

HomeSafe Insurance

Proposal Form

In order to apply for this insurance, please complete all parts of this proposal form and the annexures, if any.

You must provide full, accurate, and true answers to all questions listed below. Material facts which you know or ought to know should be fully and accurately disclosed. Failure to do so may result in rejecting your claim and/or terminating the insurance policy from inception.

A material fact is one that would influence our decision whether to offer you insurance or the terms which we offer.

If the space provided is inadequate, please provide details using an additional information sheet, signed and dated.

Your insurance does not commence when you sign the proposal. Your cover will only commence once we have reviewed the proposal form and confirmed cover in writing.

1. Proposer details: (Please use capital letters to complete this form.)

- a. Full Name: _____
- b. Full Name of your spouse if applicable: _____
 (We need this for the Fatal Accident cover that forms part of your insurance) (not applicable to Bronze Plan)
- c. P.O. Box : _____ d. Mobile No. : _____
- e. Landline No.: _____ f. Email address: _____
- g. Nationality : _____ h. Occupation : _____
- i. Property Type: Flat Villa/Town House
- j. The Proposer is : The Owner A Full Tenant A Sub-Tenant

2. Building/Interest details

- a. Select the adequate HomeSafe insurance plan? (please refer to the table of benefits for full plan details)
 Bronze Silver Gold Platinum
- b. Proposed sum insured , if exceeding the set limits (Applicable for Gold and Platinum Plans only):
- i) Contents : _____
- ii) Personal Belongings : _____
- c. Optional Cover(s):
 Do you wish to buy these optional covers?
- i) Building (for Owners only): Yes No **if Yes**, Current Reinstatement Value: _____ AED
- ii) Domestic Helper : Yes No **if Yes**, Please provide the name: _____
- iii) Garden cover (not applicable for Bronze Plan): Yes No
- d. Provide exact location of the premises to be insured:
 Street/Road: _____ City : _____ Emirate: _____
 Flat No: _____ Floor No: _____ Villa/Building Name/No : _____
 Geo-coordinates: Longitude: _____ Latitude: _____

2. Building/Interest details (continued)

e. Do you wish to insure any article valued at more than the single article limit for Unspecified Contents applicable to your policy? Yes No

If yes, complete the list of such items on a separately signed sheet, with a description and the value to be insured

f. Do you wish to insure any item valued at more than the single article limit for Unspecified Personal belongings applicable to your policy? Yes No

If yes, complete the list of all such items on a separately signed sheet, with a description and the value to be insured

3. Insurance history

a. Have the proposed premises ever been insured? Yes No

If Yes, please provide:

Last/Current Insurer's name: _____ Policy expiry date : _____

b. Have you ever sustained a loss during the last 5 years? Yes No

If Yes, provide details of the loss(es): _____

c. Has your insurance been declined, cancelled or not renewed in respect of the proposed premises? Yes No

Declaration

I/We hereby declare that the statements/information given by me/us in the Proposal Form are full, accurate and true. It is hereby understood and agreed that the statements, answers and particulars provided in this Proposal Form and as per the attachments are the basis on which the insurance policy is being issued/effectuated. If after the insurance policy is effectuated, it is found that any fact in the statements, answers or particulars in this Proposal Form is incorrect, untrue, inaccurate, misrepresented or non-disclosed in any material respect, ADNIC shall have no liability under the insurance policy and/or shall have the right to terminate the insurance policy from inception.

Name of Proposer: _____

Date: _____

Signature of proposer: _____

(Signature must be preceded by the handwritten words: Read & Approved)

Note: Please note that each page of the Proposal form should be signed by the Proposer or its legal representative.