

# PROPERTY TAKAFUL PROPOSAL FORM (Please write your answers in Block Letters)

Name :				
CR/CPR No:				
Postal Address:				
Tel. No. Residence:		Mobil	e:	
Tel. No. Office		:Fax No	o:	
Trade or Business				
Period of Insurance: Fr	om		-То:	
THE BUILDING:				
Situation: Flat/House N	lo:	Bldg. No:	Road No:	
Block No:		Area:		
Construction: Walls:		Roofs:		
Floors:		Ceilings:		
Number of Storeys:		Year of Construction: -		
Year of Renovation if a	ny:			
Owned by:				
Occupied as:				
NEIGHBOURING BUILDINGS:				
Occupied as:				
Distance from your bui	lding:			
☐ Adjacent	□Separated	☐ Far Separate	ed	



#### **COVER REQUIRED:**

# **Standard Covers in BHD:**

# **Business Contents**

- 10,000
- 0 25,000
- o 50,000
- 0 100,000

# **Public Liability**

o **50,000** 

# **Optional Covers in BHD:**

#### **Building**

- 0 25,000
- 0 50,000
- 0 100,000
- 0 250,000

0

# **Stock**

- 0 10,000
- 0 25,000

# Loss of Rent (12 months)

- 0 10,000
- 0 25,000

#### **Loss of Gross Profit**

0 25,000

# **Plate Glass**

0 5,000

# **Money in Transit Annually**

o 50,000 (BD 2,500 any one trip)

# **Money in Safe**

0 5,000

### **Fidelity Guarantee**

o 5,000 (per staff, max 3 staff)

# **Employer's Liability**

o 50,000 (per staff, max 3 staff)

#### **Personal Accident**

o 10,000 or 36 salary (whichever is less, per staff, max 5 staff)



# **GENERAL QUESTIONS:**

For how long you have occupied the building?		
2. What power is used for lighting and machinery in the building?		
3. Mention details of Fire Fighting Equipments available at the premises		
4. How far away is the nearest Fire Brigade?		<del></del>
Please Tick Appropriate Box	Yes	No
5. Any hazardous goods stored? (If yes, please attach details)		
a) in the building occupied by you?		
b) in the neighbouring buildings? (as far as you know)		
6. Do you have any other insurance in respect of the property proposed for insurance	urance? □	
7. Has the property been previously insured against fire, etc? (if so, please state details and name of Company)	e 🗆	
8. Have you ever had a fire or other loss at any of your properties? (if so give brief details)		
9. Has any insurer at any time		
a) declined to accept any insurance proposal?		
b) refused to renew any insurance?		
c) required an increased premium or imposed special condition?		
10. Will the premises remain unoccupied for more than 30 days in a year		



11. Is the property Mortgaged? If so, Name of
Mortgagee

# **DECLARATION.**

I/We hereby declare that I am/we are familiar with the regulations of Takaful business written by Takaful International Co., BSC and I/we agree to deal with the Company accordingly. Also I/we authorize the Company to manage and invest the contribution(s) in the manner deemed necessary under these regulations. I/We do understand and agree that the information disclosed in this proposal will form the basis of the Takaful contract.

I/We also declare that the information and details mentioned in this proposal are correct to the best of my/our knowledge and if proven otherwise in any respect, the Takaful contract will become null and void without any notice. I/We agree to the terms, conditions including all exclusions of the Takaful Contract which I/we have read carefully.

Date:	Signature of Proposer
	- B

The Takaful Contract will not be in force until the proposal has been accepted by the Company. This Takaful Contract is governed by the insurance regulations of Bahrain as an insurance contract and operates under the Takaful regulations of the Company