PLATE GLASS INSURANCE PROPOSAL FORM

Agent/ Intermediary: _____ Policy/ Account No.: _____

A. PROPOSER AND PREMISES

1. Name of proposer in full: _____

2. Address: _____

3. (a) Address of premises in which the glass is contained: _____

   (b) Are the premises situated at the corner of a street, near a school or children's playground, or in a dangerous or exposed position? ☐ Yes ☐ No

4. What business is carried on in the premises in which the glass is contained? _____

5. Is any of the glass cracked or otherwise damaged? ☐ Yes ☐ No

   NB: Cracked or damaged glass may be included in the proposal, but the liability of the Company does not commence until the imperfect glass has been replaced by sound glass.

6. State any breakages that have occurred during the last twelve months, and how caused:

   _____

7. Have the premises where the glass is fixed been erected or altered during the last twelve months? ☐ Yes ☐ No

   If so, give date of completion or details of alterations: _____

8. Do you wish to insure lettering or painting? ☐ Yes ☐ No

   NB: If so, please state the value in the table below.

9. Do you wish to insure damage to woodwork of show-cases or window frames? ☐ Yes ☐ No

   NB: If so, please indicate the value in the table below.

Cannon General Insurance (K) Limited

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a Gateway Park, Block D, Mombasa Road, P.O. Box 30216-00100 Nairobi, Kenya
www.cannon.co.ke

Regulated by the Insurance Regulatory Authority

B. GLASS TO BE INSURED

The shop front is deemed to mean the windows, doors, returns, pilasters, stall boards, transoms and fanlights on the ground floor of the premises.

(1) Item No.	(2) No. of Squares (Panes)	(3) Plate or sheet; plain, lettered, stained, silvered, ornamented, bent or ultraviolet ray glass	(4) Front, return, door, fanlight, counter case, shelf, horizontal display or mirror etc., and whether moveable	(5) Height (in)	(6) Width (in)	(7) Value of each plain square (KES)	(8) Value of lettering, staining etc. (KES)	(9) Value of woodwork and frames (KES)	(10) Total Value (KES)

Total Sum Insured: _____ KES

NB: Note: All glass shelves, lamps, signs, etc., if they are to be insured, MUST be described in column (3) above and valued in column (8). All glass is considered plain unless the contrary is specifically stated in the policy, and no lettering, embossing, silvering or any ornamental work is considered insured unless described therein and the additional premium paid thereon.

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C. DECLARATION

I/We desire to insure with the Company against the risks specified. I/We warrant that the above statements made by me/us or on my/our behalf are true and correct and that nothing materially affecting the risk has been concealed by me/us, and I/we agree that this proposal shall be incorporated in and taken as the basis of the proposed contract between me/us and CANNON GENERAL INSURANCE (K) LIMITED. I/We agree to accept a policy in the Company's usual form for this class of insurance.

I/We consent that the data provided can be shared with third parties outside our jurisdiction for the purpose of provision and processing of the insurance.

Signature of Proposer: _____ Date: _____

Important Notes

1. The liability of the Company does not commence until the proposal has been accepted and the full premium paid.

Click to Submit

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