



Niko Insurance (Tanzania) Limited

PPF HOUSE, 8th Floor, Morogoro Road / Samora Avenue;
Tel: +255 22 2120188; Fax: +255 22 2120193; E-mail: info@nikoinsurance.co.tz
Website: www.nikoinsurance.co.tz

MOTOR PRIVATE INSURANCE PROPOSAL FORM

Proposer's Name:

Physical & Postal Address:

Tel. No.:

Fax No.:

Mobile No.:

E-mail address:

Occupation, Business or Profession:

Kindly attach copy Registration books to this proposal

Make and Model	Version, CL GL, LS.XL GT etc	Mileage Specify Kilometers or Miles	Year of Make	Cubic Capacity	Reg. No.	Value

Please tick appropriate box for the following questions:

Is the value of the car based on duty free?

YES	NO
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If 'YES', what is its market value?

Is vehicle usually kept in a lock up garage overnight?

YES	NO
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If 'NO', state where kept and residential address.

Has the car been modified or altered from the maker's

standard specification including any adaptation for disability?

YES	NO
-----	----

If 'YES', give details.

Are you the owner of the car?

YES	NO
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If 'YES', is it registered in your name?

YES	NO
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If the car is on hire purchase or loan, state the

name of the Company/Lender?

Indicate type of insurance required by ticking the appropriate box below:

Comprehensive Third Party Fire and Theft Third Party only

If cover is Comprehensive, do you wish to pay the first portion of
damage to your vehicle in return for a discount on your premium?

YES	NO
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If 'YES', indicate the amount:

Note: *These amounts are in addition to the standard policy term requiring the policyholder to pay the first portion of any claim.*

Indicate the use required by ticking the appropriate box below:

- (i) Use for social, domestic and pleasure purpose and use by you in connection with your business.
- (ii) Use for social, domestic and pleasure purpose and use for business purposes by any person other than yourself
- If (ii), give details on the next page.

Full Name	Full details of occupation(s) including any part time work	Age	Driving Licence		
			No.	Date	Provisional / Full
Self					

State the name of the person who will be the main user of the car

Have you or has any other person who to your knowledge will drive

- (a) been subject to disqualification or been convicted during the past 5 years of any offence in connection with any motor car or other motor vehicle or is any prosecution pending?

YES	NO
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If 'YES', give dates and full particulars

- (b) suffered from (i) diabetes, epilepsy, heart conditions?

(i) YES	NO
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- (ii) any other disease or physical infirmity which could impair the ability to drive? (ii)

YES	NO
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If yes to either (i) or (ii) above, give full particulars

Have you ever been insured in respect of the above or any other motor vehicle?

YES	NO
-----	----

If 'YES', state the name of the Company

Are you now insured in respect of the above vehicle?

YES	NO
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If 'YES', state the name of the Company

Has any insurance Company ever:

- (a) Declined your proposal for insurance?

(a) YES	NO
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- (b) Required you to carry the first portion of any loss?

(b) YES	NO
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- (c) Required an increased premium or increased special conditions?

(c) YES	NO
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- (d) Refused to renew your policy?

(d) YES	NO
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- (e) Cancelled your policy?

(e) YES	NO
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If any of the above answers is 'YES', please give details

Have you or any person who will drive the vehicle been involved in any accident with any motor vehicle?

YES	NO
-----	----

If 'YES', give details

Have there been any claims in connection with any motor vehicle owned or driven by you?

YES	NO
-----	----

If 'YES', complete the schedule below.

Year	Total Number of		Cost of Damage to	
	Accident	Claims	Your vehicle(s) K	Others K
20.....				
20.....				
20.....				

Are you entitled to any no claim discount? _____ Yes/No

If 'YES', attach documentary evidence _____

Please tick the additional benefits you require as specified hereunder. (Note that these may attract a surcharge on annual premium)

(i) Personal accident benefits to:

(a) Yourself

(b) Passengers in your vehicle If (b) State the number of passengers _____

(ii) Increased medical expenses.

(iii) Riot and strike cover

(iv) Increased Third Party Property Damage limit to Tanzania Shillings:

(a) 1,000,000 (b) 2,000,000 (c) 3,000,000 (d) 5,000,000

(v) Increased Third Party Loss of Use cover to Tanzania Shillings:

(a) 200,000 (b) 300,000

Note: The policy only covers those items which are normally supplied with the vehicle at the time of sale by the authorized dealers as standard fittings for the respective vehicle in the market and does not include items bought and fitted by the owner at additional cost, e.g. tape recorder, special windscreen, etc. If cover is required for any optional item please state:

Make and Model	Serial Numbers	Date Purchased	Value (including all Ancillary parts)

DECLARATION

I/We hereby declare that the above statements and particulars are true and the vehicle(s) to be insured shall not be driven by any person who to my/our knowledge has been refused any motor vehicle insurance and I/we hereby agree that this Proposal and Declaration shall be the basis of the contract between me/us and the Company and I am/we are willing to accept a policy subject to the terms and conditions prescribed by the Company therein.

Date Proposer's Signature

Note: No liability is undertaken by Niko Insurance (Tanzania) Limited until this Proposal has been accepted by Niko Insurance (Tanzania) Limited and the premium paid, except as provided by any official Covering Note issued.

PLEASE NOTE PRIOR TO SUBMISSION of PROPOSAL FORMS TO INSURERS!!

- A specimen copy of the policy form and other terms applicable to the risk are available on request.
- The policyholder shall keep a record of all information including copies of letters supplied to the Insurer for purpose of entering into the contract.
- A copy of the completed proposal form will be supplied on request after its completion.