

ALL RISKS 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.
- Submit a Certificate of Incorporation, KRA pin certificate with this application.

Part 1: PARTICULARS OF PROPOSER

Name of Proposer _____

Postal Address P.O. Box _____ Code _____ Town _____

Email address _____

ID Card No. _____ PIN No. _____ Date of Birth _____

KRA Pin _____ Certificate of incorporation No. _____

Nature of Business _____

Contact person's mobile number _____

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

Period of Insurance From _____ To _____

Name of intermediary if any? _____

Part 2: PARTICULARS OF INSURANCE

1. Is the proposed cover for: ☐ Business Insurance ☐ Personal Items Insurance
2. Do you require cover for: ☐ Kenya Only ☐ Worldwide
3. If cover is required for jewelry, has the jewelry been valued recently? Yes ☐ No ☐
If yes, state the date of the last valuation(please attach a valuation report) _____
4. Do you wish to cover losses arising from power surges? Yes ☐ No ☐
If yes kindly note that an additional will be charged.

Part 3: Schedule of Property

Cover cannot be given on watches, photographic element, electronic equipment, office machines and equipment etc unless the maker's serial and model number is quoted on this form

NB. In the absence of specific sum insured, the company's liability on any single article shall not exceeds Ksh. 50,000/-

Item No.	Full description of each article	Maker's No/Serial Number	Value(Kshs)

Item No.	Full description of each article	Maker's No/Serial Number	Value(Kshs)
Total			

Summary of Cover

Loss or damage to property by fire, theft or any accident or misfortune.

Main Exclusions

Loss or damage arising out of wear, tear, deterioration, mechanical breakdown or derangement, theft by servant, willful acts, confiscation, contamination, theft from an unlocked vehicle, consequential loss, war, mutiny, riot and strike.

Part 4. General Insurance History

1. Are you currently insured for domestic package, fire, theft, computer or all risk policy? Yes ☐ No ☐

If yes, please give the name of insurer _____

2. Have you ever suffered a loss in connection with all-risk insurance? Yes ☐ No ☐

If yes, please give the details _____

3. Has any insurer

i) Decline to insure you? Yes ☐ No ☐

ii) Require special terms to insure you? Yes ☐ No ☐

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

iv) Or increased your premium on renewal? Yes ☐ No ☐

Part 5 Consent & Declaration

Geminia Insurance Company Limited is committed to protecting the fundamental human right to privacy of those with whom we interact. We recognize the need to safeguard personal data that is collected or disclosed to us as part of the Know-your-customer information required by us in order to provide you with the requisite financial product or service.

We are committed to complying with the requirements of the Data Protection Act and the attendant regulations as well as best global best practices regarding the processing of your personal data. In this regard, you are required to acquaint yourselves with our data privacy statement (<https://geminia.co.ke/data-privacy-statement/>) which is intended to tell you how we use your personal data and describes how we collect and process your personal data during and after your relationship with us. As part of our engagement with you, we would like to communicate with you, where necessary, via email, WhatsApp, SMS, telephone, or post. To this end, we seek your consent to use your data in the following ways.

1. Collect, use, disclose, and/or process, and/or store your personal data that are relevant to your financial product or service and as permitted by law.

2. Collect, share, and transfer your personal data as described in our Data Privacy Statement published on our website (<https://geminia.co.ke/data-privacy-statement/>). Any such transfer to third parties shall be as per the requirements provided in law with adequate safeguards to respect and uphold your privacy.

By selecting the channel(s) below, I consent to receiving marketing information about Geminia Insurance Company's products and services as well as confirming the preferred channel to communicate with you.

☐ SMS ☐ WhatsApp ☐ Email ☐ Telephone

Declaration

I/We have read the above statements and agree that this declaration shall be held to be promissory and shall form part of the contract between me/us and Geminia Insurance Company Limited. Further that all statements and particulars entered are correct and have been accepted by me/us or with my full authority.

Customer Name:_____Phone number:_____

ID Number/Passport:_____E-mail address:_____

Signature:_____Date:_____

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 insured reserve the right to modify the terms of the policy.