PROPOSAL FOR PLATE GLASS INSURANCE

1.	Full Name of Proposer		
2.	Postal Address		Phone No.
			N.I.C. No
3.	Location /s of the premises in which glass is contained		
4.	Type of Business		Phone No.
			Fax No
5.	Name and address of Mortgagee (if any)		
6.	Period of insurance required From :	To:	
7.	Description of shutters used to protect the glasses		
8.	Is the Glass exposed to any special risk? Yes / No		
	If "Yes" please describe:		
9.	Is the premises insured against Fire? Yes / No		
	• Name of insurer :		
	• Sum Insured :	• Policy Number :	
10.	Have you suffered any loss during the past twelve months by any of the proposed perils?	Yes / No	
	If "Yes" please describe		
11	Have you ever been previously insured with another insurer?	Yes /No	
	If "Yes" name of the Company:		
12	Have you ever been refused cover by any Insurance Company or had special Terms imposed?	Yes / No	
	If "Yes" please state the name of the Insurance Company and reason for refusal:		

Declaration

- I/We declare that to the best of my/our knowledge and belief the information given is true in every respect and   if such statements are in the writing of another person, he / she acted as my / our agent for such purpose.

- I/We agree that this proposal and declaration shall be the basis of the contract between me/us and People's Insurance Limited.

Date: ………………………..   **…………………………….**
                                                              Proposer's Signature

Business Channel

DETAILS OF GLASS TO BE INSURED

Item No:	No of Squares	Positions of the Glasses: Whether Inside or Outside Wall or on Door, Window etc.,	Type of Glass : Clear, Designed, Coloured, Mirrors…..	Dimensions			Value (Rs.)	*Remarks
				Length	Width	Thickness		

*If any glass is already cracked/ broken please state under 'Remarks': The liability of the company for cracked / broken glass does not commence unless the imperfect glass has been replaced by sound glass.

Note: In the event of breakage, the loss is assessed as for plain glass unless the contrary is expressly stated in the Policy.

………………………………

Date : ……………   Signature of the Proposer