



NICOZDIAMOND
INSURANCE LIMITED

You never know what will happen
A member of FIRST MUTUAL HOLDINGS LIMITED

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PRIVATE MOTOR PROPOSAL FORM

1) **GENERAL**

- (a) Full name of proposer
- (b) Date of birth (c) Occupation.....
- (d) Postal AddressId Number / company reg number.....
- (e) Business Tel No.....Mobile no.....Email address.....
- (f) Bank _____ Branch: _____ Account no. _____
- (g) Period of insurance from to.....

2) **DETAILS OF PROPOSER**

- a) Are you fully licensed for this class of vehicle
- b) Date when licensed
- c) License number.....
- d) If not licensed who will be driving the vehicle
- e) Details of relationship and license details of the driver
- f) Do you or any person who to your knowledge will drive your car suffer from any physical disability or infirmity? Give details
- g) Have you or any person who to your knowledge will drive your car ever been convicted of any motoring offence? Give details

3) **Details of any accidents, losses or claims during the past 3 years**

Year	Total number of claims lodged	Total value of claims paid	Total value of claims outstanding	Total value of claims rejected
1				
2				
3				

4) **VEHICLE DETAILS**

Make/Model	Reg. No.	Year of Manufacture	Year of purchase	Purchase Value	Estimated current value

IMPORTANT

If it is a Public Service Vehicle (PSV) or red plate, do you have PSV Requirements

a) If YES, provide the expiry date of the requirements:

- Defensive:
- Retest:
- Medical Tests:

NB – should any of the PSV requirements is to expire before the required insurance period, immediately renew and advise Nicozdiamond the new expiry date.

5. Provide any other material information that could be helpful in understanding your vehicle and it's driver (s)

6. What is the vehicle used for

7. Where will the vehicle be kept overnight?.....

8. Are you the registered owner of the vehicle?.....

9. if no, in whose name is the vehicle registered?.....

USD INSURANCE PREMIUM PAYMENT - SOURCE OF FUNDS DECLARATION

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DECLARATION:

I/We hereby declare that the above particulars and statements are true, correct and complete and contain all information known to me/us affecting the risk to be insured, and that this and any other written statement made by me/us or on my/our behalf for the purpose of insurance shall be the basis of and incorporated in the contract between me/us NicozDiamond, (hereinafter called the Company) shall be promissory

I/We further agree to accept insurance on terms and conditions set forth in the Company's policy, and particularly undertake to notify the company immediately of any alteration in the risk. We further agree that liability shall attach to the Company from the date of receipt of the premium payment.

Date Proposer's Signature

Broker /Agent Agency No

NDI employee.....

WARNING: INSURANCE FRAUD IS A CRIME