

*Home Insurance Proposal*

Insurance Packages

‘Silver’ and ‘Gold’

Insurance Proposal

**Insurance Packages ‘Silver’ and ‘Gold’**

**To whom it is addressed**

The Insurance packages **‘Silver’** and **‘Gold’** are designed to provide insurance cover to Private Dwellings, Apartments and Holiday Homes which are used for private purposes by the Proposer and his family or rented out to third parties and comply with the conditions mentioned hereunder.

**Conditions**

* The Private Dwelling to be used as private residence by the Proposer and his family and also for rental purposes.
* These Insurance packages are not offered in case the Buildings or part thereof are used for business purposes, for practicing any profession or used as tourist lodgings.
* The Buildings to have been constructed with bricks or concrete or stone or reinforced concrete and roofed with concrete and tiles.
* The Buildings to have been constructed after the year 1985.
* The Private Dwelling to be located in areas of the Republic of Cyprus where the Government of the Republic of Cyprus exercises effective control.

**Choice of Package**

The two separate Insurance packages’ ‘Silver’’ and ‘’Gold’’ have been specifically designed to provide the owners of Private Dwellings the choice, between the wide coverages, of the plan that best suits their own needs and demands.

**Instructions for completing the Proposal**

* Tick (**🗸**) where appropriate, provide full answers in all the questions of the Insurance Proposal Form and sign the Declaration in Part I.
* Contact the Company or your Insurance Intermediary for any clarification or other information you may require.
* Hand over the Proposal Form, duly completed and signed, to the local offices of the Company or to your Insurance Intermediary.

 **A. Proposer’s Personal Details**

|  |  |
| --- | --- |
| Name       | Surname       |
| Identity Card No.       | Date of Birth       | Nationality       |
| Home Telephone No.       | Mobile Tel. No.       | Fax       |
| E-mail address        |
| Full address of the property to be Insured       |
|       | City       | Postal Code       |
| Correspondence address (if it differs from the above)       |
| Specific Occupation       |
|  |
| **(Declare the following personal details of your spouse who permanently resides with you)** |
| Spouse’s Full Name       |
| Identity Card number       | Date of Birth       |
| Specific Occupation       |

 **Β. Period of Insurance**

 Day Month Year Day Month Year

 / /

 / /

 From                To

 **C. Insurance Package**

Please choose the insurance package of your own preference and ensure that it meets with your demands and needs:

 **‘Silver**’ (Section A & B) [ ]  ‘**Gold**’ (Section A, B & C) [ ]

 **D. Information for the Buildings**

|  |  |
| --- | --- |
| 1) | Type of Dwelling / Year of Construction: |
|  | a) | House | [ ]  | Permanent Residence | [ ]  | Year of Construction \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  | Apartment | [ ]  | Holiday Home | [ ]  | Tourist Lodge | [ ]  |

|  |  |
| --- | --- |
| b) | State the number of storeys and in case of an Apartment, state the number of the Apartment and the floor.  |

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| c) | Is the Dwelling adjacent to any other premises? If YES, state the use of the adjacent premises.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 2) | Do the Buildings have any basement? If YES, give details.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 3) | Are you the sole owner of the Buildings? If NO, give details.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 4) | Do the Buildings rented out to third parties? If YES, state if the Buildings are rented out on a continuous period of 12 months or temporarily for a period of less than 12 months.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| 5) | Confirm that: |
|  | a) | The Buildings are of brick / concrete / stone / or reinforced concrete construction and roofed with concrete and tiles.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |
|  |  |  |  |
|  | b) | No part of the Buildings is used for business purposes or for practicing any profession.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |
|  | **If you answered NO, to any of the questions a), b) above, contact your Insurance Intermediary or the Company before submitting the Insurance Proposal Form.**  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

 **Ε. General Information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) | Is there any mortgage or other charge against the property to be insured? If YES, state the name of the mortgagee and whether a mortgage clause is required.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 2) | a) | Have you submitted any claim in the last 5 years for loss or damage in relation to any coverage provided under this Insurance Policy? |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |
|  | b) | Have you suffered any loss or damage in the last 5 years in relation to any dwelling or its contents? |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 3) | State whether you or your spouse suffer from any permanent physical or mental disorder or illness or physical disability. |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

|  |  |  |
| --- | --- | --- |
| 4) | State whether you have ever had: |  |
|  | a) | any Proposal of Insurance rejected or subjected to special terms. |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |
|  | b) | any Insurance Policy cancelled or refused to renew.  |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |
| 5) | Is there any other Insurance Policy in force covering the property to be insured or any part thereof? |

|  |  |
| --- | --- |
|  YES | NO |
| [ ]  | [ ]  |

 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 6) | State whether the Buildings have:  |

|  |  |
| --- | --- |
|  YES | NO |

 |
|  | a) | alarm system | …………………………………………………………………………………………….. |

|  |  |
| --- | --- |
| [ ]  | [ ]  |

 |
|  | b) | fire smoke detectors | …………………………………………………………………………………………….. |

|  |  |
| --- | --- |
| [ ]  | [ ]  |

 |
|  | c) | dead-bolt locks | …………………………………………………………………………………………….. |

|  |  |
| --- | --- |
| [ ]  | [ ]  |

 |
|  | d) | close circuit system (CCTV) | …………………………………………………………………………………………….. |

|  |  |
| --- | --- |
| [ ]  | [ ]  |

 |
|  | e) | other security measures | …………………………………………………………………………………………….. |

|  |  |
| --- | --- |
| [ ]  | [ ]  |

 |
|  | If you have answered YES to any of the questions 2 – 6 above, provide details.  |  |

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| 7) | ΔState any other material fact concerning the property to be insured.  |

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **F. Proposed Sums Insured**

The proposed sums should represent the actual value of the property to be insured, so as to avoid negative repercussions due to underinsurance (see Insurance Policy, Terms and Conditions, Claims Condition 6) - «Underinsurance». After you carefully read the Definitions and Notes hereunder, state the proposed sums for insurance.

|  |  |
| --- | --- |
| **1)** | **Buildings -**  |
|  | The term ‘Buildings’ shall mean the building of the private dwelling or private apartment which is situated at the Location stated in the Schedule, including the fixtures and permanent fittings (such as doors, windows, built-in cupboards, drawers, built-in electrical appliances, false ceilings, solar water heaters, plumbing and electrical installations, photovoltaic solar panels and associated equipment, security systems, installations for heating, air conditioning, ventilation and water supply). The term ‘’Buildings’’ also includes any permanent external structures (such as pergolas, exterior television antennas and satellite dishes, exterior security system installations, sheds, walls, surrounding walls/fences, garages, swimming pools, patios, inner courtyards, entrances or other permanent structures, outbuildings and installations).The term ‘Buildings’ does not include:any part of the Contents, trees, plants or grass, as well as ownership of any dock, piers, sea walls or other similar structures. |
| **2)** | **Contents –**  |
|  | The term ‘’Contents’’ shall mean the movable property which belongs to the Proposer or to any member of his family permanently residing with him under the same roof and whilst this property is kept within the Buildings. It includes the personal effects, Valuables, furniture and household equipment. It also includes servants’ personal belongings. The term ‘Contents’ does not include:any part of the Buildings, wallpapers, motor vehicles, caravans, watercrafts, money, foodstuff, beverages and other provisions, explosives, pets, computer system records, documents of any kind as well as any items, samples or other property related with the profession of the Proposer or of any member of his family. It does not also include any part of the Contents which are found in the garden or in any open area of the Building. |

|  |  |
| --- | --- |
| **1) Buildings -**a) Buildings (excluding those mentioned hereunder which are insured separately) ………………................................b) Photovoltaic Solar Panels ……………….......................................................................................................c) ………………..................................................................................................................................................Total Proposed Sum Insured for the Buildings**2) Contents -**a) (\*) Contents (Excluding those mentioned hereunder which are insured separately) ………………..............b) (\*) ……………….............................................................................................................................................c) (\*) ……………….............................................................................................................................................d) (\*) ……………….............................................................................................................................................Total Proposed Sum Insured for the Contents(\*) **Notes*** The Company’s maximum annual limit of liability for each single item of the Contents and/or Valuables is limited to €5.000, unless such item is declared and insured separately. In such a case, this Proposal should be accompanied by the required documents evidencing their value, such as invoices or valuations from specialists.
	+ - * The Company’s maximum annual limit of liability in relation to the total of the Valuables included in the Contents, is limited to €15.000, unless such items are declared and insured separately. In such a case, this Proposal should be accompanied by a detailed list of the Valuables.
 | Sum to be Insured (€) |
| ………………...………………...………………... |
| €       |
| ………………...………………...………………...………………... |
| €       |
|  |
| **TOTAL PROPOSED SUM INSURED** | €       |

