



SIC INSURANCE COMPANY LIMITED

P.O. Box 2363, Accra Ghana
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PROPOSAL FOR MOTOR CYCLE INSURANCE

Answers in
BLOCK Letters
please

FULL NAME OF PROPOSER.....
 (State Mr, Mrs, or Miss)

ADDRESS.....

OCCUPATION OR BUSINESS.....NATIONALITY.....

TELEPHONE.....E-MAIL.....

PARTICULARS OF MOTOR CYCLES TO BE INSURED									
	Cylinder Capacity (in cc)	Maker and description of motor cycle combination	Year or Make	Year Purchased	Registered letters and number	Maker's Number	Engine Number	Value inc. Side-car/accessories	
								Price paid by Value Proposer	Present
(1)									
(2)									

1 (a) Will the motor cycle be used solely for your social domestic and pleasure and/or business purposes?

(b) if not, state other uses

2 Do you desire the policy to be restricted to use only with side-car?

3 If motor cycle is being acquired under a hire purchase agreement. State name and address of company financially interested

4 Are you entitled to a No Claim Bonus from your previous insures in respect of any of the motor cycles described in this proposal? If so, please attach renewal notices.

5 Please complete the form below in respect of all who will drive including yourself									
(a) Name	(b) Occupation	(c) Age	(d) Length of driving experience not continuous or does not include past year state dates when licence held	(e) Is driving licence provisional	(f) Registered letters and number	(g) Has he/she any physical intimacy or defective vision or hearing	(h) Number of accidents or losses during past 3 Years (If none, insert "non")		
							Year	No. Of accidents or loss	Cost
Proposer									

6 (a) State the names of All companies or underwriters with whom you have been insured at any time in respect of any motor cycle.

.....

(b) Have you or to your knowledge has any other person named in reply to Question 5 above had any proposal or renewal (i) declined (ii) Withdrawn or (iii) subjected to an increased rate or special conditions

(i).....(ii).....(iii).....

7 Is there any other material fact within your knowledge regulation this proposal for insurance which should be submitted to the Company for condition?

COVER REQUIRED:	COMPREHENSIVE THIRD PARTY, FIRE & THEFT THIRD PARTY ONLY (Stick out forms not required)	POLICY	PREMIUM	
Additional benefits	
..... Add			
Rebates	
..... Deduct				

ANNUAL PREMIUM
RETURN PREMIUM
NO CLAIM BONUS IF EARNED

Cancelling Policy No(Previous company's renewal notice required)

Insurance to date fromto.....

DECLARATION

I hereby declare and warrant that the above questions are fully and truthfully answered and that I have not withheld or concealed any circumstances affecting of any other insurance, and that the motor cycle described are in good condition. I agree that this declaration and the answers above given in any written statement made by me or on my behalf for the purpose of the proposed Insurance shall be the basis of the contract between me and SIC Insurance Company Limited, and I agree to accept a policy, subject to the conditions prescribed by the Company and expressed in the policy. I undertake that the cycle or cycles to be insured shall not be driven by any motor vehicle insurance or continuance thereof.

Date:20.....

Proposer's Signature.....

AGENT'S RECOMMENDATION

I have known the proposer)Years and recommended acceptance of this proposal)

AGENT.....

Number.....

The liability of the company does not commence the official cover-note of the Company has been issued.