



**MAYFAIR INSURANCE COMPANY ZAMBIA LIMITED**  
**GLASS INSURANCE PROPOSAL FORM**

**AGENT/BROKER:** .....

---

**PROPOSER**

1. (a) Name .....  
.....
  - (b) Address .....
  - (c) Situation of premises .....
  - (d) What business is carried on premises? .....
2. (a) Are the premises in an exposed position? .....
  - (b) Are the premises at the  
Corner of a street? .....
3. (a) Is any of the glass cracked? .....
  - (b) Is any glass clip-glazed? .....
  - (c) Is any glass cemented? .....
  - (c) Is any glass within 12 inches of road level? .....
4. In respect of accident of an Insurance policy in which you have  
been interested as an individual, a partner or director, has any  
Company
  - (i) Refused to renew? .....
  - (ii) Declined to accept? .....
  - (iii) Cancelled? .....



MAYFAIR INSURANCE COMPANY ZAMBIA LIMITED
GLASS INSURANCE PROPOSAL FORM

(iv) Imposed special conditions? -----

5. What breakages, if any have Occurred n the last two years
and from what causes? -----

6. Is cover required in respect of neon signs or other illuminated
signs or florescent lighting filaments
(other than tubes)? -----

If so, give full number,
position, description
and value. -----

I / we the undersigned hereby that the above particulars and those hereunder relating to the glass to be
Insured are correct and I/we agree that this declaration shall be the basis between me us and Mayfair
Insurance Company Zambia Limited

Date----- signature-----





**MAYFAIR INSURANCE COMPANY ZAMBIA LIMITED**  
**GLASS INSURANCE PROPOSAL FORM**

--	--	--	--	--	--	--	--	--



**MAYFAIR INSURANCE COMPANY ZAMBIA LIMITED  
GLASS INSURANCE PROPOSAL FORM**