

## Insurance Proposal for Standard Home and Domestic Contents Insurance

### Personal Details

Mr.  Miss.  Mrs.

Given Names \_\_\_\_\_ Family \_\_\_\_\_

Email Address (Personal / Work): \_\_\_\_\_ Nationality \_\_\_\_\_

Address \_\_\_\_\_

Country \_\_\_\_\_

Home Tel (incl country code) \_\_\_\_\_ Mobile \_\_\_\_\_

Date of Birth \_\_\_\_\_ Occupation \_\_\_\_\_

How many family members permanently occupy the property? \_\_\_\_\_

Domestic Helpers ? \_\_\_\_\_

### Policy Start Date

What date would you like your insurance to commence? \_\_\_\_\_

### Section 1. Content Cover

Marine Cargo Insurance Policy Number \_\_\_\_\_

Origin / Destination \_\_\_\_\_ to \_\_\_\_\_

Contents Sum Insured \_\_\_\_\_ Currency \_\_\_\_\_

Please specify ALL High Value Articles worth USD \$2,000 or above (Continue of a separate sheet if required)

Item	Value (Currency)	Item	Value (Currency)
1. _____	_____	2. _____	_____
3. _____	_____	4. _____	_____
5. _____	_____	6. _____	_____
7. _____	_____	8. _____	_____
9. _____	_____	10. _____	_____

This compulsory insurance automatically indemnifies the insured and family for US\$50,000 per occurrence and up to US\$100,000 during any one policy year for third party liability.

### Questions to be answered by the proposer:

1. Do you own or rent this location? Own  Rent   
 Is your home a: House  Apartment  Approximate Age of Building (yrs) \_\_\_\_\_  
 If the premises is Mortgaged please provide the name of your Mortgagee \_\_\_\_\_

2. The Structure

- a. Of what material is the following made of (brick, reinforced concrete, wood, steel ect..)  
 Walls \_\_\_\_\_ Floor \_\_\_\_\_ Roof \_\_\_\_\_

b. Security / Flood Risk

Do you have the following security features? (please tick)

- |  |                           |                          |
|--|---------------------------|--------------------------|
| 1. Burglary Alarm?   | Yes <input type="radio"/> | No <input type="radio"/> |
| 2. Window Locks?   | Yes <input type="radio"/> | No <input type="radio"/> |
| 3. Does your building have 24 hours security guard?                              | Yes <input type="radio"/> | No <input type="radio"/> |
| 4. To the best of your knowledge, is there any history of flooding in that area? | Yes <input type="radio"/> | No <input type="radio"/> |
| 5. Are there any nearby waterways or coastlines near your home?                  | Yes <input type="radio"/> | No <input type="radio"/> |



For correspondence regarding details, pls. contact  
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 Email: enquiry-gi@demeterassetmanagement.com

**Section 2. Structure / Building Cover :**

Sum Insured: \_\_\_\_\_

**Section 3. Worldwide All Risks – Optional Extension**

This optional extension (if required) covers loss or damage to specified items anywhere in the world. Items valued at us\$1,000 or more must be accompanied with proof of purchase in event of a claim. Please do not include Mobile Telephones, Spectacles, Contact Lenses, Writing Instruments, Palm Pilots/Portable Gaming Consoles, I-Pods and the like.

Please specify ALL items you wish to cover under this section (Continue of a separate sheet if required)

Item	Value (Currency)	Item	Value (Currency)
1. _____		2. _____	
3. _____		4. _____	
5. _____		6. _____	
7. _____		8. _____	
9. _____		10. _____	

Total World Wide All Risks Sum Insured \_\_\_\_\_

**Claims Experience:**

Please list all know incidents which have given rise to claims under any previous home and contents insurance policies in the last 5 years.

Date	Incident	Claimed / Awarded Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Declaration: I (we) have read and understood that Pacific Casualty and General Insurance Ltd is incorporated in the Republic of Vanuatu and I (we) hereby submit our application for the HomeSure insurance as above and I (we) declare the information provided herein is accurate and complete to the best of my (our) knowledge and believe that all material facts affecting the assessment of this application has been disclosed. I understand that this application will not come into effect until this proposal has been accepted by Pacific Casualty and General Insurance Ltd and agree that this proposal shall be the basis of the contract.**

\_\_\_\_\_



Signatures of Proposer

Brokers Company Stamp

Date: (dd/mm/yyyy) \_\_\_\_\_