



PROPOSAL FORM

MONEY INSURANCE

Personal /Corporate Data

Full name of Proposer(s): _____ PIN No: _____

Postal Address: _____ Postal Code: _____ Town: _____

Telephone No. - Office: _____ House: _____ Mobile Phone: _____

Email Address: _____ Website: _____

Business or Profession: _____

Period of Insurance: From _____ To _____

Address or premises to be insured: Plot No: _____

Territorial Limits: Kenya

LIMITS PER CATEGORY				SUM INSURED
A. i) Cash in Transit ii) Cash in Premises during Business hours iii) Cash in Premises outside Business hours iv) Cash in a locked safe/strong room Check our Closing v) Cash in locked drawers vi) Cash with Directors/Authorised employees including Personal Funds vii) Damage to Safe/Strong room viii) NHIF Stamps & other Stamped Cards (specify) ix) Estimated Annual Carryings (Total amount of all money in transit in any one year)				
B. DETAILS OF SAFE(S)				
Make and Manufacturer's Reference Number	Year of Manufacture	Dimensions	Weight	Whether built in wall or secured to floor

C. STRONGROOM(S)

Please give full description of the construction of your strong room(s) _____

Are the keys of the Safe(s) and Strong room(s) removed from the premises when they are closed for business? _____

1. Has any insurer in respect of risks to be covered by this insurance:

- a) Declined your proposal? _____
- b) Refused to renew your policy? _____
- c) Required an increased premium or special terms? _____

If the answer to any of the above questions is YES please provide fill details below: _____

2. Have you ever sustained a loss in respect of any risk to be covered by this insurance? _____

If YES state full details including name of insurance company if one involved _____

3. Is the money on the Premises kept in a locked safe or strong room when closed for business? _____

4. What precautions are taken for the safety of the money:
 - a) During Transit? _____
 - b) Whilst on the premises? _____
 - c) In regard to character of employees on engagement? _____
5. Give brief details of the construction of the Premises in which the money will be kept:

Roof _____ Walls _____
6.
 - a) How often are journeys with money (as defined) made? _____
 - b) State normal method of transmission _____
 - c) What is the normal maximum distance involved? _____
 - d) Are the journeys regular in time and route? _____
7. Give particulars of employees entrusted with money in transit:
 - a) Are they accompanied by an escort? _____
 - b) Is the messenger or escort or both armed? _____
 - c) Are the messengers male and over 18 years of age? _____
 - d) Normal method of carrying _____
8. Give any other information in your possession material to the risk to be insured _____

DECLARATION

I/We declare the truth and correctness of the statements made in this proposal and I/We further declare that no material information has, been withheld and I/We agree to render to the insurer at the close of each period of insurance a statement of all money in transit during such period, and I/We agree that this Proposal and Declaration shall be the basis of the Contract between me/us and the Insurer and I/We agree to abide by the terms and conditions of this policy.

Date: _____ Signature of Proposer(s): _____

Liability does not begin until this proposal has been accepted by the Company and the premium paid, except as provided by any official cover note issued by the Company. A specimen policy is available on request.

MONEY INSURANCE

DEFINITION: For the purposes of this Insurance "Money" shall mean Cash (Notes and Coins), Cheques crossed/uncrossed, securities, postage revenue, NHIF & Council Stamps, Postal Money Orders, bearer certificates including negotiable instruments/travellers cheques, ATM / Debit / Credit Cards and other Instruments having a monetary value.

COVER PROVIDED:

A. Loss of Money belonging to the Insured or for which is legally responsible:-

i) On the Premises described:

- a) Out of Safe(s) or Strong room(s) during business hours
- b) In specified locked safe(s) or strong room(s)

ii) In transit in the custody or charge of the insured or his duly authorised employee(s)

B. Loss of or damage to safe/strong rooms specified as a result of money being stolen or any attempt threat (optional)

SUMMARY OF EXCLUSIONS

- | | |
|------------------------------------|---|
| a) Fraud or dishonest of employees | e) Money in coin or similar operated machines |
| b) Error or omission | f) money in transit by post |
| c) Depreciation in value | g) War and kindred risks |
| d) Any consequential loss | h) Nuclear contamination risks |

SCHEDULE

ITEM No.

- 1) Any one carry or holding or collection or sales/wages (cash in transit) until paid out and received or banked, any transit Kshs. _____
- 2) Cash in Transit incl remittances from bank or any other collection points Kshs. _____
- 3) Cash in Transit Kshs. _____
- 4) Money whilst contained in the premises in/out of drawers any time Kshs. _____
- 5) Money in drawer in/out of business hours Kshs. _____
- 6) Money whilst in safe or strong-room anytime Kshs. _____
- 7) Cash with Directors/ Authorized employees including Personal Funds Kshs. _____

Estimated Annual Carry - Kshs

EXTENSIVE CLAUSES

Including Riot, Strike & Civil Commotion
Reinstatement Value Clause
Use of Skeleton Keys
Medical Expenses
Hijack
Cost of Replacement of Lost Keys

Automatic Reinstatement of Loss
Armed Hold-Up & Threat of Assault
Fidelity 3 Days
Personal Effects
Personal Accident, Death + PTD + TTD p/ek.

SUBJECT TO:

Premium Payment Warranty	Cancellation Notice 30 Days
Transit Warranty	- Upto 500,000/- 1 Employee
	- Over 500,001/- 2 Employees

Remarks

Claims: Please provide claims history for the last 5 years