



MOTOR INSURANCE THIRD PARTY PROPOSAL FORM

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Proposal no. []

Policy no. []

Individual/Company, Occupation, Nature of Business, National ID Card, Registration Certificate, Work Permit, Passport, ID No., Reg No., Nationality, Contact Name, Contact No., Email, Fax, Permanent Address, Postal Address, House/Building name, Road, District, Postal Code, Atoll, Island.

Vehicle Details: Registry no., New Vehicle (Cycle, Car, Van, Jeep, Bus, Pickup, Lorry, Truck, Excavator, Crane, Forklift, Bouser, Dumper, Ambulance, Threewheeler), Others, Vehicle Usage (Private, Commercial).

Declaration: I/We confirm that the above answers, statements, particulars and additional information are true to the very best of my/our knowledge and belief. Applicant Name, Contact No., Signature, Date.

THIS INSURANCE WILL NOT BE IN FORCE UNTIL THE PROPOSAL HAS BEEN ACCEPTED BY THE COMPANY (Acceptance of Proposal means Insurance policy issued and premium collected.)