



PROPOSAL FORM FOR 'HOME' INSURANCE

THE PROPOSER

Broker or Agent:

Full Name.....
 Postal Address.....
 Business or Occupation.....
 Telephone/Contact No. Date of Birth

DETAILS OF THE HOME TO BE INSURED

1. Address

2. Is the Home (a) a Private Dwelling House?.....Yes No
 (b) a Self-contained flat or apartment with separate
 entrance exclusively under your control?..... Yes No
 (c) Rooms not self-contained?..... Yes No

3. Of what materials is the Dwelling constructed? Walls Roof

4. Are there any garages or out-buildings?..... Yes No
 If 'Yes', of what are they constructed?..... Walls Roof

5. Are the buildings in good state of repair and will they be so maintained? Yes No

6. Is the Dwelling occupied solely by you, your family and domestic employees? Yes No
 If 'No', give details of other occupants.....

7. Is any part of the Dwelling or outbuildings used for any income-earning activity? Yes No
 If 'Yes', give details.....

8. Are all externally communicating doors, windows and other openings grilled? Yes No
 If 'No', describe the security
 arrangements in place.....

9. Does any Institution or Individual have a financial interest in the Property? Yes No
 If 'Yes', state their name and address

DETAILS OF THE PROPERTY TO BE INSURED

BUILDINGS and OTHER STRUCTURES

IMPORTANT NOTE: The SUMS TO BE INSURED must represent the FULL NEW REPLACEMENT COST of the Property and should include adequate provision for demolition and debris removal costs in the event of major damage as well as professional fees that would be incurred in reinstatement. As we will pay up to 10% of the Sum Insured in respect of Rent lost or reasonable costs of alternative accommodation if damage by an Insured Peril renders the home uninhabitable, provision for this should also be included in your Sums Insured.

Sums to be Insured

i) The Buildings of the private dwelling together with its garages and outbuildings, including landlord's fixtures and fittings together with patios, driveways and other paved areas, walls, gates and fences, underground water pipes and cables providing services to and from the home, fixed water storage tanks and sewage disposal systems.....	\$	
N.B. Swimming pools & Waterside structures are not included in the above Item.		
ii) Swimming Pools: permanent pool structures together with pump-houses and permanently installed pool equipment and accessories including all related pipes and cables.....	\$	
iii) Waterside Structures: docks, jetties, piers, sea walls and any other structure abutting the sea, a river or any other body of water. Please describe your Waterside Structure		\$
iv) The Total Sum to be Insured under the Buildings and Other Structures Section of the Policy	\$	

CONTENTS

IMPORTANT NOTES:

- 1) The SUMS TO BE INSURED must represent the FULL COST of replacing all the Contents insured with NEW articles of similar size, style and specification. As we will pay up to 10% of the Sum Insured in respect of reasonable costs of alternative accommodation if damage by an Insured Peril renders the home uninhabitable, provision for this should also be included in you Sum Insured.*
- 2) Do not include in your Contents Sum Insured any Article which is to be insured under the All Risks Section.*
- 3) Unspecified Valuables: Coverage is limited to one-third of the Total Sum Insured on Contents with coverage on individual articles limited to 5% of such Total Sum Insured. Individual Articles worth more than 5% of the Total Sum to be insured should be separately specified in ii) below.*
- 4) Valuables includes jewellery and other articles of gold, silver or other precious metal, clocks, watches, cameras, cam-corders and other photographic equipment, electronic equipment (other than domestic appliances), furs, pictures and other works of art, curios, licensed fire-arms, collections of stamps, coins or other valuable objects.*

Sums to be Insured

i) Contents: Household Goods, Personal Effects and Fixtures and Fittings which belong to or are the legal responsibility of any member of your household, including personal effects of non-paying guests temporarily staying with you <i>but excluding Valuables which are to be individually specified</i>	\$
ii) Valuables to be individually specified (Please attach a list of these articles giving detailed descriptions, including model and serial numbers where appropriate and individual values).....	\$
iii) Does the total value of your Valuables (excluding those listed under ii) above and those which you will be insuring under the All Risks Section) exceed one-third of the Total Sum to be Insured?.....Yes <input type="checkbox"/> No <input type="checkbox"/>	
If 'Yes', what is the total value of such Valuables?...	\$.....
iv) The Total Sum to be Insured under the Contents Section of the Policy	\$

ALL RISKS INSURANCE IN RESPECT OF PERSONAL POSSESSIONS

IMPORTANT NOTE: Valuation Reports or Receipts in respect of all Articles to be insured should be attached to this Form.

i) Full Description of Article(s) to be Insured (If there is insufficient space to list all Articles, please attach separate list)	Sum to be Insured \$..... \$..... \$..... \$.....
ii) The Total Sum to be Insured under the All Risks Section of the Policy	\$.....
iii) State Territorial Limits require Jamaica only <input type="checkbox"/> or Caribbean & North America <input type="checkbox"/> or World-wide <input type="checkbox"/>	

PREVIOUS INSURANCE HISTORY AND LOSS RECORD

10. Do you currently have in force any policy, whether with us or with any other Company or Insurer, covering any of The Property to be Insured?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>
11. Has any Company or Insurer, in respect of any of the Perils to which this Proposal applies, ever:		
(a) Declined to insure you?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) Required special terms to insure you?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(c) Cancelled or refused to renew your policy?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(d) Increased your premium on renewal?.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12. Have the Buildings and/or Contents of the Home to which this Proposal relates ever suffered damage by Hurricane, Earthquake or Flood?.....		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
13. Have you ever sustained loss from any Perils to which this insurance would apply?..		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
14. If you have answered 'Yes' to any of the above questions, give full particulars.....		
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>		

DECLARATION

I do hereby declare that the above answers are true and that I have withheld no material information regarding this Proposal. I agree that this Proposal Form and Declaration and any other information provided to you by me/us or on my/our behalf shall form the basis of the contract between me/us and Globe Insurance Company of Jamaica Ltd.

I also declare that the TOTAL SUMS TO BE INSURED represent not less than the FULL REPLACEMENT VALUE of the PROPERTY TO BE INSURED, as described above.

Date.....Signature of Proposer.....

Period of Insurance required: From.....to.....both dates inclusive.

No insurance is in force until we have accepted your Proposal and the Premium or a Deposit has been paid, except as provided by an Official Covering Note issued by us.