**PUBLIC LIABILITY PROPOSAL FORM**

Branch: ……………………………………………………………………………………………………………………………………..

Agency: ……………………………………………………………………………………………………………………………………………………...

**PROPOSER**

1. **PROPOSER DETAILS**

**FOR INDIVIDUAL APPLICATIONS**

1. Name: …………………………………………………………………………………………………….....................................
2. Date of Birth: ………………………………………………………………………………………………..................................
3. Passport/ ID Number: ……………………………………………………………………………………..................................

**(Please attach copy of ID/Passport)**

1. Nationality: ………………………………………………………………………………………………....................................
2. Physical Address: …………………………………………………………………………………….........................................
3. Telephone Number (s): .………………………………………………………………….......................................................
4. Email Address: …………………………………………….……………………………………................................................
5. Trade / Occupation: ……………………………………………………………………………………...................................
6. Physical address of Trade/ Occupation: ……………………………………………………………...................................
7. Source of income: ………………………………………………………………………………………...................................

**FOR CORPORATE APPLICATIONS**

1. Registered name of the organization: ………………………………………………………………....................................
2. Registration number of the organization: …………………………………………………………......................................

**(please attach copy of the registration certificate and TIN)**

1. Source of funds: …………………………………………………………………………………………....................................
2. Registered physical address of the organization:

………………………………………………………………………………………………………………..........................................

1. Name of the CD/ MD/ ED / CEO /Authorized representative: ……………………………………………………….................................................................................................................
2. Date of Birth: ………………………………………………………………………………………………..................................
3. Nationality: ………………………………………………………………………………………………....................................
4. Passport/ ID number (please attach copy): ………………………………………………………....................................
5. Telephone number(s)……………………………………………………………………………………..................................
6. Email address(es): ………………………………………………………………………………………………………………
7. Names of shareholders

**(please attach their ID/ Passport copies)**

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1. Shareholding details

**(please attach copy of memorandum and articles of association)**

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1. **RISK:**

**PLEASE COMPLETE THIS COLUMN WHERE COVER REQUIRED**

1. Your own premises:
   1. Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. Description (workshop, store, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   3. Kind of work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Work away from your premises:

Please describe the kind of work undertaken.

1. Does the work involve usage of mechanically driven machines, plant (other than lifting appliances) and pedal

|  |  |  |
| --- | --- | --- |
| cycles? | Yes | No |

If yes, please describe the machines***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

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(d) Does the work involve usage of mechanically driven lifts, cranes, hoists and other lifting appliances?

