PRIME INSURANCE COMPANY LIMITED
P.O BOX 30280,LILONGWE 3, MALAWI | (H/O) CHIEF KILIPULA BUILDING
Tel: +265 01 753012/757721 | Fax: +265 01 756320
Website: www.primeinsurancemw.com
Email: prime@primeinsurance.mw

HOUSEOWNERS/HOUSEHOLDERS PROPOSAL FORM

THE PROPOSER

Full Name: .....

Postal address: .....

E-mail address: .....

Profession or Occupation .....

Physical Address of the Premises at which the insurance is required.....

Plot Number ..... Location .....

Period of Insurance required: From: ..... To: ..... (*Both dates inclusive*)

QUESTIONS TO BE ANSWERED BY THE PROPOSER

All questions must be answered fully where a dash or tick may not be sufficient

THE BUILDINGS AND THEIR OCCUPANCY

1. Please state the nature of your residence (strike out the descriptions which do not apply)

   (a) Private Dwelling House
   (b) Self-Contained flat with separate entrance exclusively under your control
   (c) Rooms not self-contained

2. Of what materials is the dwelling constructed?

   Walls: .....

   Roof: .....

3. What is its height in storeys? .....

4. If there any outbuildings and how are they constructed?

   Walls: ..... Roof: .....

5. If any of the buildings to be insured are within 3.6metres of any other building state the distance, type of construction and use of such building:

   .....

6. Name and address of Mortgagee (if any): .....

   .....

7. Are the buildings in good state of repair and will they be so maintained? YES NO

8. If the dwelling is not occupied solely by you and your immediate family and servants, state number of other tenants, lodgers, boarders or paying guests

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.....

9. Are all windows burglar-barred? YES NO

10. Are the premises guarded between 1800 hours and 0600 hours the following morning every day?

.....

If so, who provides the guard services?.....

11. Is any security alarm installed? YES NO

If so, please provide details of the supplier and the alarm's capabilities

.....

.....

12. (a) For how many days (whether consecutive or not) is the dwelling likely to be left without an inhabitant during one year: .....

(b) State as a number of days the longest continuous period in any one year during which the dwelling is likely to be left without an inhabitant: .....

NOTE 1: Attention is drawn to a proviso in the Policy that cover against Theft will be suspended for any period in excess of 60 days during which the dwelling is left without an inhabitant therein unless specially agreed to by the Company.

13. Is there any profession business or trade carried on in the dwelling or in any portion of the premises of which the dwelling forms a part? YES NO

If 'Yes' give particulars. .....

.....

.....

PREVIOUS INSURANCE AND LOSSES

14. Have you any other Policies in force covering any of the perils to be insured against? YES NO

If 'Yes', please give particulars: .....

15. If this Proposal is in lieu of any insurance with this Company, please give particulars:

.....

16. If any Insurer has ever:-

(a) Declined to insure you.

(b) Required special terms to insure you.

(c) Cancelled or refused to renew your insurance.

(d) Increased your premium on renewal.

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In respect of any of the perils to which this Proposal applies, please give full particulars:

.....

17. Have the Buildings and/or Contents suffered damage by storm tempest or flood during the past five years? YES NO

If 'Yes', give particulars .....

.....

18. Have you ever sustained loss from any of the perils (other than those referred to in Question 17 above) to which the insurance is to apply? YES NO

If 'Yes', give particulars .....

19. Is cover required for domestic workers under the Workers Compensation Act? YES NO

If 'Yes' for how many employees .....

What is their total estimated annual earnings including bonuses, overtime, housing, etc? .....

THE PROPERTY TO BE INSURED

NOTE 2: The SUM TO BE INSURED MUST represent the FULL VALUE of the property, the Proposer being required to sign a declaration to that effect below. The insurance will be subject to Average which means that if at the time of loss or damage the sum insured is less than the full value of the property insured the amount payable is proportionately reduced.

20. **SECTION I - BUILDINGS** **SUM INSURED**

a) The structure of your private residence	K.....
b) Outbuildings used for domestic purposes	K.....
c) Landlord's fixtures and fittings and interior decorations	K.....
d) Swimming Pools, tennis courts, garden walls, patios, terraces, fences gates, paths and drives	K.....
e) Architect's and Surveyor's fees	K.....
Total All Items	K.....

21. **SECTION II - CONTENTS** **SUM INSURED**

a) Household furniture furnishing clothing and personal effects in the home or its domestic outbuildings or garages owned by any member of the Insured's family or domestic staff including motorised gardening equipment	K.....
b) Films tapes cassettes cartridges or discs up to the value as unused material or if purchased prerecorded at makers latest list price	K.....

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c) All other contents including fixtures and fittings for which Insured is liable valuables money visitors personal possessions and interior decorations	K.....
Total Section II	K.....
TOTAL ALL ITEMS	K.....

NOTE 3: No one article (furniture household appliances radio and television sets pianos and organs excepted) will be deemed of greater value than K10,000 or five per cent (5%) of the Total Sum Insured on the said Contents (whichever is the less) unless such article is especially declared as a separate item.

