

Enterprise Theft Insurance Proposal Form

1. Full Name of Proposer

2. Date of Birth

3. Address

4. Trade or Business

5. Telephone

6. Address of Premises in which property to be insured is located

7. Description of Premises (Shop, Factory, etc)

8. To what extent are the premises left unoccupied after business hours and during holidays?

9. Are stock books kept and posted promptly?

10. a. Have you previously proposed for Burglary Insurance?

b. Are you now Insured?

c. Has any insurer declined or required special terms to insure you or cancelled or refused to renew your insurance?

d. Have you ever suffered a loss by Burglary or Housebreaking at these Premises or elsewhere?

(In each case please give the date and full details including the name of the insurer)

Description of Property to be Insured

While contained in the premises stated above but excluding any yard garden open or other building not communicating with the main building.

Item 1	Stock in trade the property of the proposer or held in trustor on commission or which the proposer is responsible (excluding any article otherwise specied).	¢
Item 2	Trade furniture xtures, ttings and utensils the property of the proposer.	¢
Item 3	Household goods furniture and personal effects the property of the proposer and members of his family permanently residing with him.	¢
Item 4	Gold platinum and silver articles jewellery and furs the property of the proposer and members of his family permanently residing with him.	¢
Item 5	Articles specically insured	¢

Total Sum Insured

No one article insured under items 3 or 4 (furniture excepted) shall be deemed of greater value than 5% of the sums to be insured for each of those items unless such article is separately specied and the value stated.

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Note: The Policy will not cover deeds bonds bills of exchange bank treasury or promissory notes cheques securities for money stamps coins computer systems records or media.

Declaration

I/We warrant that the above Statements and Particulars are true and I/We hereby agree that this Declaration shall be held to be promissory and of continuing effect and shall form the basis of and be deemed to be incorporated in the Contract between me/us and the **ENTERPRISE INSURANCE** and I/We are willing to accept a policy subject to the Terms prescribed by the Company therein, and so pay the premiums thereon.

Date

Signature of Proposer

Agency

Contact Details

Head Office

Enterprise House, High Street
P.O. Box GP50, Accra, Ghana
T: 0302 666847-9/666856-8
F: 0302 677677
E: customerservice.insurance@enterprisegroup.com.gh
www.enterprisegroup.com.gh

Odorkor Office

1st Floor, Obrapa House
Kaneshie-Malam Motorway, Accra
T: 0302 320292-3
F: 0302 320293
E: odorkor.insurance@enterprisegroup.com.gh

Airport Office

No. 47 Patrice Lumumba Street
Airport Residential Area, Accra
T: 0302 764030/769710 & 4
F: 0302 764020
E: airport.insurance@enterprisegroup.com.gh

Tema Office

1st Floor Meridian Plaza
Community 1, Tema
P.O. Box CO 863, Tema
T: 0302 211466/7
F: 0302 211467
E: tema.insurance@enterprisegroup.com.gh

Kumasi Office

Pentecost House, Asokwa
P.O. Box 1000, Adum, Kumasi
T: 03220 33117
E: kumasi.insurance@enterprisegroup.com.gh

Takoradi Office

2nd Floor, SSNIT House
P.O. Box 500, Takoradi
T: 03120 21653
F: 03120 21653
E: takoradi.insurance@enterprisegroup.com.gh

Achimota Office

Gorund Floor, MAK-GOERS House
Plot No. 209, Achimota (Nsawam Rd)
T: 0312 291971

Weija Office

HOP No. A&/20-21 Gicel
Vehicle Valuation Centre
T: 0302 972860

Spintex Office

1st Floor, Takyi Plaza
Plot No. 40 Accra (Near Papaye Fast Food)
T: 0312 291972

Tamale Office

Hse No NR 5, Hospital Road
P.O. Box 895, Tamale
T: 03720 22362
F: 03720 22362
E: tamale.insurance@enterprisegroup.com.gh

Kumasi 2 Office

Former Internal Revenue Building
Opp. Shell Filling Station, Mbrom
T: 024 463 1560/027 761 0337

Koforidua Office

1st Floor, Construction House
Opp. SSNIT Regional Office
T: 0342 196684