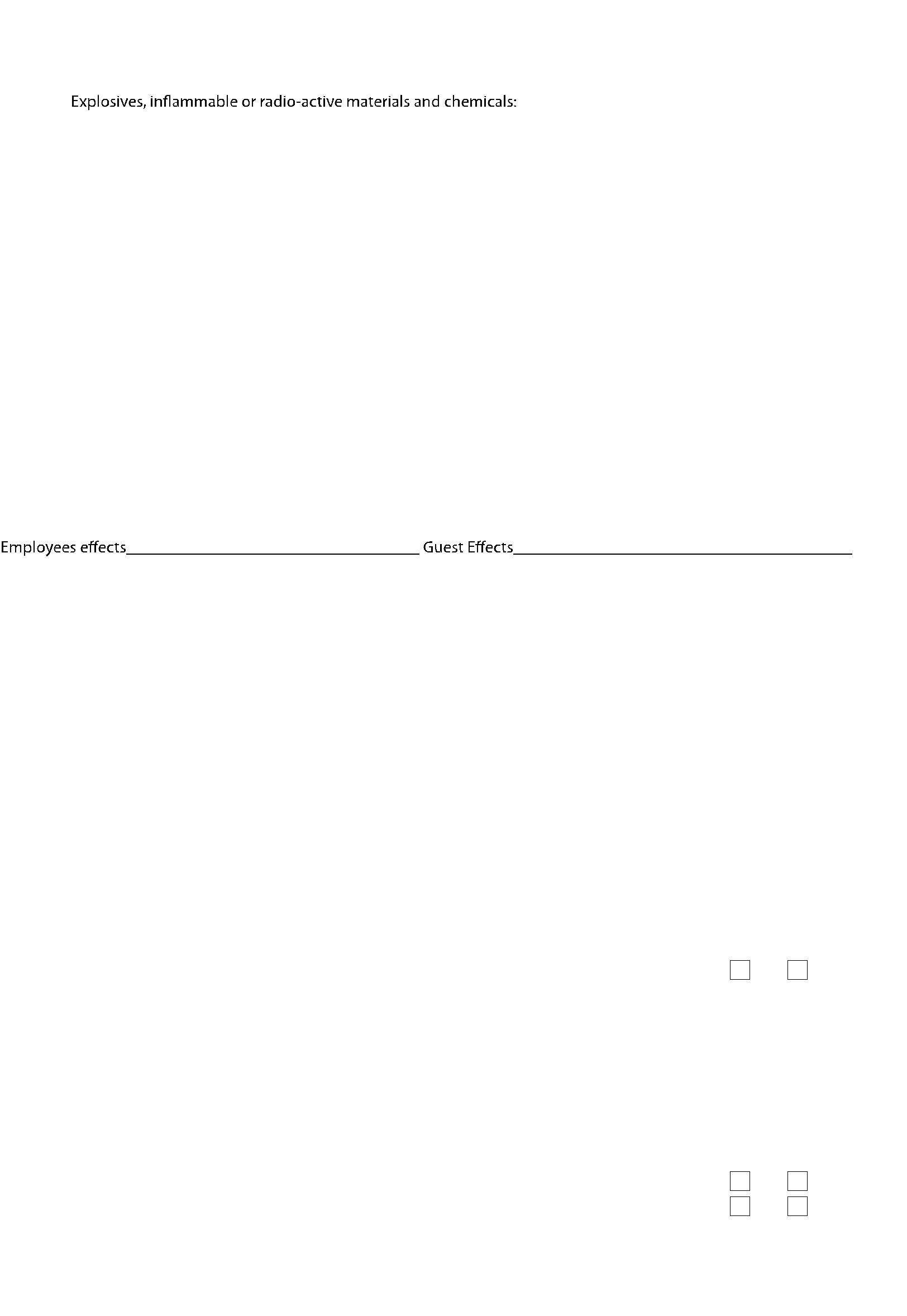
|  |  |
| --- | --- |
| Yes | No |

If yes, please describe the machines***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

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1. (i) Who examines them for defects, and how often?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



* 1. Are any defects revealed by inspections promptly remedied? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(e)

* 1. Kind and quantity used \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  2. For what purpose?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Work sub-contracted:
   1. Nature of work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. Estimated annual account of sub-contracts \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Products and services (liability for negligence or breach of warranty as seller or supplier of goods and services Description of goods or services \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you require cover for any of the following risks which fall outside the scope of the Public liability policy?**

*Maximum Limits for the above: Any one article - USD 150; Any one claim - USD 275; Any one period; USD 650*

Car Park \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Maximum Limits for the above: Any one car - USD 3,500; Any one period; USD 7,000*

Passenger Lifts \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Boilers & other steam pressure apparatus\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accidents arising out of ownership of land or building not in your occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please state estimated number and description of employees and total annual wages roll (including earnings of working principals, directors, partners, etc.)

Number working away from your premises \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Wages roll \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number working at your premises\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wages roll \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| 2. Are all your premises and appliances, machines and plant in a sound state of repair? | Yes | No |

1. How long have you been in business and what claims have been made by you during that period (or are pending) in respect of risks to be covered by this insurance? ***Please furnish full particulars.***

Number of years in business \_\_\_\_\_\_\_\_\_\_\_\_\_ Personal injury: Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cost \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Damage to property: Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cost.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
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| 4. (a) Are you at present insured, or | Yes | No |
| (b) have you ever proposed for insurance in respect of the said liabilities? | Yes | No |

Name of Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |  |  | 5. Has any proposal or renewal ever been | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | (a) Declined | | | | | | | | | |  |  |  |  |  |  | Yes |  | No | | | | |  |  |  |
|  |  |  |  |  | (b) Withdrawn | | | | | | | | | |  |  |  |  |  |  | Yes |  | No | | | | |  |  |  |
|  |  |  |  |  | (c) Charged an increased rate or | | | | | | | | | |  |  |  |  |  |  | Yes |  | No | | | | |  |  |  |
|  |  |  |  |  | (d) Subjected to special restrictions? | | | | | | | | | |  |  |  |  |  |  | Yes |  | No | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | Limit of indemnity required | | | | | | | | | |  |  |  |  |  |  |  | Premium (USD) | | | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | General Liability | | | | | | | | | |  | Any one claim\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Any one event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Any one period \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | Products liability | | | | | | | | | |  | Any one claim \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Any one period \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Estimated Annual Turnover \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | Insurance for 12 months | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Declaration**

I/We warrant that the above statements are true, and that I/We have not withheld or concealed anything affecting the proposed insurance and I/We agree that this proposal and Declaration shall be the basis of the contract between Me/Us and the company. I/We agree also to accept the Company’s policy applicable to the insurance.

Name of the person completing the proposal form\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**N.B: Liability does not commence until the acceptance of the proposal has been intimated or official cover-note issued.**

You cannot foresee what liability will fall upon you in the future but can be forearmed at the minimum cost.

Every citizen is a potential defendant in an action for damages. He cannot dodge the fact, nor can he estimate what it might cost him. If, by his own negligence or that-of his employee, he does damage to the person, or the Property of any fellow citizen, the injured party has his remedy at law.

Any defect in premises or plant, any carelessness on the part of an employee, any oversight or mishap, any never-to-be-expected accident, may mean a claim. Even if a successful defense is put up, heavy law costs may be incurred.

The risk in many cases is serious: in some cases, it may appear less so**,** but the mere fact that it exists at all is a complete reason for insuring against it. The more remote the risk, the more advantageous the insurance method of guarding against it, for the premiums are corresponding lower.

When it does occur, the claim can be just as expensive, whether the risk be small or great.

It is beside the point to speculate as to whether liability to the public exists in any given set of circumstances. The Law of Negligence is very involved, and highly paid lawyers are available to unravel it. For the man-in-the-street, suffice to say that, if liability exists, then a properly drawn-up Public Liability policy covers this liability: If it does not exist, the insurance company gives its experience and technique to the handling of the claim and pays any costs and expenses incurred. The Insured leaves everything to the company, enjoys a tranquil mind, and has nothing to pay but the premium