Specify here any such articles of greater value than 5 per cent of the Total Sum to be insured on the said Contents. Where applicable models and serial numbers should be stated.

ITEMS	SUM INSURED

N.B.: Money - being current cash currency and bank notes - is covered only in a total overall amount of K5,000.00.

NOTE 4: The amount of insurance on Platinum Gold and Silver articles Jewellery and Furs is limited to one-third of the Total Sum Insured on Contents unless the value thereof is stated and additional premium paid. If the said value exceeds the proportion mentioned please state the total value of such property.

NOTE 5: The insurance on Contents does not cover any part of the structure or ceiling of the Building wallpapers and the like (except as specifically mentioned in an item above) external television and radio antennae, aerials. aerial fittings, masts, towers (unless specifically requested below and included in the Total Sum Insured on Contents) nor any property to be insured under Buildings nor does it cover property more specifically insured under another Policy or unless specially mentioned deeds, bonds, bills of exchange, promissory notes, cheques, travellers cheques, securities for money stamps (other than current postal stamps) documents of any kind manuscripts medals coins (other than current coins) motor vehicles and accessories and livestock.

22. Is insurance required to extend the Policy in respect of external television and radio antennae, serials ,aerial fittings, masts and towers? YES NO
    (a) If 'Yes' for what value? .....
    (b) Where the Buildings are insured is cover to include Storm Damage? YES NO
    (c) Where only the Contents are insured is cover to include all insured Perils? (See Note 3 above) YES NO

N.B.: Where Contents only are insured the Sum Insured fixed should be increased to take into account the value of the external television and radio aerials etc.

23. Is insurance required against Personal Liability? YES NO

NOTE: Cover up to K500,000 limit is available at K500.00 additional premium.

NOTE 6: Loss of or damage to any electrical machine, apparatus or any portion of electrical

installation arising from over-running, excessive pressure, self-heating or leakage cause is excluded from cover afforded by the policy.

24. Would you like the 'Electrical Clause' exclusion to be deleted? YES NO

If 'Yes', for what limit? .....
(Limit is based on the value of at least two highest valued electrical machines)

DECLARATION

I/We do hereby declare that the above answers are true and that I/We have withheld no material information regarding this Proposal. I/We agree that this Declaration and the answers given above, as well as any further Proposal or Declaration or Statement made in writing by me/us or any one acting on my/our behalf shall form the basis of the Contract between me/us and NICO General Insurance Company Limited and I/We further agree to accept indemnity subject to the Terms Exceptions and Conditions set forth and endorsed in the Company's Policy. I/We also declare that THE TOTAL SUM INSURED REPRESENTS NOT LESS THAN THE FULL VALUE OF THE PROPERTY as above mentioned.

DATE: ..... **Signature of Proposer** .....

No insurance is in force until the Proposal has been accepted by the Company, and the Premium or a Deposit paid except as provided by an Official Covering Note issued by NICO General Insurance Company Limited.

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NICO General Insurance Company Limited
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NICO CENTRE, P O Box 30421, Capital City, Lilongwe 3; Tel: 01 751366; Fax: 01 751365; E-mail: llnico@nicogeneral.com
MPICO HOUSE, P.O. Box 226, Mzuzu; Tel: 01 334876; Fax: 01 334564
www.nicogeneral.com

HOUSEHOLDERS - *CONTENTS* CHECKLIST

PLEASE INDICATE SERIAL NUMBERS AND MODEL AND/OR ANY DESCRIPTIVE INFORMATION FOR ITEMS WHERE THESE ARE APPLICABLE, E.G. VIDEOS, MUSICAL INSTRUMENTS.

PLOT NO. ..... LOCATION .....

1. BATHROOM AND TOILET	**First**	**Second**	**Total**
Curtains and loose carpets	K.....	K.....	K.....
Towels and toiletries	K.....	K.....	K.....
Shaving equipment	K.....	K.....	K.....
Hairdrier	K.....	K.....	K.....
Other electrical appliances	K.....	K.....	K.....
Sundries	K.....	K.....	K.....
Total (1)	K.....	K.....	K.....

2. ENTRANCE HALL AND PASSAGES AND BUILT-IN CUPBOARDS IN PASSAGES	
Curtains and loose carpets	K.....
Paintings and Ornaments	K.....
Tables and Chairs	K.....
All electrical appliances	K.....
Contents of built-in cupboards	K.....
Sundries	K.....
Total (2)	K.....

3. Lounge		6. **Study/Work Room**	

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Curtains and loose carpets	K.....	Curtains and loose carpets	K.....
Paintings and ornaments	K.....	Paintings and ornaments	K.....
Tables and chairs	K.....	Tables and chairs	K.....
Lounge Suite	K.....	Desk and bookcases	K.....
Display Cabinet	K.....	Books	K.....
Display Articles	K.....	Reading lamp	K.....
TV, radio & video recorder & games	K.....	Typewriter	K.....
Hi-Fi and cassette players	K.....	Sewing machine	K.....
Records and cassettes	K.....	Knitting machine	K.....
Reading lamps	K.....	Cameras and projectors	K.....
Liquor and glass sets	K.....	Fire arms and binoculars	K.....
Sundries	K.....	Sports equipment	K.....
		Sundries	
Total (3)	K.....	**Total** (6)	K.....

