

GEMINIA INSURANCE COMPANY LIMITED

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GREENHOUSE INSURANCE 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 farm: _____

Contact person's mobile number: _____

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

Period of Insurance From: _____ To: _____

Name of intermediary _____

Does any other person or mortgage firm or bank have an interest in the property? Yes No

If yes, please provide the name _____

Part 2 Details of cladding material, structure, crops and equipment to be insured

a) Greenhouse insurance declaration on plastic cladding

Greenhouse Number	Gauge in Microns	Date of purchase	Size in m ² x	Cost per m ² (Kshs) y	Sum Insured (Kshs) xy
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Total Sum Insured (Kshs)					

b) Greenhouse insurance declaration on steel structure:

Greenhouse Number	Type of steel	Value/Sum Insured
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
Total Sum Insured (Kshs)		

c) Greenhouse insurance declaration on crops grown:

The amount(s) of the cost of production for all the crops produced in accordance with the cropping plan. Include briefs on the cropping plan. i.e a descriptive statement concerning all the crops to be produced and surface areas to be cultivated per block during a minimum of 52 weeks.

Greenhouse Number	Crop variety	Area in m ² x	Stems per m ² y	Production cost per stem (Kshs) z	Sum Insured (Kshs) xyz
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Total Sum Insured (Kshs)					

d) Greenhouse insurance declaration on machinery and equipment(s)

Block Number	Equipment type/ description	Size / capacity	Quantity x	Year of Make	Value per item (Kshs) y	Sum Insured (Kshs) xy
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Total Sum Insured (Kshs)						

Note: Sum Insured to be constituted by the aggregate values of pumps, valves, sensors, piping, sprinklers, nozzles and water filtration system.

Has any of your proposals for crop insurance been declined before or have any special conditions imposed on the proposal? Yes No

If yes, please give details

3. Are you currently insured in respect to the above risks? Yes No

If yes, state: Name of Insurance Company _____ Expiry Date of the policy _____

4. Has any Insurer

i) Declined to insure you? Yes No

ii) Required special terms to insure you? Yes No

iii) Cancelled or refused to renew your insurance? Yes No

iv) Or increase your premium on renewal? Yes No

Part 3 Declaration

I/We do hereby declare that to the best of my knowledge and belief that the statements set forth herein are true and complete. Further, no material facts have been missed or misrepresented. I/we agree that the proposal together with any other information supplied shall form the basis of any contract of insurance effected thereon.

Name of person Completing the Proposal form _____

Designation _____ Date _____

Signature _____

NOTE:

1. The Insured shall accept a policy subject to excesses, restrictions, terms & conditions Geminia Insurance Company Limited may deem necessary.
2. The Insured undertakes to inform the insurer of any material alteration whereby the risk has increased and the insurer reserve the right to modify the terms of the policy.