



**NATIONAL INSURANCE CORPORATION  
OF TANZANIA LTD.**  
(INCORPORATED IN TANZANIA)

**DOMESTIC SERVANTS PROPOSAL FORM**

PROPOSER'S NAME IN FULL : \_\_\_\_\_

PROPOSER'S OCCUPATION OR PROFESSION \_\_\_\_\_

PROPOSER'S ADDRESS \_\_\_\_\_

**SCHEDULE**

All Domestic Servants must be included below.

DESCRIPTION OF EMPLOYEES	Estimated Number	OFFICE USE ONLY		
		Rate per Capital	Shs.	Cts
a) Indoor Servants ....				
b) Garden Boys .....				
c) Chauffeurs or Drivers ....				
d) Stable Boys, Grooms or Syces. N.B. Stable Boys, Grooms or Syces, in respect of Private employment only, Excluding hunting and/or Polo which must be Shown separately in (e) Below.				
e) Any other servants not Described above, with full Description of work _____ _____ _____				
		<b>TOTAL PREMIUM Shs.</b>		
		<b>STAMP DUTY Shs.</b>		

1) Are the premises at which the above Private dwelling? \_\_\_\_\_

2) (a) Have any domestic servants met with an accident whilst in your employ during the past three years? a) \_\_\_\_\_  
b) \_\_\_\_\_  
(b) If so, give particulars \_\_\_\_\_

3) Are you now or have you previously Been insured.. If so please state Name of Company or Underwriters. \_\_\_\_\_

4) Has any Company or Underwriter:  
a) Declined your Proposal a) \_\_\_\_\_  
b) Refused to renew or cancelled Your policy b) \_\_\_\_\_  
c) Increased your premium on Renewal c) \_\_\_\_\_  
d) Imposed any special ter d) \_\_\_\_\_

I We the Undersigned this .....day of .....19..... Desire to effect an insurance in terms of the policy to be issued by the Corporation against my/our Statutory and Common Law Liability as mentioned above. I/We agree to render at the end of each period of Insurance, a statement in the form required by the Corporation of all persons employed by me/us, and to pay premium on any employee in excess of the number estimated above. I/We hereby declare that all he above statements and particulars which I/We have read over and checked are true, that I/We have not suppressed, misrepresented or mis-stated any material fact, and I/We agree that this declaration shall be the basis of the Contract between me/us and the Corporation

TERMS OF INSURANCE REQUIRED for ..... months.

From \_\_\_\_\_ until midnight on \_\_\_\_\_

Signature of Proposer \_\_\_\_\_ domestic