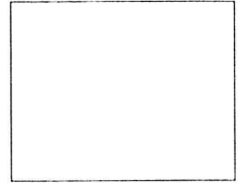




# NEM INSURANCE PLC

199, ikorodu road obanikoro Lagos



## PROPOSAL FORM FOR MONEY INSURANCE

1 Name of Proposer in full

Postal Address

\*Residential Address (Proof Attached)

\*Email Address: Telephone:

Profession/Occupation:

\*Identification: (Int Passport/National ID/Voters ID/Drivers License)

\*Banker(s)

**\*Note :** The asterisked items are of high importance

1. Nature of Business

2. (a) How many employees are engaged in carrying Cash and/or Bank Notes at anyone time? (a)
(b) Are they males and over 18 year8 of age?
(b)
(c) How long have they been in your employ! (c)

3. (a) How often are journeys with Cash and/or Bank Notes made? (a)
(b) State the method of tran8mission and the Precautions to be employed
(b)

4. Please state: (a) Place from which transit is to commence...
(b) Place at which transit is to end

5. Have you a safe? If so, please state:
Its maker's name; its number, year; when made ...
Its cost and date of purchase
Its outer dimensions, thickness of steel, and weight
Whether it is moveable, or how is secured
Whether it is marked ," Fire"- or " Thief-Resisting"
Number of keys and by who held

6. Do you require Burglary and Housebreaking cover for cash (other than wages) whilst contained in locked safe? If so, state amount of such cash

7. Have you ever sustained a loss in respect of Cash and/or Bank Notes in transit?

8. Have you ever proposed for a Cash in - Transit Insurance? If so, please give name of Company

9. Have you ever had an Insurance of this nature  
(a) Declined (a)  
.....  
(b) Terminated, or  
(b).....  
(c) Has an increased premium been required?  
(c).....

10. Is the proposed Insurance to cover money for wages only? If not, for what purpose will the money be used?

DETAILS OF THE PROPOSED RISK      LIMIT ANYONE OCCURRENCE      ESTIMATED ANNUAL CARRYING

- a) CASH-IN-TRANSIT
- b) CASH IN SAFE
- c) CASH OUT OF SAFE
- d) CASH ON COUNTER
- e) CASH IN PERSONAL CUSTODY
- e) DAMAGE TO SAFE
- f) BRANCHES

Estimated amount of Cash and/or Bank Notes to be carried during the year (which of anyone is to be the basis on which the premium is charged) ...

Maximum amount carried at any one time (which is to be the limit loss)

RATE..... PREMIUM.....

Period of Insurance from ..... 20..... to .....20.....

I hereby propose to effect an insurance with the NEM Insurance Plc and do warrant the truth and correctness of all the above statements, and declare that no material information has been withheld.

I agree that the Proposal and Declaration shall form the basis of the contract between me and the said Company and I am willing to accept the Policy and be bound by all the terms, provisions and conditions thereof and to pay the premium hereunder when called upon to do so.

Date .....20.....Signature of Proposer .....

No liability is accepted by the Company until the issue of the Policy and the payment of the premium, or the issue of a authorized cover note by the Company.