



**PEOPLE'S
INSURANCE**

EMPOWERING A RESILIENT NATION

PEOPLE'S INSURANCE PLC
(Company No. PB 3754 PQ)
No. 07, Havelock Road, Colombo 05
Tel: (011) 2126126 Fax: (011) 2126042

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? If "Yes" please describe			Yes / No
11.	Have you ever been previously insured with another insurer? If "Yes" name of the Company:			Yes /No
12.	Have you ever been refused cover by any Insurance Company or had special Terms imposed? If "Yes" please state the name of the Insurance Company and reason for refusal:			Yes / No

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 PLC.
- I/We hereby agree to be bound by the Privacy Policy of People's Insurance PLC, accessible at <https://peoplesinsurance.lk/privacy-policy/> . If you need a hardcopy of the Privacy Policy of People's Insurance PLC, please call 0112-206306 or email pilassist@peoplesinsurance.lk
- I/We agree to promptly notify the Company of any alterations or changes to the information provided herein.

"A licensed Insurance Company by the Insurance Regulatory Commission of Sri Lanka"

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'Remarks': The liability of the company for cracked / broken glass does not commence unless the imperfect glass has been replaced by sound glass.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