|  |
| --- |
| **INSURANCE PACKAGES** |
| **SECTION A** | **Insurance Perils and Covers** | **Silver** | **Gold** |
| Fire | **** | **** |
| Lightning | **** | **** |
| Thunderbolt | **** | **** |
| Bush Fire | **** | **** |
| Fire caused by Short Circuit | **** | **** |
| Smoke form Fire | **** | **** |
| Explosion | **** | **** |
| Earthquake or Volcanic Eruption | **** | **** |
| Storm or Tempest and Flood | **** | **** |
| Theft by actual Forcible and violent entry to or exit from the Building | **** | **** |
| Impact on the Building | **** | **** |
| Aircraft Fall | **** | **** |
| Accidental Leakage of Water or Domestic Oil | **** | **** |
| **SECTION B** | Cost for locating the cause of water leakage | **** | (€500) | **** | (€500) |
| Cost of lost Water or Domestic Oil | **** | (€300) | **** | (€300) |
| Public Liability | **** | (€100.000) | **** | (€100.000) |
| Expenses for Temporary Accommodation or Loss of Rent | ****  | **** |
| Architects’ and Surveyors’ Fees | **** | **** |
| Debris Removal | **** | **** |
| Accidental Breakage of Mirrors | **** | (€1.000) | **** | (€1.000) |
| Personal Accident (For the Insured and husband/wife) | **** | (€20.000) | **** | (€20.000) |
| Foodstuffs, Drinks and other Supplies | **** | (€500) | **** | (€500) |
| Money | **** | (€500) | **** | (€500) |
| **SECTION C** | Contents in the Open  | **х** | **** | (€5.000) |
| Accidental Damage to External Aerials and Security Systems | **х** | **** | (€500) |
| Accidental Fall of Trees or Branches or Poles | **х** | **** | (€500) |
| Malicious Damage  | **x** | **** |
| Riots, Strikes, Lock-Out | **х** | **** |
| New for Old Contents  | **х** | **** |
|  | **Notes:** |  |  |
|  | **** | Basic Covers and Benefits  |  |  |
|  | **х** | Covers not provided  |  |  |

The Insured Perils and Covers are listed above in a concise form. The basic Terms, Exceptions and Conditions are included in the Insurance Policy, a copy of which is available on request. For more details please contact the offices of Commercial General Insurance or your Insurance Intermediary.

 **G. Instructions for Premium Payment (Please mark 🗸** **accordingly)**

|  |
| --- |
| [ ]  (1) Settlement in ONE instalment[ ]  (4) Settlement in FOUR consecutive monthly instalments. (One-off charge €4.00)[ ]  (7) Settlement in SEVEN consecutive monthly instalments. (One-off charge €10.00). This choice applies only for annual policies.**Note: In all cases the 1st instalment is due for payment on or before the starting date of the Period of the Insurance.** |
| [ ]  **BANKING MANDATE** For settlement of the above instalments via Direct Debit please complete and sign the specific Mandate, available at the Company’s Offices or on your Insurance Intermediary. For every Policy a separate Mandate must be completed. |

 **H. Data Protection**

In accordance with the provisions of the General Data Protection Regulation (GDPR) (EU) 2016/679, as well as any other relating legislation, Commercial General Insurance Ltd (CGI), in its capacity as Controller, collects and processes personal data and/or sensitive data, for the purpose of providing the services requested by the Proposer under the present Policy. CGI may transfer personal data to a third party to the extent that this is required as a contractual necessity, on the ground of legal obligations and/or protection of its legitimate interests. The personal data will be recorded in an electronic or any other form to the personal data filing system(s), within the meaning of the Law, maintained by CGI or by any other company or person with which co-operation exists and/or an agreement is in force.

