



**CELL INSURANCE**  
COMPANY (PVT) LTD

# HONEYBEE HOMEPLAN PROPOSAL FORM

Please complete in block letters & tick where applicable

How did you get to know us - Print Advert / Referral / Word of Mouth / Exhibition / Radio / Facebook / or specify

Name of insured

National Identity Number

Nationality

Occupation

Physical Address

Postal Address

Broker or Agent

Telephone Number

Cellphone

E-mail

Period of insurance from           to

(Premiums are to be paid up front before cover commences)

**Section I - Buildings**

**Sum Insured**

Buildings of the home

**Section II - Household goods**

Household goods and personal effects

**Section III - All risks**

1. Clothing and personal effects (Limit any one item not exceeding 10% of sum insured for items other than clothing) normally worn or carried on the person

2.  Pairs of spectacles

3.  Pairs of prescription sunglasses

4.  Pairs of contact lenses

For any additional items please attach an itemised schedule

**Section IV - Personal liability**

Personal liability

**Section V - Marine / Pleasure craft**

Details of craft

 

**Section VI - Personal accident**

Person to be insured

Occupation

Date of birth

(a)

(b)

**Limits required**

Death benefit

Permanent Disability

Total Temporary Disability

Medical Expenses

(a) \$

\$

\$

\$

(b) \$

\$

\$

\$



**Declaration**

I declare that statements below are true in respect of this proposal (if not please delete and explain below)

1. The dwelling is occupied and
  - (a) built of brick stone or concrete and roofed with slates tiles metal concrete or asphalt
  - (b) in a good state of repair and will be so maintained
  - (c) is a building or forms part of a building occupied solely for residential purposes
  - (d) if a flat is self contained
  - (e) is not used as a holiday or week-end residence
2. The sum to be insured is the full value of the property
3. The total value of gold and silver articles, jewellery and furs does not exceed one third of the value of household goods
4. No insurer has at any time cancelled declined refused to renew or imposed special terms on any of my insurances
5. I was previously insured with
6. I have suffered no losses (whether insured or not) during the last 3 years prior to the date of this proposal in respect of the risks now proposed.
7. I do not intend vacating the premises for any extended period within three months of date of this proposal
8. I wish to modify my preceding statement in the following respects

I agree that this proposal and declaration shall be the basis of the contract between me and Cell Insurance Company. The insurance does not commence until acceptance has been confirmed by the Insurer.

Date

Signature

**For official use only**

Total premium	\$
Less Agent Commission	\$
Cell Net premium	\$
Add Stamp Duty	\$
<b>Total payable to Cell Insurance</b>	<b>\$</b>

