

Applicant Details			
Business Name		Nature of the business	
Mailing Address			
Business phone number		Cell phone number	Email address
Location(s) of the property to be insured			
Insurance start date (MM/DD/YYYY)			
General Questions			
		Yes	No
1. Are you currently insured for Theft Insurance?		<input type="checkbox"/>	<input type="checkbox"/>
2. Has any insurer ever declined your proposal, refused to renew your policy or imposed special terms?		<input type="checkbox"/>	<input type="checkbox"/>
3. Have thieves entered or attempted to enter these or other buildings occupied by you at any time?		<input type="checkbox"/>	<input type="checkbox"/>
<i>If you have answered "Yes" to any of the questions 1 to 3, please state relevant details and particulars below.</i>			
4. Are you the sole occupier of the premises?		<input type="checkbox"/>	<input type="checkbox"/>
If you have answered "No" to the above, state the other occupancies below.			
5. Is the building fitted with an intruder alarm system?		<input type="checkbox"/>	<input type="checkbox"/>
If "Yes", complete the following:			
Type of alarm		Manufacturer	
Date of installation		Name of installation company	
Details of the maintenance contract in force.			
6. Are the windows made of shatterproof glass?		<input type="checkbox"/>	<input type="checkbox"/>
7. Are the bars or grills used on display windows?		<input type="checkbox"/>	<input type="checkbox"/>

Theft Insurance Proposal

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|--|--------------------------|--------------------------|
| | Yes | No |
| 8. Are security guards or guard dogs employed when the premises are closed for business? | <input type="checkbox"/> | <input type="checkbox"/> |
| If you have answered "Yes", provide details below. | | |

9. State below the types of door locks used. (e.g. latches, deadlocks, mortise, padlock)?

First Loss Endorsement

If you have property with a high-weight-to-value ratio – such as heavy machinery – you may not want to insure the total value of your property. Similarly if you have a large stock of bulky items you may consider that the entire stock may not be stolen. If you believe that it would be physically impossible for thieves to steal more than a particular amount you may choose this endorsement.

If you wish this endorsement to apply, state the sums insured:

Sum insured \$ Total Value \$

Declaration

Please read the following carefully as the information given by you forms the basis of the contract with Argus Insurance Company Ltd (the "Company"). Any misrepresentation or non-disclosure or failure to disclose any material fact may result in the avoidance of the policy. All material facts must be disclosed. A material fact is one that is likely to influence the Company in the assessment and acceptance of any Application. If you are in any doubt as to whether a fact is material, it must be disclosed here. Please give details below.

THE COMPANY RESERVES THE RIGHT TO DECLINE ANY PROPOSAL OR TO IMPOSE SPECIAL TERMS.

I DECLARE that, to the best of my knowledge and belief, the information given in this Proposal, which I have read over and checked, is true and complete.

I AGREE and ACKNOWLEDGE that this application forms the basis of the contract between me and the Company. I have withheld no information material to the application whether it is the subject of a specific question or not. I agree to accept and conform with the terms of the policy.

I hereby authorize the Company to collect and use my personal data with (1) other members of the Argus Group of companies for the purpose of improving customer service, developing new product and marketing; and (2) with those service providers contracted by the Argus Group of companies for the sole purpose of administering those products, pensions or policies that affect me.

I hereby authorize the Company to forward relevant documentation to the email address I have supplied.

Signature of Proposer

Signature of Underwriter

Date(MM/DD/YYYY)