

# Alliance Insurance Corporation Limited



Registered & Head office: 7<sup>th</sup> Floor Exim Tower, Ghana Avenue, Dar Es Salaam, Tanzania, Tel No.: +255222139100

Covering Risks. Improving Lives

## PROPOSAL FOR INSURANCE OF MONEY

**Scope of cover:** A brief scope of cover is described at the end of this proposal. However a specimen copy of the relevant policy form and other terms applicable are available on request. We advise you to retain a copy of all the correspondence including copy of this proposal form with you.

**Please answer the following questions carefully**

Broker / Agent:	Policy Number: <i>(for office use only)</i>								
Period of Insurance required	From : _____ To: _____ (Date)								
1. Name of Proposer in full									
2. Business Address									
3. Situation of Premises									
4. Estimated amount of money (a) drawn from Bank per month (b) conveyed to Bank per month	(a) _____ (b) _____								
5. Largest amount likely to be (a) drawn from Bank at any one time (b) conveyed to Bank at any one time	(a) _____ (b) _____								
6. How is money conveyed? How many employees have charge of it?									
7. Name and address of Bank: How many times a week is the money drawn and are any special precautions taken?									
8. Distance from Bank to Office or place where money is paid out									
9. Is there any transit to Works Branches or to any out-lying contracts? If so, give particulars									
10. (a) Estimated annual amount of money from Bank (b) Conveyed to Bank Total estimated annual amount	(a) _____ (b) _____ Total: _____								
11. Will the money be paid out on the day it is obtained from the bank?									
12. If any part of the money is not paid away on the same day as drawn and is kept on Proposer's premises over night, state:-									
a) Where will it be deposited?									
b) Maximum amount									
c) If kept in a safe, the name of the maker of the safe									
d) The dimensions of the safe	<table style="width:100%; border:none;"> <tr> <td style="text-align:center;">Cms</td> <td style="text-align:center;">Cms</td> <td style="text-align:center;">Cms</td> <td style="text-align:center;">Kgs.</td> </tr> <tr> <td>Height -----</td> <td>Width -----</td> <td>Depth -----</td> <td>Weight -----</td> </tr> </table>	Cms	Cms	Cms	Kgs.	Height -----	Width -----	Depth -----	Weight -----
Cms	Cms	Cms	Kgs.						
Height -----	Width -----	Depth -----	Weight -----						
e) Whether the safe is marked in any way (e.g "Burglar Resisting")									
f) The approximate age of the safe									
g) Number of keys and by whom held?									
h) Will the keys remain in the personal custody of the person by whom they are held at all times?									
13. Has proposer ever sustained loss of money while in transit or while on his premises?									

# Alliance Insurance Corporation Limited



Registered & Head office: 7<sup>th</sup> Floor Exim Tower, Ghana Avenue, Dar Es Salaam, Tanzania. Tel No.: +255222139100

Covering Risks. Improving Lives

14. Has any proposal for this insurance been previously made? If so, to whom, and with what result?	
15. Has proposer ever had an insurance of this nature declined, cancelled or additional premium / conditions stipulated for a renewal?	
16. Are there any additional facts or circumstances affecting the proposed insurance which should be disclosed to the Corporation for their consideration of the risk	

**(To avoid Correspondence you are particularly requested to give a definite answer to every question)**

I/We warrant that the above statements are true and complete, and that nothing materially affecting the risk has been concealed by me/us. I/We agree that this proposal shall be the basis of the proposed contract between me/us and the Alliance Insurance Corporation Limited and I/We agree to accept a Policy in the Corporation's usual form for the class of insurance. I/We agree to render at the end of each period of insurance a statement in the form required by the Corporation of all monies in transit and to pay premium on the monies in excess of the amount estimated above.

Date ..... Signature of the Proposer-----

**N.B. This insurance will not be in force until the Corporation has accepted the proposal.**

### SCOPE OF COVER

This is a comprehensive form of insurance for money, the term money embracing cheques, postal and money orders, postage and revenue (or insurance) stamps, in addition to cash, bank and currency notes, all belonging to the Insured or for which the Insured is responsible.

The cover is normally operative in respect of loss arising in transit or whilst on specified premises and could also be extended to include (if not otherwise insured) the cost of repairing or replacing a safe or a strongroom damaged by thieves.

Provision can also be made to cover small amounts of money kept under lock and key out of business hours elsewhere other than in a safe strongroom or money at other situations other than the Insured's premises, e.g. residence or payments of benefits to the Insured or any employee injured consequent upon assault in an attempt to steal the money.

The policy however does not cover shortages due to error or omission or loss from an unattended vehicle. The policy also does not seek to cover any loss occasioned by fraud or dishonesty of any employee of the insured. The Policy further excludes loss arising directly or indirectly from or in consequence of War, Invasion, Act of foreign enemy, hostilities, Riot Strike, Terrorism, etc., or loss arising outside the limits specified in the policy.

The policy is an adjustable one and the premium charged at inception of the risk is provisional and based on the estimated turnover declared. The Insured is required to submit within one month of the expiry of the policy a correct account of all money in transit insured by this policy during the period of insurance. The premium for such period shall be then adjusted and difference paid by or allowed to the Insured.