

## LOSS OF PROFITS PROPOSAL FORM

1.	Name of the Proposer in full (in block letters)	
2.	Address for communication P.B. No. P.C. No. Location	
3.	Tel.No GSM Tele fax Email Id	
4.	Occupation / Trade / Profession	
5.	Owner of the Building	
6.	Address of the premises to be covered (Separate Sheet for each location)	
7.	Hypothecation if any:	
8.	Period of Insurance required	From  To
9.	Cover required  Item 1 - GROSS PROFIT Net Trading Profit and Standing Charges (Please specify the standing charges to be covered in detail)  Item 2 – ON ALL WAGES  Item 3–ON PROFESSIONAL ACCOUNTANT CHARGES  Total Sum Insured Maximum Indemnity period	100% for _____ weeks and _____% for remainder of the Indemnity period.  _____  _____ Months
10.	Are you now or have you previously been insured against Loss of Profit Consequential Loss? If 'Yes' give details.	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.	Have you whilst trading in the above or any other name ever had a Fire or	<input type="checkbox"/> Yes/ <input type="checkbox"/> No





	suffered damage by any of the perils to be covered? If 'Yes" give details.	
12.	Has this insurance been <ul style="list-style-type: none"><li>• Declined, refused to renew</li><li>• Cancelled by other insurance Company</li><li>• Any Special Conditions imposed</li></ul>	Yes / No Yes / No Yes / No
13.	Please state <ul style="list-style-type: none"><li>• The Company or Underwriter with whom you are insured against Fire</li><li>• The name and address of your Professional Accountants</li><li>• When does your financial year end</li></ul>	
14.	Previous year policy details	

#### DECLARATION

I/ We understand and agree that the information disclosed in this proposal will form the basis of the insurance contract. I/ We also declare that the information and details mentioned in this proposal are correct to the best of my / our knowledge and if proven otherwise in any respect, the insurance contract will become null and void without any notice.

Place:  
Date:

Signature of the Proposer

#### NOTE:

The contract will not be in force until the proposal has been accepted by the Company. This contract is governed by the insurance regulations of The Sultanate of Oman.

