ksh) _____
b) Windscreen Value(Ksh) _____
c) Others Value(Ksh) _____

Declaration

I/we declare and warrant that the above answers/information in every respect is true and correct and I/we have not withheld any information likely to affect the acceptance of this proposal. No liability (except for the period stated in the Insurer's Official Cover Note) is undertaken until the Proposal is accepted by the Insurer and the premium paid. Further, I /we accept a compulsory excess as a per policy wording.

Signature of Proposer _____ Date _____