The recipients of the personal data shall be the duly authorised personnel of CGI and of any other company or person with which co-operation exists and/or a relevant agreement is in force. The processing of such data is confidential and shall be carried out only by persons acting under the direct or indirect authority of CGI. CGI has taken all appropriate measures to ensure that these persons follow the guidelines of the GDPR regarding the safe processing of personal data.

In relation to the personal data that CGI processes, the Proposers have the right to request:

* Access to their personal data.
* Correction of their personal data.
* Erasure of their personal data.
* That CGI stops processing their personal data.
* The Restriction of Processing of their personal data.
* The Transfer of their personal data to another party.

Proposers who wish to exercise their rights in accordance with the provisions of the GDPR or any other relating legislation or require further information as to the way CGI processes personal data may contact CGI’s Data Protection Officer at CGI’s Head Office at Commercial Union House, 101 Arch. Makarios III Avenue, 1071, Nicosia or through email at DPO@cgi.com.cy.

Further information regarding data protection can be found in CGI’s Privacy Notice which is available at <http://www.cgi.com.cy>.

**Sensitive Data**

Commercial General Insurance Ltd (CGI) collects health data through this Proposal, which amount to sensitive personal data, hence your consent is required in order to be entitled to process it. Processing of such personal data will allow CGI to underwrite the risk. Please note that you are not obliged to provide CGI with your consent and you also have the right to recall your consent at any time, after providing it, by contacting the Data Protection Officer of CGI. However, in the event that the Proposer refuses to authorise or objects to the processing of the personal data relating to him, CGI reserves the right not to accept the Proposal for insurance or terminate the insurance contract or reject any claim for compensation. Personal data will be retained for the minimum amount of time required under CGI’s contractual or legal obligations.

**Statement of consent (Please mark** **🗸** **accordingly)**

[ ]  **I agree** to the processing of my sensitive personal data by CGI for the aforementioned purposes.

[ ]  **I do not agree** to the processing of my sensitive personal data by CGI for the aforementioned purpose.

**Consent for Commercial Purposes (Please mark 🗸** **accordingly)**

|  |  |
| --- | --- |
| I would like to be informed of any other insurance services or products offered by Commercial General Insurance Ltd (CGI) from time to time and, towards that, I give my consent that CGI processes my personal data for the purposes of promoting other insurance related services or products to me. | **[ ]  YES [ ]  NO** |

 **I. Declaration**

I hereby declare that the information provided in this Proposal is correct and that I have not concealed, distorted or misrepresented any fact. I also agree that this Proposal and Declaration shall be binding upon me, shall form the basis of this Policy between myself and Commercial General Insurance Ltd (CGI) and will be considered as forming part of the Policy to be issued.

I also declare that CGI and/or the Insurance Intermediary pursuing activities of insurance distribution on CGI’s behalf, whose details appear below, has provided me with all the general, precontractual and other information required by the Law on Insurance and Reinsurance Services and Other Related Issues of 2016 and by the relevant Regulations, or any Law or Regulations substituting or amending the same.

I further declare that I have examined and fully understood all the information provided to me in accordance with the provisions of the above Law.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Proposer Date**

***The Proposer’s attention is particularly drawn to the following:***

*a) The Insurance Proposal is the basis of and forms part of the Insurance Policy and in the event of fraud, misrepresentation, misdescription or non-disclosure of any material fact by the Proposer or anyone acting on his behalf, would render this Insurance Policy void, from inception.*

*b)**The insurance will not come into force until the Insurance Proposal is accepted by the Company.*

*c) In case the Insured Property is transferred or sold or is subject to a transfer or sale agreement, the insurance ceases to apply.*

*d) The insurance cover is suspended and has no validity for specific Insured Perils, Covers and other Benefits for any period in excess of 90 consecutive days during which the Buildings are left unoccupied. Therefore, the Company is not liable for any Loss or Damage occurring after the commencement of the 91st day. For more information, we urge you to read carefully your Insurance Policy.*

Name of Insurance Intermediary: