

## PROPOSAL FORM FOR GOODS IN TRANSIT

AGENT / BROKER  ACCOUNT NO.:  POLICY NUMBER

### SECTION 1

#### (A) - INDIVIDUAL CUSTOMER DETAILS

i) Full Name of Proposer     
(First Name) (Second Name) (Other Names)  
 Date of Birth   -   -     Gender   Marital Status  Single  Married  
 Nationality  Citizenship

ii) Contact Details: (mobile):  (tel):   
 (email address):   
 (Postal Address):  (Postal code):  (town/ city):   
 Residential Address (Physical)

iii) Identification Doc. 

Identification Type	Identification Number	Expiry Date
<input type="checkbox"/> Identity Card	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Passport	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Asylum	<input type="text"/>	<input type="text"/>

(Attach a copy of Identification Document)

iv) Income Tax No. (PIN)  (Attach a copy of PIN Certificate)

v) Are you Employed?  Yes  No OR ii) Self Employed?  Yes  No

vi) If employed, state your current employer.

vii) Occupation  Sector

viii) Source of Income  Salary  Business Proceeds  Pension (Recipient of Annuity)  Rent (Real Estate)  
 Non-Income generating dependant

ix) Source of Wealth  Legal Settlement  Royalties  Inheritance  Donations  
 Winnings  Savings  Sale of Investment  Sale of Property  
(Lottery/ Casino/Bettings)  
 Rent (Real Estate)  Employment  Pension  Business Proceeds

x) Full Name of Next of Kin  Relationship   
 (Telephone No.):

#### (B) - LEGAL ENTITY, CORPORATE OR SME CUSTOMER DETAILS

i) Trade Name   
 Legal/Registered Name   
 Registration Number   
 Country of Incorporation  Country of Parent Company if any

ii) Contact Details (mobile):  (tel):   
 (email address):   
 (Postal Address):  (Postal code):  (town/ city):   
 Physical Location

iii) Nature of Business  Sector

- iv) Income Tax No. (PIN)                      (Attach a copy of PIN Certificate)
- v) Beneficial Owner (Attach CR12)
- vi) Source of Income  Business Proceeds  Rent (Real Estate)  Donations  Government Funding
- vii) Source of Wealth  Legal Settlement  Royalties  Interest  Savings  
 Court Order  Sale of Property  Sale of Investment  
 Government Funding  Shareholders Contribution

## SECTION 2 - PROPOSAL DETAILS

i) Period of insurance From    -    -      To    -    -

- Mode of conveyance : \_\_\_\_\_
- Territorial limits : \_\_\_\_\_
- If cover is required on specified vehicles, please complete the schedule below :

Vehicles				Trailers			
Make & Description of Vehicle	Reg. Number	Carrying capacity (tonnage)	Sum Insured	Make & Description of Trailer	Reg. Number	Carrying capacity (tonnage)	Sum Insured

- (i) How will the goods be packaged whilst transporting :

(ii) Will you transport any of the following;

- a) Wines and spirits?  Yes  No
- b) Fragile articles?  Yes  No
- c) Explosive or hazardous goods?  Yes  No

- Will you use hired vehicles? If so give details :  Yes  No

- a) How do you ensure safety of the goods when the vehicle(s) are temporarily garaged during transit? Please explain :

b) Are the vehicles fitted with :

- i) Tracking Devices  Yes  No
- ii) Radio Communication  Yes  No
- iii) Engine Immobilizer  Yes  No

Any other Devices (please specify) \_\_\_\_\_

### LIMIT OF LIABILITY

- a) In respect of any one consignment. Kshs : \_\_\_\_\_
- b) In respect of any one Period of insurance. Kshs : \_\_\_\_\_
- State your Estimated Annual Carry. Kshs : \_\_\_\_\_

## INSURANCE/LOSS HISTORY

9. Are you now or have you been insured for this type of Insurance?  Yes  No  
If yes, please give name of Insurer and Policy Number :

10. Have you ever suffered a loss in connection of the insurance now proposed?  Yes  No  
If yes, please give details of loss(es) in the last three years Year/s :

Year	Cause of Loss	Brief details of each loss	Amount

11. What precautions do you now engage to avoid recurrence of such claim/s?

12. Has any Insurance Company ever;

- a) Cancelled your Policy?  Yes  No  
b) Declined to insure you?  Yes  No  
c) Declined to renew your Policy?  Yes  No  
d) Imposed any special terms?  Yes  No  
e) Declined any claim?  Yes  No

If the answer for any of the above reasons is 'YES', Please give detail:

13. The primary mode of delivery of your policy document and other official documents shall be via email.  
Kindly provide your email address below:

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## CONSENT & DECLARATION

I/We consent to The Heritage Insurance Company Kenya Limited:

- i) Collecting, using, disclosing, processing and/or storing my/our personal data for purposes that are relevant to my policy and as permitted by law;
- ii) Collecting and sharing my personal data information in accordance with the privacy policy on its website (<https://www.heritageinsurance.co.ke/>): and
- iii) Transferring my/our personal data to their reinsurers and affiliated companies for purposes of insurance and as permitted by law.

I/We hereby declare the truth and correctness of the above statements and particulars, and that my/our answers herein are in my/our full knowledge and have been written by me or with my full authority.

I/We hereby agree that this Proposal and Declaration shall form the basis of the contract between me/us and the Heritage Insurance Company Kenya Limited.

Proposer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*No liability (except for the period stated in the Insurer's Official Cover Note) is undertaken until the Proposal is accepted by the Insurer and the premium paid.*