

GEMINIA INSURANCE COMPANY LIMITED

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CONTRACTUAL LIABILITY PROPOSAL FORM

INSTRUCTIONS:

- Please read carefully and fill out the entire document.
- All questions must be answered in full, in BLOCK letters in the applicants own handwriting or dictation.
- Attach a copy of Incorporation, KRA pin certificate with this application.

Part 1 Proposer's Details

Full name of the proposer: _____

KRA Pin No: _____ (Please attach a copy of certificate)

Postal Address: _____

Email Address: _____

Location of the premises: _____

Contact person's mobile number: _____

How long have you conducted the business in terms of years? _____

Period of Insurance From: _____ To: _____

Name of intermediary _____

Years of business _____

Have you either alone or in a partnership or jointly with any other party or any of your directors or office holders*

- i) Incurred legal costs in a contractual dispute in the past 3 years? Yes No
- ii) Had an insurer declined any claim, canceled any insurance policy, or impose special terms to any insurance policy? Yes No
- iii) Been charged with or convicted of any criminal offense? Yes No
- iv) Been declared bankrupt, insolvent, had a liquidator appointed or been a defiant in any civil court case? Yes No

If yes to any of the above, please provide full details here _____

Part 2 Details of Insurance

1. Insurance Cover (Please tick) Single Contract Annual Contract

2. Business (Specify exactly what business you are involved in. If construction, then specify exactly what construction OR if you selected a single contract, specify exactly what the contract involves)

3. Annual Turnover

Provide your estimated total annual turnover during the period of insurance Kshs _____

i) During the period of insurance (and for a single contract) state the following

The Maximum duration of the largest single contract Kshs _____

Amount paid to subcontractors Kshs _____

Amount paid for labor hire Kshs _____

Number of employees (not including contractors or subcontractors) Employees _____

ii) If a single contract cover, describe the project _____

4. Projection (In the next 12 months, will any contracts you anticipate entering into differ in size, scope or complexity from those undertaken by you in the past 3 years) Yes No

If yes, describe the difference _____

5. Contract Values (What is the contract value of the largest contract/ project for a the single contract you anticipate entering into?) Kshs _____

i) What is the nature of that contract and who is it with? _____

ii) Will you be involved in any of the following?

- a) Blasting or explosives (other than nail guns) Yes No
- b) Demolitions above 10 meters in height (other than internal non-structural demolition) Yes No
- c) Actual excavation work or work in an existing excavation deeper than 10 meters? Yes No
- d) Buildings or structures of historical significance Yes No
- e) Underground works, tunnels, shafts, mines or galleries Yes No
- f) Road works or bridges Yes No
- g) Pipeline greater than 250 meters in length Yes No
- h) Irrigation systems, canal, reservoir, dam or siphon work Yes No
- i) Work in or around an airport or aircraft landing area or working railways or tramlines Yes No
- k) Work in oil, gas, chemical or petrochemical plants Yes No
- l) Work in mining processing plants Yes No
- m) Technology that is of a prototype nature Yes No
- n) Bailee's liability, storage or stevedoring Yes No
- o) Manufacture or supply of goods or materials Yes No

If yes to any of the above questions, please describe _____

Part 3 Your other insurance (Compulsory to complete in full)

Do you have any of the following insurance policies?

- 1. Public and product liability Yes No Policy Number _____ Insurer _____
- 2. Professional Indemnity Yes No Policy Number _____ Insurer _____
- 3. Directors and office liability Yes No Policy Number _____ Insurer _____

