

Householder's Insurance

Proposal Form



If you are signing for someone else, include a copy of the durable power of attorney or executorship if not previously provided.

1. General Information:

- a. Proposer's Full Name: _____
- b. Address: _____
- c. Occupation: _____
- d. Tel/Mobile: _____
- e. Location (include House No., Road No., Block No.): _____
- f. Date of cover required (Note: cover only operates on acceptance by the company) _____
- g. Have you been insured in respect of this or similar risks before? _____
- If "Yes", give details of your present or previous insurer (Note: We may contact them and reserve the right to do so)** _____
- h. What type of property do you occupy? (e.g., villa, double villa, self-contained apartment) _____
- i. Age of Property _____
- j. Give details of its construction _____
- k. Is it solely occupied by you and your family for residential purpose as a permanent dwelling (i.e., it is not let or a holiday home or business)? Yes No _____
- If "No", give details.** _____
- l. Is the Property in good repair? Yes No _____
- If "No", give details.** _____
- m. Is the property especially exposed to floods, heave or landslide? Yes No _____
- If "Yes", give details.** _____
- n. Is your home ever left unfurnished or unoccupied for more than 45 consecutive days? Yes No _____
- o. Is your home protected by a burglar alarm? Yes No _____
- If "Yes", give details.** _____
- p. Have you in the past 5 years ever:
- Suffered any loss or damage? Yes No
 - Been convicted of any offence (except motoring)? Yes No
 - Had your proposal for insurance cancelled, declined, increased in premium or imposed with any special terms and conditions? Yes No

If the answer is "Yes" to any of the above questions, please give full details:

2. Please select the cover and sums insured that you require:

Building(s) cover	
Note: the sum insured must represent the replacement cost of all the property insured (including garages swimming pools and outbuilding) Plus 15% to cover debris removal and architects and surveyor's fees	
Sum Insured	R.O.
Does anybody else have an interest in the property (e.g. bank, finance company, etc.) ?	
If "Yes", give details	
Content(s) cover	
Note: The sum insured must represent the replacement cost of all your home contents with no deduction for war and tear or any depreciation (except clothes)	
Sum Insured	R.O.
(For any items more than 5% of the Contents sum Insured we recommend attaching receipts or valuations as proof in the event of loss)	
Personal Effects and Valuables cover	
Note: The sum insured must represent the replacement as new cost of all the property insured with no deduction for wear and tear or any depreciation (except clothes)	
1	Clothing, personal effects & valuables not exceeding the value of R.O.300.- (otherwise cover will be limited to this amount)
Sum Insured	R.O.
2	Clothing, personal effects & valuables exceeding the value of R.O.300.- (please attach receipts or valuations as proof in case of loss)
Sum Insured	R.O.
List (if you need more space please attach a separate list)	
	R.O.

Declaration:

I / We hereby declare that the statements made by me / us in this Proposal Form are true to the best of my / our knowledge and belief and I / We hereby agree that this declaration shall form the basis of the contract between me / us and Arabia Falcon Insurance Company S.A.O.G.

I/We also declare that any additions or alterations are carried out after the submission of this proposal form then the same would be conveyed to the insurers immediately.

Signature(s)

In order for us to process this request, please sign below and return.

Sign Here	Signature _____	Date (DD/MM/YYYY) _____
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How to submit this form

Mail:

Arabia Falcon Insurance
P.O. Box 2279
Ruwi 112,
Muscat, Oman

Fax:

+968 24566476

Email:

info@afic.om

