

## PROPOSAL FORM FOR PUBLIC LIABILITY - GENERAL PREMISES RISK

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 

<input type="checkbox"/> Legal Settlement	<input type="checkbox"/> Royalties	<input type="checkbox"/> Inheritance	<input type="checkbox"/> Donations
<input type="checkbox"/> Winnings <small>(Lottery/Casino/Bettings)</small>	<input type="checkbox"/> Savings	<input type="checkbox"/> Sale of Investment	<input type="checkbox"/> Sale of Property
<input type="checkbox"/> Rent <small>(Real Estate)</small>	<input type="checkbox"/> Employment	<input type="checkbox"/> Pension	<input type="checkbox"/> Business Proceed

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

1. Period of insurance From    -    -      To    -    -
2. Limit of Indemnity Required : Any one event : (Kshs.) \_\_\_\_\_  
Any one period of Insurance : (Kshs.) \_\_\_\_\_
3. Premises / Location to be covered : \_\_\_\_\_

## SECTION 3 - QUESTIONNAIRE

4. Are you now or have you ever been insured in connection with this class of risk?  Yes  No  
If YES give name of company : \_\_\_\_\_
5. Has any company:  
(a) Declined your Proposal?  Yes  No  
(b) Cancelled or refused to renew your Policy?  Yes  No  
(c) Required an increased Premium or Special Conditions ?  Yes  No
6. Do you undertake work away from your Premises?  Yes  No  
If YES state estimated annual wages : \_\_\_\_\_
7. Are Elevators Hoists Cranes or other power operated lifting tackle used on your premises?  Yes  No
8. Are your premises and plant properly maintained and in a good state of repair?  Yes  No
9. Do you wish the policy to include your legal liability for: Bodily injury, disease, loss or damage caused by goods or commodities manufactured, sold, supplied, serviced, tested or processed by you?  Yes  No  
If YES, please supply catalogue or details and state.  
(i) Estimated Annual Turnover  
(ii) Limit of Indemnity required :  
Any one event (Kshs) : \_\_\_\_\_  
Any one period of insurance (Kshs) : \_\_\_\_\_
- If the risk proposed is a factory:  
(a) Do you supply commodities for use in the Aircraft industry  Yes  No  
(b) Do you supply commodities for use in atomic energy establishments.  Yes  No
10. **APPLICABLE TO HOTELS ONLY**  
Is liability in respect of Guests' Effects whilst on Proposers' premises arising from FIRE, THEFT or ACCIDENTAL DAMAGE required?  
Limit of Indemnity required :  
Any one event (Kshs) : \_\_\_\_\_  
Any one period of insurance (Kshs) : \_\_\_\_\_

11. **APPLICABLE TO HOTELS, PUBLIC HALLS, etc., with CAR PARKS.**

Is Liability for loss of or damage to customers' cars parked or garaged to be insured?  Yes  No

If YES please state :

(a) Is a charge made ?  Yes  No

(b) If a notice disclaiming Liability appears :  Yes  No

(c) Are tickets issued bearing a similar disclaimer ?  Yes  No

(d) The maximum capacity of the garage or parking place : \_\_\_\_\_

*N.B. If the car park is part of an Hotel, Fire and Theft risks should be included in FIRE & BURGLARY policies. The cover is not applicable to Garages or Parks used for Motor Trade purposes.*

12. Have any claims been made upon you during the past three years in connection with accidents to Third Parties?  Yes  No

If YES, give details in space provided below :

<i>Detailed description of Contents to be insured</i>				
<i>Sum Insured</i>				
Year	Cause of Accident	Loss or Damage – Nature of Injury	Amount Paid	Amount Outstanding

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

\_\_\_\_\_

**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.*

# PUBLIC LIABILITY INSURANCE

## SUMMARY OF COVER

The Company indemnifies Manufacturers, Hotel, Boarding House and Restaurant Keepers, Retail Shop Proprietor and the like against their legal liability for

- a. Bodily injury to or disease contracted by any person
- b. Loss of or damage to material property.

Caused by accidents happening in connection with the Business, within the premises.

## SUMMARY OF EXCLUSIONS

- a. Bodily injury to or disease contracted by any employee of the Insured arising out and in the course of his employment by the insured.
- b. Loss of or damage to property belonging to or under the control of Insured or that part upon which insured has been working.
- c. Damage to property caused by subsidence vibration or removal or weakening of support.
- d. Bodily injury disease loss or damage caused by the ownership possession or use by or on behalf of Insured of lifts elevators cranes hoists or other power operated fitting tackle as specified in the policy or any mechanically propelled or horse drawn vehicles air or water craft.
- e. Bodily injury disease loss or damage caused by
  - (i) defective drains sewers sanitary arrangements or pollution.
  - (ii) remedial or other treatment or advice professional neglect error or omission of the Insured.
  - (iii) Flood.
  - (iv) any commodity which the Insured has manufactured sold supplied repaired serviced tested or processed after such commodity has been removed from the premises occupied by the Insured.
  - (v) Work away from the Premises.
  - (vi) Ownership or tenure of any land or building not specified.
- f. Contractual Liability
- g. War and Kindred Risks.
- h. Nuclear contamination risks.