

### THIRD PARTY LIABILITY - PROPOSAL FORM

1. a)	Name of Proposer (in full)	
	b) Address	
	c) CR No.	
	d) Telephone/mobile No.	
	e) Email	
	f) Trade or Business	
	g) Period of Insurance	From: _____ To : _____
2.	General description of operations carried on by you	
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	Situation
		Description
		Access
b)	Do you engage in business at any other premises? If so, please state address	
c)	If any of your employees work away from your premises, state where and the nature of their work	
d)	Is any portion of your premises sub-let? If so, give particulars	
4.	Do you desire to insure your liability for claims 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:-	
	a) Pedal cycles	
	b) Hoists or Cranes	
	c) Goods Lifts	
	d) Passenger Lifts or Escalators	
5.	Do you desire to insure your liability for damage to property caused by Fire or Explosion?	
NOTE:- Damage to property caused by explosion due to force of internal steam pressure of any boiler vessel or apparatus designed to operate under steam pressure is not covered by this extension. The risk can be insured under a separate policy		



	Give details of any mobile plant and/or mechanically-propelled vehicles not licensed for road use and which are used solely on the premises to which this insurance will apply.	
6.	Do you desire to insure your liability for claims arising out of :-	
i)	goods supplied at a canteen primarily provided for the use of your employees?	
ii)	other goods sold or supplied? If so, please state:-	
a)	class of goods	
b)	estimated annual turnover (gross)	
c)	whether you are the manufacturer, wholesaler or retailer of such goods	
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		
7.	Give particulars of :-	
a)	machinery used and motive power (N.B.- items described in answer to question 4 not to be mentioned again)	
b)	radio-active substances or devices used or stored	
c)	explosives or chemicals used or stored	
8.	Give particulars of all Third Party claims made upon you during the last three years	
9.	In respect of Third Party Insurance has any Insurer ever:-	
a)	declined your proposal?	
b)	required an increased contribution or imposed special conditions?	
c)	cancelled or refused to renew your policy? If so, state name of Insurer	
10	State limit of indemnity required in respect of any one accident	
NOTE:- If the Proposer, or any partner or director engages in the business, an amount should be included in the wages estimate in respect of them		
11	State number of employees and wages expenditure for employees engaged:-	No. of Employees:                      Wages:
a)	at your own premises, and	At your own premises



b)	away from your premises	Away from your premises
NOTE:- If the Proposer, or any partner or director engages in the business, an amount should be included in the wages estimate in respect of them.		
12	In the case of :-	
a)	Churches, chapels, public halls, restaurants or cafes, please state seating capacity	
b)	Clubs, please state number of members	
c)	Hotels or Boarding Houses, please state number of bedrooms	

### **DECLARATION**

I/ we hereby declare that I am/we are familiar with the regulations of Takaful business written by Al Madina Insurance Co. S.A.O.G., 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 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 Takaful Contract which I/we have read carefully

Date: \_\_\_\_\_

Signature of Proposer: \_\_\_\_\_

Company Seal:

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 Sultanate of Oman as an insurance contract and operates under the Takaful regulations of this Company.