

Enterprise Third Party Indemnity Proposal Form (Liability to General Public)

Unless specially mentioned, policies do not cover injury or damage caused by hoists, cranes. Separate policies must be effected if it is desired to cover liability in respect to cycles by the proposers, horse-drawn or mechanically propelled vehicles, passenger lifts and boilers.

Insured's Details

1. Proposer's Name (In Full).....
2. Address.....Phone no.....
3. Business/ Trade (Full description).....

Offices, Shops, Warehouses and Industrial Risks

Please State:

1. Number and description of Goods, Lifts, Hoists or Cranes.....
 - a. Are they insured under separate policies? Yes ☐ No ☐
 - b. If not, do you require Third Party Cover under this Insurance? Yes ☐ No ☐
 - c. By whom are they inspected?.....
2. Are any of the cranes or hoists in the public thoroughfare? Yes ☐ No ☐
If yes, give particulars.....
3. Particulars of Trap doors, Cellar flaps or other openings in floor or pavements.....

Restaurants and Clubs

4. State seating capacity in restaurant.....
5. State nature of club..... Number of Members.....

Theaters, Concerts, Public halls and all places of Amusement

6. State the capacity of Theatre, Hall, etc. (In number of persons).....
7. Are refreshments served? Yes ☐ No ☐
If so, is the service under your own management? Yes ☐ No ☐
8. What side shows or other entertainments are provided?.....

Schools

9. Give description ?(Day, Boarding, Private, etc.).....and number of Pupils.....

General Information (Applicable to all the above)

10. Indemnity for any one accident GH¢.....

Note - In view of the increase in cost of Third Party Claims, a substantial indemnity is desirable

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11. Food poisoning - do you desire the risk of ptomaine poisoning to be included? ☐ Yes ☐ No
12. What machinery have you with which persons not in your service can come into contact, and what is the motive power?
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13. Do you use or store any explosives, chemical, chemical gases or radioactive substances? Yes ☐ No ☐
14. Do you employ sub-contractors ? Yes ☐ No ☐
- If you wish for the policy to be extended to indemnify you for your liability, please state estimated annual contract prices of sub-contracts.....
15. Have any claims been made upon you by persons not in your employment? Yes ☐ No ☐
- If yes, give particulars.....
.....
16. Are you at present Insured, or have you ever proposed for an insurance in respect of this risk? Yes ☐ No ☐
- If yes, give name of the Company.....
17. Has any such proposal been (a.) Declined (b.) Withdrawn
18. Has any Company or Underwriter at any time
- a. Refused to renew Yes ☐ No ☐
- b. Cancelled your policy Yes ☐ No ☐
- c. Required and increased premium at renewal Yes ☐ No ☐
19. Do you have any other Policy with the Company? Yes ☐ No ☐
- If yes, give details.....
20. Address of the Premises to which the Policy is to apply.....
21. Do you undertake work elsewhere than on your premises? Yes ☐ No ