

➤ 8 - Declaration

I/We hereby declare that all the statements and particulars given in this proposal form to be true, that I/We have not withheld any material information and that I/We agree that this declaration shall be the basis of the contract between me/us and CIM INSURANCE LIMITED.

Non-disclosure or misrepresentation of material facts could invalidate the insurance contract. Material facts are those facts, which would influence the acceptance or assessment of the proposal. If you are in doubt as to whether a fact is material you should disclose it.

Date : Signature of Proposer(s) :

This insurance cover has been proposed to me / us by.....
Signature of Proposer.....

For administrative purposes only.

Prepared by	
Horse Power	
License	
NCB Certificat	
Invoice (Pro-forma)	
Sales Deed (Registered)	
KYC Form	
Introducer's Certificate	
Identity Card	
Utility Bill	
Premium Rate	
Approval Date	
Approval	

Proposal Form

Motor Vehicle



➤ 1 - Proposer

Surname :	Maiden Name :	
First Names :		
Title : Mr/Mrs/Ms/Dr Other:	Sex: Male/Female	Marital Status :
Address :		
Email Address :		
Tel No Res :	Off :	Mob :
Date of Birth :	National Identity Card :	
Occupation :		
Proposal : Single / Joint :	Place of Birth :	
IF PROPOSER IS AN INDIVIDUAL		
Date of Birth :	Driving Experience :	Years :
Type of driving licence held :		Since :
Do you presently hold an insurance policy with us ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If Yes, please indicate type of policy		

➤ 2 - Proposer's Information

Are you the registered owner of the vehicle(s)? YES NO
If No, who is the registered owner ?

State name(s) age(s) and experience of all persons who to your knowledge will drive the proposed vehicle(s) fairly regularly

NAME	AGE	DRIVING EXPERIENCE

Has any insurer at any time :

- Ever declined our proposal ? YES NO
- Required an increased premium or imposed special terms ? YES NO
- Cancelled or refused to renew your Motor Vehicle insurance ? YES NO

If yes, to any of the above, please give details

Have you, or has any person who to your knowledge will drive, been convicted of any major offence during the last 5 years ? YES NO
If Yes, give details

Do you, or any person who to your knowledge will drive suffer from defective vision or hearing or from any physical infirmity YES NO
If Yes, give details

Have you been or are you presently insured in respect of any motor vehicle ? YES NO
If Yes, state name of insurer/s

What is/was the type of cover afforded ?
 Comprehensive Third party & Fire Third party only
 Other - please specify

Are/Were you entitled to the maximum No Claim Discount ? YES NO
If Yes, you will be required to submit proof of entitlement

Are there any other relevant facts which may affect our decision to accept this risk ? YES NO
If Yes, give details

➤ 3 - Vehicle(s) Details

Vehicle type
 Motor Car Motor Cycle
 Commercial Vehicle Please specify Taxation Class Dual Purpose Goods Vehicle
 Other Please specify

Make & Model : Registration No :

Colour : Year of manufacture : Year of registration :

Chassis No : Engine capacity :

Seating capacity (including driver) : Date of purchase :

Note : If you are VAT registered and entitled to any refund, please note that the Sum/s Insured given below should NOT include any amount paid in respect of VAT.

Price Paid : Owner's estimate of present value :

Description and Value of trailer (if any) :

Is/Are the vehicle(s) second-hand recon ? YES NO

Has/Have the vehicle(s) been altered / modified from manufacturer's specification ? YES NO
If Yes, give details

Has/Have the vehicle(s) ever been involved in an accident ? YES NO
If Yes, give details

Is/Are the vehicle(s) under financing / lease ? YES NO
If Yes, give details

➤ 4 - Vehicle(s) Use

State fully the purpose(s) for which vehicle(s) will be used

Will passengers be carried for hire or reward ? YES NO
 Will the vehicle(s) (i) be let on hire ? YES NO
 (ii) be used at any time for tuition ? YES NO
 Where is/are the vehicle(s) usually garaged ?

➤ 5 - Claims History

State **ALL** accidents and claims which have occurred during the past **FIVE** years in connection with motor vehicles owned &/or driven by you or (if you are not going to drive) by the person who will drive regularly

Year	Number of Accidents/ Claims	Type of Claim	At Fault? YES or NO	AMOUNT	
				PAID	OUTSTANDING

➤ 6 - Cover Required

Comprehensive Third party & Fire Third party only Loss of use Car Occupants
 Under a COMPREHENSIVE policy, a rebate is allowed in the event Proposer decides and agrees to bear a VOLUNTARY EXCESS for each and every claim in respect of accidental damage in addition to the normal COMPULSORY EXCESS imposed.
 Do you wish to bear an additional (Voluntary) Excess ? YES NO
 If Yes, for what amount ? MUR

➤ 7 - Data Protection

Cim Insurance Limited is registered as Data Controller under the Data Protection Act 2004 (Act). In the performance of its business, all the personal data collected and processed (including the sensitive data) will be treated in strictest confidence. We will use our best efforts to ensure that data is accurate, complete, current and reliable for its intended use.

Supply of information in the form is mandatory. To this end, the use of personal information may include sharing the information with other persons or bodies, such as our intermediaries, other insurance companies, surveyors, investigative agents, reinsurers, actuaries, regulatory institutions, fraud and money laundering investigating institutions, whether in Mauritius or another country

The personal data provided may be used for data sharing by Cim Insurance Limited with other Cim Group companies to advise of, offer and supply other goods and services, for other marketing purposes in a way that is compatible with Data Protection and Privacy Policy (Privacy Policy). It will not however, be presented to a third party (unless otherwise stated in the form or required by law) without your specific authorisation to do so. This exercise excludes the sensitive data.

By signing the form, you are agreeing that your personal data may be processed in the manner hereinabove described. If at any time subsequent changes occur to your personal data or you have any enquiry relating to our Privacy Policy, you can send them in writing to our Compliance Manager.