4. **Dining Room**		7. **Kitchen**	
Curtains and loose carpets	K.....	Furniture and curtains	K.....
Paintings and ornaments	K.....	Stove	K.....
Tables and chairs	K.....	Microwave	K.....
Dresser/sideboard	K.....	Refrigerator(s) contents	K.....
Display articles	K.....	Deep freezer(s) contents	K.....
Tea trolley(ies)	K.....	Dish washer	K.....
Hot tray(s)	K.....	Mixer and blender	K.....
Reading lamps	K.....	Vacuum Cleaner and Polish	K.....
Other electrical appliances	K.....	Other electrical appliances	K.....
Dinner services	K.....	Cutlery and crockery	K.....
Cutlery and silverware	K.....	Kitchen Utensils	K.....
Glassware	K.....	Groceries	K.....
Sundries	K.....		K.....
Total (4)	K.....	**Total** (7)	K.....
5. **Family Room**		8. **Servants Quarters**	
Curtains and loose carpets	K.....	Curtains and loose carpets	K.....
Paintings and ornaments	K.....	Paintings and ornaments	K.....
Tables and chairs	K.....	Bed and mattresses	K.....
Piano	K.....	Wardrobe	K.....
Organ	K.....	Tables and chairs	K.....
Other Musical Instruments	K.....	Radio	K.....
TV, radio & video recorder & games	K.....	Linen, blankets and bedding	K.....
Hi-Fi and cassette player	K.....	Clothing and footwear	K.....
Records and cassettes	K.....	Sundries	K.....
Reading lamps	K.....		
Liquor and glass sets	K.....		
Sundries	K.....		
Total (5)	K.....	**Total** (8)	K.....
9. **Laundry**		12. **Bedroom** (2)	
Curtains	K.....	Curtains and loose carpets	K.....
Washing machine	K.....	Paintings and ornaments	K.....
Tumble Drier	K.....	Reading lamps	K.....
Iron/Ironing machine x 3	K.....	Tables and chairs	K.....
Other electrical appliances	K.....	Wardrobe (Contents)	K.....
Laundry	K.....	Beds and beddings	K.....

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Sundries	K.....	Mosquito net(s)	K.....
		Sundries	
Total (9)	K.....	**Total** (12)	K.....
10. **Garage/Workroom**		13. **Bedroom** (3)	
Work-bench and vice	K.....	Curtains and loose carpets	K.....
Hand Tools	K.....	Paintings and ornaments	K.....
Bicycles	K.....	Dressing table	K.....
Camping equipment	K.....	Wardrobe (Contents)	K.....
Braai equipment	K.....	Mosquito net(s)	K.....
Lawn-mower and roller	K.....	Beds and beddings	K.....
Other gardening equipment	K.....	Toys	K.....
Gardening tools and Polish	K.....		
Swimming pool equipment	K.....		
Sundries			
Total(10)	K.....	**Totals** (13)	K.....

11. **Bedroom** (1)		14. **Guest Wing**	
Curtains and loose carpets	K.....	Curtains and loose carpets	K.....
Paintings and ornaments	K.....	Furniture	K.....
Reading Lamps	K.....	Stove	K.....
Tables and chairs	K.....	Refrigerator(s)	K.....
TV,Radios,Video Recorder & Games	K.....	Deep-Freezer	K.....
Wardrobe (Contents)	K.....	TV,Radio,Video Recorder &	
Dressing table	K.....	Games	K.....
Beds and beddings	K.....	Wardrobe (Contents)	K.....
Refrigerator (Contents)	K.....	Dressing table	K.....
Other electrical appliances	K.....	Beds and beddings	K.....
Sundries	K.....	Reading lamps	K.....
		Dressing table	K.....
		Other electrical appliances	K.....
		Sundries	K.....
Totals (12)	K.....	**Totals**(14)	K.....
15. MISCELLANEOUS			
Garden Furniture	K.....		
Total (15)	K.....		

SUMMARY OF TOTALS	
In respect of the contents of:-	
All bedrooms (1)	K.....
All bathrooms and toilets (2)	K.....
Entrance hall and passages and built-in cupboards in passages (3)	K.....
Lounge (4)	K.....
Family Room (5)	K.....
Dining Room (5)	K.....
Study/Work Room (7)	K.....
Kitchen (8)	K.....
Laundry (9)	K.....
Servants Quarters (10)	K.....
Garage/Workroom (11)	K.....
Miscellaneous (12)	K.....

Sub-Total	K……
Add an amount to provide for possible future purchases	K…… K…… K……
Sub-Total	K……
Add an amount to provide for the expected inflation 20%	K……
Grand Total	K……

NAME ……

SIGNATURE …… **DATE:** ……