

BAHAMAS FIRST GENERAL INSURANCE COMPANY LIMITED

PUBLIC LIABILITY INSURANCE PROPOSAL

AGENCY: _____

UNDERWRITER: _____

PLEASE GIVE A DEFINITE REPLY TO EACH QUESTION ON THE FORM

No Insurance is in force until the proposal has been accepted by Bahamas First General Insurance Company Ltd.

<p>1. Name: _____</p> <p>Postal Address: _____ E-mail Address: _____</p> <p>Telephone Nos. Work _____ Home _____ Cell _____</p> <p>Trade or Business: _____</p> <p>Period of Insurance: From: _____ To: _____</p>	
<p>2. General description of operations carried on by you</p>	
<p>3. (a) State situation and description of all premises in respect of which this cover is to operate and indicate the extent to which access to these premises is available to members of the general public and third parties</p> <p>(b) Do you engage in business at any other premises? If so, please state address</p> <p>(c) If any of your employees work away from your premises, state where and the nature of their work</p> <p>(d) Is any portion of your premises sub-let? Is so, give particulars</p>	<p>Situation</p> <p>.....</p> <p>Description</p> <p>.....</p> <p>Access</p> <p>(b)</p> <p>(c)</p> <p>(d)</p>
<p>4. Do you desire to insure your liability for claim arising out of the possession or use of any of the following? If so, please give details of the number and type in each case:-</p> <p>(a) Pedal Cycles</p> <p>(b) Hoists or Cranes</p> <p>(c) Goods Lifts</p> <p>(d) Passenger Lifts or Escalators</p>	<p>(a)</p> <p>(b)</p> <p>(c)</p> <p>(d)</p>
<p>5. Do you desire to insure your liability for claims arising out of:-</p> <p>(i) goods supplied at a canteen primarily provided for the use of your employees?</p> <p>(ii) other goods sold or supplied? If so, please state</p> <p>(a) class of goods</p> <p>(b) estimated annual turnover (gross)</p> <p>(c) whether you are the manufacturer, wholesaler or retailer of such goods</p> <p>NOTE: In respect of claims arising from goods sold or supplied the limit of indemnity chosen for any one accident will also be the limit per year.</p>	<p>.....</p> <p>(a)</p> <p>(b)</p> <p>(c)</p>

<p>6. Give particulars of:-</p> <p>(a) machinery used and motive power (N.B. – Items described in answer to question 4 not to be mentioned again.)</p> <p>(b) any work on ships, at airports, chemical works</p> <p>(c) explosives or chemicals used or stored</p>	<p>(a)</p> <p>(b)</p> <p>(c)</p>												
<p>7. (a) If any of your contract work is subcontracted, do you desire to insure your liability for claims arising from the operations of sub-contractors?</p> <p>(b) If so, state (i) nature of work sub-contracted</p> <p>(ii) estimated amount of contracts</p>	<p>(a)</p> <p>(b) (i)</p> <p>(ii)</p>												
<p>8. Give particulars of all Third Party Claims made upon you during the last three years.</p>	<p>.....</p> <p>.....</p>												
<p>9. In respect of Public Liability insurance has any Insurer ever:-</p> <p>(a) declined your proposal?</p> <p>(b) required an increased premium or imposed special conditions?</p> <p>(c) cancelled or refused to renew your policy? If so, state name of Insurer</p>	<p>(a)</p> <p>(b)</p> <p>(c)</p>												
<p>10. State limit of indemnity required in respect of any accident</p>	<p>(a)</p> <p>.....</p>												
<p>11. state number of employees and wages expenditure for employees engaged:-</p> <p>(a) at your own premises and</p> <p>(b) away from your premises</p> <p>NOTE: If the proposer, or any partner or director engages in the business, an amount should be included in the wage estimate in respect of them.</p>	<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;">No. of</td> <td style="text-align: center;">Wages</td> </tr> <tr> <td></td> <td style="text-align: center;">Employees:</td> <td></td> </tr> <tr> <td>(a) At your own premises</td> <td style="text-align: center;">.....</td> <td></td> </tr> <tr> <td>(b) Away from your premises</td> <td style="text-align: center;">.....</td> <td></td> </tr> </table>		No. of	Wages		Employees:		(a) At your own premises		(b) Away from your premises	
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<p>12. In the case of: -</p> <p>(a) Churches, chapels, public halls, restaurants or cafes, please state seating capacity</p> <p>(b) Clubs, please state number of members</p> <p>(c) Hotels or Guest Houses, please state number of bedrooms</p>	<p>(a)</p> <p>(b)</p> <p>(c)</p>												

Please read the following declaration very carefully and read again the questions and answers, especially if not completed in your own hand, before signing the form

I/we declare that the above answers are true to the best of my/our knowledge and belief and that I/we have disclosed all particulars affecting the assessment of the risk. I/we agree to render at the end of each period of insurance a statement in the form required of the particulars necessary for assessing the premium and to pay premium on any number or amount exceeding the estimates supplied by me/us. I/we agree that this proposal and declaration shall be the basis of the contract between me/us and the Insurers.

Date _____

Proposer's Signature _____