



اينسون س ستندارد سنديرين برحد

STANDARD INSURANCE SDN. BHD.

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BURGLARY INSURANCE PROPOSAL

You are to disclose in this proposal form, fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be void.

kamu adalah diminta menerangkan dengan penuh dan benar segala butir-butir yang kamu tahu atau harus tahu di atas cadangan Insuran ini, kalau tidak polisi yang dikeluarkan menurut cadangan adalah tidak sah.

Name and Address of Proposer
(BLOCK LETTERS)

Tel. No. _____

Occupation/Business: _____

Period of Insurance: From _____ to _____

Location of Property proposed for Insurance

FOR OFFICE USE
Policy No.
Cover Note No.
Rate
Premium
Warranties
Agency
App. by

PROPERTY TO BE INSURED

DESCRIPTION OF PROPERTY

SUM INSURED
(B\$)

A. BUSINESS PREMISES:

(a) Stock-in-Trade the property of the Proposer consisting of _____

(b) Goods held in Trust or on Commission for which the Proposer is responsible, consisting of

(no none article to be deemed of greater value than 5% of Sum Insured _____)

(c) On Trade Fixtures, Fittings and Utensils in Trade and Office Furniture _____

(d) Cash in locked Safe/Cabinate _____

(e) Business Plant and Appliances _____

(f) On the following Articles not specified above _____

TOTAL SUM INSURED

N.B. The sum insured shall be the insured value or the market value of the insured property, whichever is the lower.

Market value shall mean the value of the property insured herein at the time of damage or loss less due allowance for betterment, wear and tear and/or depreciation.

1. With regard to the premises in which the Property to be insured is contained, please state:-

(a) Occupation (Private Dwelling, Shop, Warehouse, Factory, etc)

(a) _____

(b) Are you the Sole Occupier? If not, please give details of other occupants.

(b) _____

(c) How long has the premises been occupied by you?

(c) _____

(d) The construction of the premises

(d) Number of storey _____ Attached/Detached

Walls: _____

Roof: _____

(e) Will the premises be left unoccupied at anytime? If so, please state when and for how long.

(e) Yes No

(f) Is any burglar alarm system fitted? If so, please give details (location, type and make)

(f) Yes No

(g) Is there any maintenance contract? If so, please state name of Company

(g) Yes No

2. Give full particulars of locks, construction and other protection to the premises:-

(a) Front Entrance

(a) _____

(b) Rear Entrance

(b) _____

(c) Side Entrance

(c) _____

(d) Windows

(d) _____

(e) Any other openings

(e) _____

(f) Describe any other protection to the premises

(f) _____

3. Have you a Watchman or Caretaker during the night?

Yes No

4. Are the adjoining premises tenanted? If so, what is the nature of the tenancies?

Yes No

5. Have you previously been insured against Burglary, Housebreaking or Larceny? If yes, please state name of previous insurer and Policy Number.

Yes No

6. Have you ever suffered loss by Burglary, Housebreaking or Larceny? If so, please give details.

Yes No

(a) When did loss occur?

(a) _____

(b) How was access gained and what precautions have been adopted to prevent a recurrence?

(b) _____

(c) Have any other premises occupied by you been so entered? If so, please give particulars

(c) Yes No

(d) Have you ever claimed upon any Insurer for loss by Burglary Housebreaking or Larceny. If so, please give particulars.

(d) Yes No

7. Has any Insurer in respect of Burglary Insurance
- (a) Declined your proposal (a) Yes No
- (b) Cancelled or refused to renew your Policy? (b) Yes No
- (c) Required an increase in premium or special terms for renewal?
If yes, please give particulars. (c) Yes No
-
8. Are you insured against fire? If yes, give details:-
- (a) Total value of whole contents. (a) _____
- (b) Sum Insured (b) _____
- (c) Insurance Company (c) _____
9. Do you wish to insure Cash and Notes in Locked Safe? If so,
please give the following information regarding your safe(s):-
- (a) Name of Make. (a) _____
- (b) No. of Safe. (b) _____
- (c) Dimension of Safe. (c) _____
- (d) Whether built into wall or secured to floor. (d) _____
- (e) Whether fire resistant or theft resistant (e) _____
- (f) What is the total value of Cash and Notes kept in the safe(s)
when locked? (f) _____
- (g) Are the keys of the safe(s) removed from the premises when
the premises is closed for business? (g) Yes No
10. Do you keep record of your stock? Yes No
If 'Yes', please describe

DECLARATION BY PROPOSER

Please read the following declaration very carefully and read again the questions and answers especially if not completed in your own hand before signing the form.

I/We declare that the whole of these answers in this Proposal are true, that I/We have withheld no information whatever that might tend in any way to increase the Company's risk, or to influence its decision regarding this Proposal; and that I/We have not proposed for insurance in excess of the actual value of the Property described and I/We undertake to exercise all ordinary and reasonable precautions for the safety of the said Property. I/We agree that this Proposal and Declaration shall be the basis of the Contract between me/us and the Company, and to accept the Company's Ordinary Policy in this Class of Insurance.

I/We further agree that if this Proposal in any particular is filled in by any other person, such person shall be deemed my/our Agent(s) and not the Agent of the Company.

I/We confirm having read and understand the information contained in the Product Disclosure Sheet provided to me/us and/or available on the Company's website.

Date _____

Signature of Proposer

If under Company's Name,
please affix rubber stamp & sign

IMPORTANT NOTICE

1. Liability is not attached until the proposal has been accepted by the Company.
2. Any changes in the information given must be reported to this Company immediately or else the Company will reserve the right to decline all liability.
3. Please give a definite answer to each question, dashes are not sufficient. Any question not answered in this Proposal will be taken as replied to in the negative.

4. **PREMIUM WARRANTY**

It is a fundamental and absolute special condition of this contract of insurance that the premium due must be paid and received by the insurer within sixty (60) days from the inception date of this Policy/Endorsement/Renewal Certificate.

If this condition is not complied with then this contract is automatically cancelled and the insurer shall be entitled to the pro rata premium for the period they have been on risk.

Where the premium payable pursuant to this warranty is received by an authorised agent of the insurer, the payment shall be deemed to be received by the insurer for the purposes of this warranty and the onus of proving that the premium payable was received by a person, including an insurance agent, who was not authorised to receive such premium shall lie on the insurer.

Subject otherwise to the terms and conditions of this Policy.