IRST ASSURANCE COMPANY LIMITED

Head Office: Peugeot House, Office No.2, Ground Floor, Upanga Road, P.O Box 5799, Dar es salaam, Tanzania. Tel: (+255) 022 2122130/1, Cell: 0767 818101/838343; 0788549292, 0783543939 Email: enquiries@firstassurance.co.tz Website: www.firstassurance.co.tz

## PROPOSAL FOR MONEY/CASH IN TRANSIT INSURANCE

The Company's policy insures against:-

- 1) Any loss (except as specified below) of the money belonging to the Insured or for which he is responsible:
  - a) Whilst in transit in the custody of the Insured or his authorized representative;
  - b) Whilst contained in any of the Insured's business premises.
  - c) Whilst contained in the private dwelling of the Insured or of a principal or employee of the Insured.

The Company's liability in respect of money:-

- 2) In the Insured's business premises while such premises are open for business and not contained in locked safe or strong room; or
- 3) In the private dwelling of the Insured or of a principal or employee of the Insured is limited to Tshs.2,000,000

The Company shall not be liable in respect of:-

- 1. Loss not discovered within seven working days of the event giving rise to the loss
- 2. Loss arising from fraud or dishonesty of any person in the employment of the Insured
- 3. Loss or shortages due to errors or omission.
- 4. Loss of money in the custody of collectors or agents that has been in their possession for a period exceeding 24 hours from time of receipt.
- 5. Money in transit by post.
- 6. Depreciation or fall in value of money.
- Loss caused directly or indirectly caused by or contributed to by or arising from ionizing radiations or contamination or by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.

The premium is based partly on the total amount carried during the year, the premium at the beginning of each year being calculated on the estimated figure and adjusted at the end of the year on the actual total amount carried. A record of all money carried, other than crossed cheques, must be kept in order that an annual return may be made to the company for premium calculation purposes.

## Rates of premium will be quoted on receipt of a fully completed proposal form.

The general particulars given in this proposal are subject to the terms of the policy issued by the company.

b) Proposer's Postal Address	Postal code	
Town/City	Country	
c) Proposer's Business or profession		
d) Premises		

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PARTICULARS OF MONEY IN TRANSIT OR IN SAFE		
<ol> <li>N.B.: The term "Money" means cash (Notes and Coins) cheques, Traveler's Cheques, Postal and Money Orders and current unused stamps (excluding stamp collection) expressed in Tanzania currency.</li> </ol>		
Estimated total amount of money other than crossed cheques to be carried in the year Tshs	•	
Maximum amount to be carried on any one occasion or to be kept on the premises when open for business Tshs		
Maximum amount to be kept in locked safe or strong room at any time whilst in the premises are closed for business Tshs		
3. (a) Name and Address of Bank or Banks to and from which money is to be carried		
(b) Address of your premises to and from which money is to be carried	-	
(c) What is the approximate distance between the Bank and your premises to and from which money is to be carried?	•	
(d) (i) Describe any other transit journeys involving carriage of money		
<ul> <li>(ii) Do you require to insure against loss occurring during such transits? If so, state estimated highest amount carried on any one occasion and</li> <li>(iii) Estimated total amount to be envired in the upper</li> </ul>	-	
(iii) Estimated total amount to be carried in the year(e) Between what hours is money in transit?	-	
(f) Between what hours are your premises open for business?	-	
(,,		
<ul> <li>(a) How many Employees go together to convey the money?</li></ul>	-	
(c) Describe any special precautions which are taken to ensure the safety of the money being carried	_	
5. Have you in force a Fidelity Guarantee policy covering the Employees conveying the money?	_	
If so, give name of insurer	_	
(a) To what extent the premises will be left unoccupied		
(b) Make of safe or strong room		
(c) Type	_	
(d) Size and weight	_	
(e) How is the safe secured and/or anchored?	-	
(f) How many keys are issued for the safe and who keeps them?		
B. Have you ever sustained a loss of the kind now proposed? If so, give particulars		
<ol> <li>Has any company or underwriter in respect of any risk to which this proposal applies:</li> <li>(a) Declined to insure you?</li> </ol>		
(b) Required special terms to insure you?	_	
(c) Cancelled or refused to renew your Policy?		
(d) Increased your premium at renewal?		
If so, give particulars		



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I/We desire to insure with First Assurance Company Limited in the terms of their Policy used for this class of insurance. I/We hereby declare and warrant that the above statements and any supplementary particulars, which are or may be supplied in connection with this insurance are true and complete and that nothing materially affecting the risk has been concealed. I/We agree that the above proposal and this warranty shall be the basis of the contract between the Company and myself/ourselves.

Date: \_\_\_\_\_\_ Signature: \_\_\_\_\_\_ (NO INSURANCE IS IN FORCE UNTIL THE COMPANY NOTIFIES ITS ACCEPTANCE OF THE PROPOSAL)