



GENERAL
INSURANCE
BOTSWANA

Surname (Mr./Mrs./Miss)

First name(s)

Address

Telephone no. (s)

FOR OFFICIAL USE ONLY

Policy Number

Premium

Agent's name

Period of insurance: From

to

Renewal date

Occupation(s) (if more than one state all)

Address at which your car is kept (if not as above)

Insurance required (please tick appropriate box)

Comprehensive Third Party, Fire & Theft Third Party

Please indicate Class of Use required (*note: all classes exclude use for racing, competitions, rallies or trials*)

Class C Use by anyone for social, domestic and pleasure (including travel to and from usual place of work). Use for hiring or any business purpose is excluded.

Class A Use by anyone for social, domestic and pleasure and by you in person for your business. Use for hiring, motor trade purposes and commercial travelling is excluded. Use for hiring, motor trade purposes and commercial travelling is excluded.

Class B Use by anyone for social, domestic and pleasure and by any person for your or your employer's or partner's business. The carriage of passengers for hire or reward is excluded.

Will your car be used for any purpose not provided for in the class of use indicated?

No Yes (please give details)

What date do you require insurance to commence?

Please Note: No insurance will be in force until you receive an official cover note. General Insurance Botswana (Pty) Limited reserves the right to decline any proposal.

Your car(s)

| Make & Model <small>(GT, XL, etc)</small> | Type of body <small>(saloon, estate, etc)</small> | Year of make | Cubic capacity | Seating capacity | Value | Registration no. |
|--|--|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Has the car been converted adapted or modified in any way?

No Yes (please give details)

Financial interests

No Yes (please give details)

Are you the owner of any other motor vehicles?

No Yes (please give details)

Drivers When completing 1 and 2 below, please give details for yourself and your spouse (whether likely to drive or not) and all other persons who to your knowledge may drive your car.

1 (a). Myself

| <i>Full Name</i> | <i>Occupation(s)</i> | <i>Date of birth</i> | <i>Type of licence currently held (full, provisional)</i> | <i>Date driving test passed</i> |
|----------------------|----------------------|----------------------|---|---------------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

My spouse

| <i>Full Name</i> | <i>Occupation(s)</i> | <i>Date of birth</i> | <i>Type of licence currently held (full, provisional)</i> | <i>Date driving test passed</i> |
|----------------------|----------------------|----------------------|---|---------------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

(b) Do you wish the driving to be restricted to yourself? *Or yourself and your spouse?*

If your spouse is included who will be the main driver?

2(a). Has any person mentioned above been involved in any motor accident or loss within the last 3 years?

No Yes (please give details)

(b). Been convicted of any motoring offence within the last 5 years or is prosecution pending?

No Yes (please give details)

(c). Been disqualified from driving?

No Yes (please give details)

(d). Have defective vision or hearing or suffered at any time from diabetes, fits or any heart complaint or any other disease or infirmity?

No Yes (please give details)

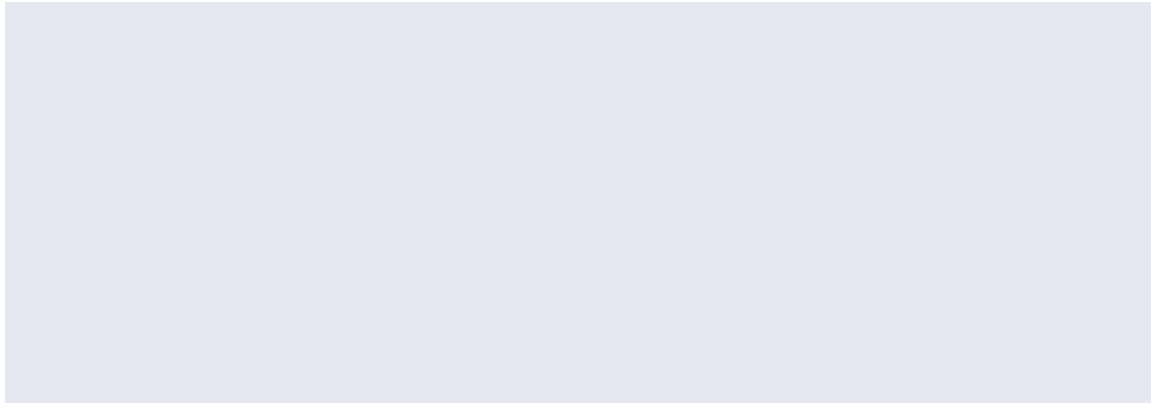
(e). Been refused motor insurance renewal or had any special terms or conditions imposed by Insurer?

No Yes (please give details)

3 (a) Have you held or do you hold a car insurance policy? (company, expiry date)

(b) Are you entitled to a no claims discount? *You need to send proof of no claims discount (e.g. your renewal notice)*

Any other facts known to you which are likely to affect acceptance or assessment of the risks proposed for insurance must be disclosed. Should you have any doubt about what you should disclose, do not hesitate to tell us or your insurance adviser. This is for your protection, as failure to disclose may mean that you policy will not provide you with the cover you require, or perhaps invalidate the policy altogether.



DECLARATION

I declare that the statements and particulars given in this proposal are, to the best of my knowledge and belief, true and complete, and this proposal shall form the basis of my contract n with General Insurance Botswana (Pty) Limited.

I agree that the Insurance will not be in force until the proposal has been accepted by the Company except to the extent of any official cover note which may be issued.

Date



Signature of Applicant

