



HIMALAYAN GENERAL INSURANCE CO. LTD.

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Branches: Birgunj - Biratnagar - Pokhara - Durbarmarg - Butwal - Lalitpur
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MONEY INSURANCE PROPOSAL FORM

| QUESTIONS | ANSWERS |
|------------------------------|---------|
| 1. Proposers name in full | 1 |
| 2. Address in full | 2 |
| 3. Business or occupation | 3 |
| 4. What are the sums insured | |

| CIRCUMSTANCES | LIMIT ANY ONE CARRYING | ESTIMATED ANNUAL CARRYING |
|--|----------------------------------|---------------------------------------|
| Section A Money in transit from the Bank to the Insured's premises for wages, salary, petty cash | NRs. | NRs. |
| Section B Money in transit (other than A) to and from the Bank and the Insured's premises | NRs | NRs |
| Section C Money other than as described above (give full details) | NRs | NRs |
| Section D Money (other than wages temporarily held) whilst in a securely locked safe or strongroom | Maximum sum held at any one time | NRs |
| 5. Period of Insurance | 5. FromTo | |
| 6. a. Name and address of bank from which money is taken to premises | 6 a. | |
| 6. b. Name and address of bank to which money is taken to premises | b, | |
| 7 a. How often is money taken to/ from bank | 7 a. | |
| b. Do you vary the days, time and route taken | b. | |
| c. In what is the money carried and how many | c. | |
| d. What means of transit do you use | d. | |
| e. What is the distance that money is carried | e. | |
| 8 a. How many employees will carry the money | 8 a. | |
| b. What is their position in the company | b. | |
| c. Are they covered under a Fidelity Ins. Policy | c. | |
| 9. Do you require cover for riot & strike | 9 | |
| 10. Give details of all safes and strongrooms on the premises | | |
| Makers name & number Size & weight | Is the safe | Where is the Number of keys Will keys |

| | | | |
|---|---------------------------------------|-------------------------|-----------------|
| | | | remain |
| of safe | securely fixed safe kept/ fixed & who | | with key holder |
| | to the building | holds them at all times | |
| 11. a. Are you now or have you been insured for money | 11a. | | |
| b. If so with whom and when | b. | | |
| c. Has any company declined, cancelled, refused to | c. | | |
| d. Have you ever had a loss during the last 5 years | d. | | |
| of money in transit or on the premises. If yes to 11c | | | |
| or d give full details | | | |
| 12. Do you wish the Policy to issued in ENGLISH () | NEPALI () | EITHER () | |

DECLARATION

I/ we hereby declare that the above statements are true and that I/ we have withheld no information which might influence the acceptance of this proposal. I/ we agree that this proposal shall be the basis of the contract between me/ us and the Company and deemed to be incorporated in the Policy.

Date :

Signature
: