

FALCON INSURANCE CO. S.A.O.C

FIRE & HOUSE HOLDER'S INSURANCE PROPOSAL

NAME OF PROPOER & ADDRESS	
LOCATION OF RISK	
OCCUPANCY	
LOSS HISTORY	PAST 5 YEARS:
SUM INSURED	On Buildings : On Fixtures, Fittings : On Household goods : On contents/Stock : (Plse describe in details)
BUILDING CONSTRUCTION	
YEAR BUILT/CONDITION	
No. OF STOREYS	
How are the building Constructed	a-External walls b-Roofs c-Ceilings and floors d-Gallery, verandah or balcony
Are goods of hazardous nature Contained in premises	
Are the premises in Your sole occupation If not, state how otherwise occupied	
If adjoining any other building(s) please state	Occupation of these buildings:
Period of Insurance	From _____ To _____
Adjoining Buidings	a) Contain Hazardous goods: YES / No If YES EXPLAIN NATURE: b) Distance between adjoining buildings: _____ Meters c) Boundary walls: YES / No



Fire Brigade	a) Distance _____ Km b) Reachable Time : _____
Have you ever sustained loss by Fire or Burglary	
Is there any damages sustained by 'GONU' Cyclone, if yes: please provide details	
Is the Property now to be insured having an Insurance cover of other insurer	If Yes, What is the Sum Insured:
Has this insurance ever been declined or cancelled or charged additional premium	YES / No
Method of record of stock received and sold	
Security Precautions	a) Securing Outer Doors: b) Protecting ground Floor and Basement windows: c) Protecting skylights and other means of entrance: d) Security Guard: YES / No. During working Hours / 24 Hours / Night only
Any other information you may feel relevant	e)

DATE:

SIGNATURE OF THE PROPOSER