

	ALL RISK INSUR	ANCE	PROPOSAL FORM	
AGENCY:			POLICY NO.:	
PROPOSER'S F	:ULL NAME:			
	ULL ADDRESS:			
	OCCUPATION (or if married woman that of husb	and)		
PROPOSER'S N				
1. At what inte	ervals are the settings and fastenings of all jewe	llery to b	e insured overhauled by a competent	jeweller:
2. Do you requ	uire cover for:			
(a) Ghana Only		(a)		
(b) World-wide		(b)		
3 (a) Have you	ı been previously insured against Burglary,	(2)		
	Risks? If so, with which Company?	(a)		
(b) Have ver	, aver made a plaim for loss under such	(b)		
	u ever made a claim for loss under such f so, give full particulars.	(b) [
4. Hanney Co.	annan e an Undamentan acca			
	mpany or Underwriter ever- , cancelled or refused to renew your insurance	(2)		
(a) declined,	cancelled of refused to reflew your insurance	(a)		
(a) required an increased premium or imposed special conditions		(b) (
5 Do you wish	h to take out Householder's Comprehensive Insu	iranco or	your housahold offacts?	
5. Do you wisi	Tto take out householder's comprehensive mist	arance or	your nousenoid effects:	
ITEM NO.	FULL DESCRIPTION OF EACH ARTICLE N.B: Cover cannot be given on watches, photographic equipmen etc. unless the mater's number is quoted on this Form	t	MAKER'S NO. (Watches, Binoculars, Photos Equipment, etc.)	VALUE C.
1.				
2.				
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TOTAL

DECLARATION

I/We hereby declare and warrant that the articles mentioned above are my own property and that the above questions are fully and truthfully answered, that I/We have not withheld or concealed any circumstance affecting the proposed Insurance and I/We agree that this declaration shall be deemed to be of a promissory nature and effect and the basis of the contract between me and HOLLARD INSURANCE GHANA LIMITED and I am willing to accept the Company's Policy subject to the terms and conditions prescribed by the Company therein and to pay the premium thereon.

Date: DDMMYYYY	Signature:	
I have known the Proposer for to issue a Policy.	years. He is of good character and repute and I can recommend the Com	ıpany
Date: DDMMYYYY	Signature:	

Liability does not commence until the Proposal has been accepted by the Company and the first Premium paid.