SALAM TAKAFUL INSURANCE COMPANY LIMITED

65, IBRAHIM TAIWO ROAD, KANO

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



	NCLIDAA	ICE DDODOCAL FORM
PROFESSIONAL INDEMNITY TAKAFUL I	NSURAN	ICE PROPOSAL FORM
Important Notice:		
 x Use (√) where appropriate. x The completion of this form in no way binds the Proposer to purchas 	e takaful, nor	does it bind Operators to give takaful insurance.
Any information given will only be passed to Takaful Operator for th	-	
PART A: PROPOSER	DETAILS	
NAME:		
ADDRESS		
ADDRESS:		
ESTABLISHMENT DATE:// format dd/mm/yyyy		
DETAILS OF ALL PRINCIPALS, PARTNERS, OR DIRECTORS S/N NAME	AGE	OLIALIFICATIONS
S/N NAME 1	AGE	QUALIFICATIONS
2		
3		
PART B: OTHER DE	TAILS	
i- Have any claims in respect of the risks to which this form rela	tes ever be	en made against the husiness or any
of the Principals Partners or Directors?	NO	against the basiness of any
ii- Are any of the Principals, Partners or Directors, AFTER FULL E		ware of any circumstances which
might give rise to any such claim?	NO	
iii-Has any proposal in respect of the risk to which this form rela	tes ever be	een declined or has any such insurance
ever been cancelled or renewal refused?	NO	•
Maraka ana marakian (i ii and iii ahaara) ndaga ana iida dakai		avata ala sat
If yes to any question (i, ii, and iii above) please provide detai	is on a sep	arate sneet.
iv- Other material information:		
PART C: OTHER INSURANCE/T	AKAFUL DI	ETAILS
Do on the office / loadicide of severable hold Doof on invalid address it		2 VEC NO
Does the firm/Individual currently hold Professional Indemnity	/ insurance	? YES NO
If Yes, provide details below; (a) What limit of indemnity do you require?		
, , .		
(b) Name of Current Insurer/Takaful Operator:		
(c) Broker Name:		
Authorized and Regulated by:		Member of:

Authorized and Regulated by:





(d) Renewal Date:// format dd/mm/yyyy		
(e) Limit of Indemnity:		
(f) Contribution:		
(g) Excess:	1	
PART D: OUR TAKAFUL CLAUSE		
TANTO. GON TANALOE CEAGGE		
1. Participant has paid the contribution based on the principle of AI-Tabarru (gratuitous Contribution).		
2. The Operator shall deduct 50% of the Takaful contribution stated in the Schedule that the Participant has	5	
paid based on the principle of Al-Wakallah (Agency) and the balance thereof shall be credited into the Genera	l	
Takaful Fund (Participants A/C) managed by the Operator.		
The Operator is to manage the Fund including its investment, in a manner deemed fit by the Operator and ir line with Shariah approved guidelines.	ì	
4. In accordance with the principle of Al-Mudharabah, 20% of the return on investing the funds will be for the	3	
Operator and the balance shall be credited to the Participants pool (Participants Account).	•	
5. After paying Re-Takaful, claims, commissions and reserves from the Participants Account any remaining	5	
surplus shall be distributed to Participants proportionally	•	
6. 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.		
DART F. DECLARATION		
PART E: 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 Principal:20		

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:



