## **SALAM TAKAFUL INSURANCE COMPANY LIMITED**

65, IBRAHIM TAIWO ROAD, KANO

**Website:** www.salamtakafulinsurance.com **Email:** info@salamtakafulinsurance.com



MONEY TAKAFUL INSURANCE PROPOSAL FORM							
<b>Instruction:</b> Use $(\checkmark)$ where appropriate.							
PART A: PROPOSER DETAILS							
FULLNAME: ADDRESS: BUSINESS DE TELEPHONE:							
	PART B: TAKAFUL DETAILS						
(a) Any blar ord fran with tick safe (b) Any on t	AMOUNT  Single loss of Money i.e., cash bank and currency notes cheques (other than k or partly completed cheques) travelers cheques bankers drafts postal ers money orders current postage and revenue stamps unexpired units in king machines trading stamps (whether affixed to cards or otherwise) holiday pay stamps gift tokens and bills of exchange luncheon vouchers and travelets travel warrants phone cards credit and charge cards all secured in locked or strong room whilst on the premises out of business hours.  Single loss of such Money NOT secured in locked safe or strong room whilst he premises out of business hours.  Single loss of Money in a residence of any principal, partner, director or loyee.  Spect of any other single loss of Money occurring within Nigeria.  Sete the estimated amount of Money (other than non-negotiable cheques instruments) to be carried in transit in connection with your business for the						
PART C: LOCATION DETAILS							
i- Location o	Property:						
ii- Descriptio	n of Premises:						

Authorized and Regulated by:





Member of:

iii-Are your premises occupied at night?								
If yes, by who	om:							
iv- Are your premises in your sole occupation?  YES  NO								
If no, give details:								
v- Please give the following particulars of all safes and strong rooms:								
Maker's Name	Date Of Manufacture	Type (Safe/Strong Room)	Weight	Dimension		ed to the ground Or eestanding	Current Value	
vi- Are all keys of all safes and strong rooms removed from your premises when the premises are closed for business? vii- Are your premises fitted with a burglar alarm?  YES  NO								
If yes, give p	articulars:							
i- Give particulars of any policies currently in force with any other company covering any of the items to be insured:  ii- Please give details of previous insurers in the last five years:  iii- Have you, your Directors, Partners or family members involved with the business ever had a proposal for insurance of any kind or renewal of policy declined, or policy cancelled?  If yes, give particulars:  iv- Have you ever had any special terms or conditions imposed?  If yes, please provide details:  PART E: OTHER DETAILS								
i- What is the	approximate di	stance to your bank(						
from your premises?								
ii- How are the journeys made?  On Foot By Car Security Company Transportation								
iii- How many employees accompany the Money during transportation?								
iv-Give details of any other special precautions taken during transportation of Money?								

Authorized and Regulated by:





Member of:

(b) Is security compan			YES NO				
vi-is your iviolity carried to	7 Hom any other premises besic	les the bank:	TES NO				
If yes, give full details:							
vii- Have you ever sustaine	loss?	YES NO					
If yes, give details:							
viii- Have you ever been co	onvicted or charged (but not yet t	rried) with any criminal offer	nce? YES NO				
If yes, please provide o	details:						
ix- Are there any other Ma	aterial Facts to disclose?		YES NO				
If yes, give details:							
x- Any additional information?							
comments on reverse side	pace to complete your answers to s of proposal form.	any question, please attach	a separate sheet of continue				
	PART F: OUR TAK	AFUL CLAUSE					
<ul><li>b) The Operator shall paid based on the General Takaful Full</li><li>c) The Operator is to real takaful</li></ul>	If the contribution based on the public deduct 50% of the Takaful contription principle of Al-Wakallah (Agency and (Participants A/C) managed by manage the Fund including its invaporoyed guidelines	bution stated in the Schedul	e that the Participant has shall be credited into the				
<ul><li>in line with Shariah approved guidelines.</li><li>d) In accordance with the principle of Al-Mudharabah, 20% of the return on investing the funds will be for the Operator and the balance shall be credited to the Participants pool (Participants Account).</li></ul>							
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f) Surplus distribution	surplus shall be distributed to Participants proportionally  Surplus distribution shall be limited to only Participants who have not incurred any claims or received any  Takaful benefits under their policy for the period of consideration.						

Authorized and Regulated by:



Member of:



## **PART G: DECLARATION**

I/We to the best interest of my/our knowledge hereby confirm that:

- 1- the statements contained in this proposal form are true and correct and,
- 2- I/We have not concealed, misrepresented or misstated any material fact.
- 3- I/We agree that the statements and declaration contained in this proposal form shall be the contract of Takaful insurance with SALAM TAKAFUL INSURANCE LTD and are deemed to be incorporated in the contract.
- 4- I/We have agreed to the above Takaful clause.

Signature of Proposer		
And	Date: _	
Company Stamp		

## **AGENCY NOTE:**

"An insurance agent who assist an applicant to complete an application or proposal form for insurance shall be deemed to have done so as the agent of the applicant".

Authorized and Regulated by:

