H Savy Insurance Co Ltd

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Bonds
Proposal form

IMPORTANT NOTICE

You should fully and faithfully give all facts you know or ought to know otherwise you may receive nothing from the Policy

Insurance Cover is operative after formal acceptance of this Proposal in writing by the Company and premium paid accordingly unless otherwise agreed and subject to all other terms and conditions as stipulated have been fully complied with.

Please use BLOCK CAPITALS and tick where appropriate

Proposer

Title (Mr, Mrs, Miss etc):	Surname:	Maiden Name:
Names:		
Business Name:		
Nationality:	Date of Birth	
National Identification Number **Please provide National ID card, Passport or Driving License**		
Passport Number **(Non-nationals only):** **Please provide Passport**		
Residential Address **(excluding P.O. Box):**	Postal Address:	
Please provide utility bill e.g. water, electricity, fixed line telephone/bank statement issued within the past 3 months		
Email Address		
Telephone	Home:	Office: Mobile:
Employment status	Employed	Self-employed Unemployed Retired
Post Title: Sector:	Employment/Business address:	

Source of Funds	Salary		Maturing Investment		Rental/Property Sale		Sale of Shares	
	Retirement/ Pensions		Savings		Dividends/ Interests		Gift	
	Lottery/Casino win		Inheritance		Loan		Other (please specify)	
Average Monthly Income			Under SR50,000		Above SR50,000			

Bond

Type of Bonds	Performance		Advance		Tender		Immigration	

Bond Amount:	Percentage of the total contract value:
Term:	Period of cover:

Immigration documents i.e, letter, G.O.P and copy of passport
(applicable for immigration bonds only)

Declaration

I/We desire insurance as above and hereby declare all the statements made and particulars given in this Proposal Form to be true, that I/We have not withheld any material information and that I/We agree that this declaration shall be the basis of the contract between me/us and **H SAVY INSURANCE COMPANY LTD**

I hereby authorize a representative of H Savy Insurance Company Ltd to complete the proposal form on my behalf. I certify that I have read the contents of this form and that all entries made are both truthful and accurate to the best of my knowledge. ***Please tick the box if applicable*** ☐

Signature: ***Date:***

Admin use only

Proof of identity **(Passport, National ID card, Driving License)**		Proof of address (issued in the last 3 months)	
Legible copy of original		Copy of original	
Details manually entered in SLAMS		Details manually entered in SLAMS	
Copy labelled and attached in SLAMS		Copy labelled and attached in SLAMS	