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RENTER'S & HOMEOWNERS CONTENTS INSURANCE POLICY PROPOSAL

THE PROPOSER

Name of Proposer: _____

Alias or Pet Name: _____ Date of Birth _____ Sex: (M) _____ (F) _____

Tax Registration Number: _____ Nationality _____ Email Address _____

Current Permanent Address _____

Mailing Address: _____

Employment Status: Employed _____ Self Employed _____ Retired _____ Unemployed _____ Student _____

Employers Name: _____ Telephone Number _____

Occupation/Trade/Profession: Please note the Businessman is not an appropriate answer , actual Business/Trade Profession must be stated _____

Mother's Maiden Name _____

Identification Type _____ Number _____ Expiry Date _____
 (Drivers Licence, Passport, National Identification, Other)

Do you or any member of your immediate family currently hold or previously held a prominent public office?
 Yes No

(e.g. head of state/Government member of any house of Parliament, Ministry of Government, Official of any Political Party, Permanent Secretary, Chief Technical Director or Chief Officer in charge of Ministry, Department of Government, Executive Agency or Statutory Body, Judiciary, Military – above rank of Captain, Police- Assistant Commissioner and above, a Director of Chief Executive of any company in which the Government owns a controlling interest, an individual who holds/held a senior management position in an International Organization).

If yes, describe: AND give name and address of immediate family member (immediate family: i.e parents, spouse – including common-law, children-including step children or adopted children, siblings and in-laws as well as close associates (i.e. individuals who are closely connected to PEP, either socially or professionally).

Name: _____ Address: _____ Relationship _____

Name: _____ Address: _____ Relationship _____

Name: _____ Address: _____ Relationship _____

PROPSER'S REFERENCES:

Name: _____ Name: _____

Position: _____ Position: _____

Phone Number _____ Phone Number _____

Would you like to send/receive communication electronically? _____

Address of Dwelling at which the insurance is required _____

Questions to be answered by the Proposer. All questions must be answered fully.

Of what materials is the dwelling constructed? Walls Roof: _____

(a) For how many days (whether consecutive or not) is the dwelling likely to be left without an inhabitant during one year. _____

Note: Attention is drawn to a proviso in the Policy that cover against Theft will be suspended for any period or periods in excess of 30 days during which the dwelling be left without an inhabitant therein unless specially agreed to by the C Company.

PREVIOUS INSURANCE AND LOSSES

Are there any other policies covering the property to be insured: Yes No
If yes, please state policies in effect _____

Has any Company or Insurer, in respect of any of the perils to which the proposal applies:-

(a) Declined to Insure you? Yes No
(b) Cancelled or refused to renew your insurance? Yes No

Is there a hire purchase agreement on any of the Property to be insured: Yes No
If so, by whom? _____

Have you ever sustained loss to contents at the residence at which the insurance is to apply? Yes No
If so, please give particulars. _____

THE PROPERTY TO BE INSURED

CONTENTS: Furniture, Household Goods and Personal Effects the property of the Proposer or any members of the Proposer's family normally residing with the Proposer. Fixtures and Fittings which belong to the Proposer or for which The Proposer is legally responsible.

Note 1

There is no per item limit in the policy.

Note 2.

The Insurance on Contents DOES NOT COVER any part of the structure or ceilings of the building, wallpapers and the like, external television and radio antennae, aerials, aerial fittings masts and towers nor any property to be insured under Buildings, nor does it cover more specifically insured under another policy or, unless specifically mentioned. Deeds, Bonds, Bills of Exchange, Promissory Notes, Cheques, Travelers Cheques. Securities for Money, Strips, Documents of any kind, Cash, Currency Notes, Manuscripts, Medals, Coins.

PERILS INSURED

Fire, lightning, bush fire, spontaneous combustion, volcanic eruption, subterranean fire, explosion, earthquake, hurricane, windstorm, storm, tempest, cyclone, tornado, hail, full flood, riot, strike, civil commotion, malicious damage, aircraft damage (including things falling therefrom), impact damage, bursting of pipes and the overflow of water tanks and other apparatus, burglary, theft, public /personal liability and accidents to servants.

Please select the band for which the value of your Contents falls within:

Packages	Sum Insured	Premium	GCT	Stamp Duty-	Total	Package Selected
1	0.00 to 1,000,000.00	10,000.00	1,500.00	400	11,900.00	
2	1,000,001 to 1,500,000	12,250.00	1,837.50	400	14,487.50	
3	1,500,001 to 2,000,000	16,000.00	2,400.00	400	18,800.00	
4	2,000,001 to 2,500,000	18,000.00	2,700.00	400	21,100.00	
5	2,500,001 to 3,000,000	21,000.00	3,150.00	400	24,550.00	
6	3,000,001 to 4,000,000	25,000.00	3,750.00	00400	29,150.00	
7	4,000,001 to 6,000,000	37,000.00	5,550.00	400	42,950.00	

All packages include: Accidents to servants \$5,000,000.00 Any One Accident/Any One Period
Public/Personal Liability \$5,000,000.00 Any One Accident/Any One Period

Free Identity Theft Cover up to \$50,000.00 Any One Period of Insurance

Any One Item Limit 35% of Policy Sum Insured

TRAVEL INSURANCE- A Free benefit of Key's Renters Policy

Free Travel Policy covering all trips during the year up to a maximum of 15 days per trip **PLAN A**

* Please note that this insurance does not cover pre-existing illnesses and is available to persons aged 18 – 70. It is not available to persons over age 70. If you wish to upgrade your Insurance Additional Premiums are as follows:

SECTION 2

TRAVEL INSURANCE -FREE PLAN A

Coverage	Benefits
Medical Expenses	US\$10,000
Personal Accident	US\$10,000

I would like to UPGRADE to Plan B for J\$1,000 + GCT YES NO

TRAVEL INSURANCE –Plan B

Coverage	Benefits
Medical Expenses	US\$20,000
Personal Accident	US\$10,000

DECLARATION I do hereby declare that the above answers are true, and that I have not withheld any material information regarding this Proposal I agree that this Declaration, and the answers given above, as well at any further Proposal or Declaration or Statement made in writing by me or anyone acting or, my behalf shall form the basis of the contract between me and the Key Insurance Company Ltd., and I further agree to accept indemnity subject to the conditions in and endorsed on the Company's Policy.

I also declare that the total sums insured represent not less than the full value of the property as above mentioned.

Date _____

Signature _____