



COMMERCIAL CAR PROPOSAL FORM

IMPORTANT NOTICE: PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING THIS PROPOSAL FORM

The purpose of this Proposal Form is to provide the Company with all the material information that is likely to influence the assessment of your Proposal. When completing the Proposal or having your agent complete it for your signature you should complete all questions fully. (Ticks & Dashes are not sufficient) and where you are in doubt as to whether a particular piece of information is material you should include it, Failure to disclose all facts may invalidate the cover under your Policy and it is an offence to make a false statement or withhold any material information for the purpose of obtaining a certificate of Motor Insurance.

Personal Details

Agency: Broker: Direct:

Intermediary:

Policy:

Client Name:

ID/Passport No. (Attach)

PIN (Attach)

Date of Birth: Occupation:

Postal Address: Postal Code:

Telephone No. Mobile Phone No.

E-mail Address:

Period of Insurance from: To:

Technical Details

Attach a copy of vehicle's Log book:

Vehicle registration: Make & Model:

Type of body: Year of manufacture: Chassis No.

Engine No. Engine Capacity: Tonnage:

Seating Capacity: Date of purchase:

Market value for vehicle (Duty Paid) (as per valuation report)

Type of cover: Comprehensive: Third Party fire and theft: Third party only:

State the use of the motor vehicle: Carrying own goods/stock in trade Carrying fare paying passengers
 Used for hire and reward or any purpose for which you receive payment

Cover required for windscreen/window glass & entertainment unit:

Windscreen/Window glass: State limit

Entertainment unit: State Limit Kshs.

Any other accessories: Indicate and state limit Kshs.

General nature of goods carried:

If the car is unique or has been modified/converted in any way please give details:

Who will drive the vehicle? Please give drivers license. Yourself/Spouse Authorised driver

Have you ever been involved in an accident(s) theft whilst handling any other motor vehicle? (If yes please give details.)

(If entitled to No claim Discount, Please provide written proof)

Name of previous insurer:

Is a finance company or other party financially interested in the car:

Is the car fitted with appropriate anti theft device? If yes, state type/make of device: (the company doesn't provide theft cover for entertainment and other accessories if anti theft device is not operational when vehicle was left unattended.

Declaration

I/We desire to insure with the Company in respect of the car or cars described in the above proposal. I/We warrant the above statements made by me/us or on my/our behalf are true, correct and complete and that nothing materially affecting the risk has been concealed by me/us.

I/We agree that this proposal shall be incorporated in and taken as the basis of the proposed contract between me/us and the Company and I/We agree to accept a policy in the Company's usual form for this class of insurance. I/We undertake that the car or cars to be insured shall not be driven by any person who to my/our knowledge has been refused any motor vehicle insurance or continuance thereof.

Name of proposer:

Signature of proposer:

Date:

Contact us:

NAIROBI HEAD OFFICE

Chester House
Ground & 1st floor, Koinange Street.
P.O. Box 30170-00100 Nairobi
T: 2227723, 2241626, 221650
M: 0722-205286, 0733-600462
Fax: 2217340, 2211158
E: kai@kenyanalliance.com

KISUMU OFFICE

Reinsurance plaza,
2nd floor Oginga Odinga Street
T: 057 -2022091/ 020-2389261
E: kaiksm@kenyanalliance.com

KITUI OFFICE

Muli Mall,1st floor Room 33
Makuti Street
T: 020 2023810

MOMBASA OFFICE

Trade centre, Ground floor,
Nkurumah Road.
P.O.Box 86691 - 80100,
Mombasa
T:041-2222296
Fax: 041 - 2222297.
M: 0722 208 873
E:kaimsa@kenyanalliance.com

MERU OFFICE

Angaine plaza Ground floor,
Off Tom Mboya Avenue
T:020 - 2403869

MACHAKOS OFFICE

Susu Centre, Ground Floor
P.O. Box 911 - 90100, Machakos
T:020-2178044/39
M : 0728428004
Fax: 044 - 2312073

NAKURU OFFICE

Utalii Arcade,Ground Floor
Moi Road, Kenyatta Avenue
P.O. Box 1577, Nakuru
T: 051-2214794/ 0722 208 874
Fax: 051 - 2215686
E: kainku@kenyanalliance.co

THIKA OFFICE

Thika Arcade,
Off Kenyatta Avenue, 4th floor
T: 020-2428354, 020-240388
Fax: 020 - 2428352

KARATINA OFFICE

Uchumi Building, Ground floor
Off Nyeri Nairobi highway
T: 061 - 2144913
Fax: 061 - 72921