



Supervised by:

1. PROPOSERS DETAILS:

Name : _____
Present Address : P.O.Box: _____ / Emirates: _____
Tel: _____ Fax: _____ Mobile: _____
Date of Birth : _____ Nationality: _____
Profession : _____ Company: _____
D/L No. : _____ Emirates of Issuance: _____ Issue Date: _____

2. MOTOR VEHICLE DETAILS (SUBJECT MATTER OF INSURANCE):

Make	Year	Value	Plate No.	Emirates of Reg.	Seating Capacity
		Dhs.			
Engine No.	Chassis No.	Convertible	Type of Body		
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Saloon	<input type="checkbox"/> Others	<input type="checkbox"/> Station

•Bank or Finance Co. Interest (Please State Name & Address):

Name : _____ Address : _____

3 COVERAGE DETAILS:

- **Type of Cover Required** : Against Loss, Damage & Third Party Liability
 Against Third Party Liability
- **Repair Condition** : Dealer AMAN's designated Workshop
- **Personal Accident Cover Required For** : Driver Passanger
- **Is Off- Road cover required?** Yes No
- **Is AAA cover for replacement vehicles required?** Yes No
 5 Days 10 Days 15 Days
- **Vehicle Surveyed by ?** AMAN's surveyor Other Surveyor
- **Period of Insurance** : **From:** _____ **To:** _____

4. MODE OF PAYMENT

Cash Credit Card

Signature of Applicant

Important Notice:

- This proposal is the basis of the insurance contract and forming part of the Policy, ONCE ACCEPTED, any misrepresentation or misleading information will prejudice the rights of the Insured.
- 10% additional deductible will apply for drivers below age of 25.

Reserved for AMAN's use

Policy No. : _____ Date & Time : _____

Rate : @
Premium : Dhs. /-
Deductible : Dhs. /- each and every claim Approval :

DECLARATION – PLEASE READ CAREFULLY

I hereby declare that to the best of my knowledge and belief the above statements and particulars are true and correct and that I have withheld no information material to this Proposal whether the subject of a Proposal Form question or not. I understand that failure to disclose all facts known to me which would be considered by the Insurer as likely to influence the acceptance and assessment of the Proposal could render the subsequent Policy inoperative. (NOTE - Where there is any doubt whether facts would be considered material those facts should be disclosed). I agree that this Proposal and Declaration shall form the basis of the contract between me and the Insurer. I undertake that the Vehicle or Vehicles to be insured shall not be driven by any person whom to my knowledge has been refused any Motor Vehicle Insurance or continuance thereof.

Proposer signature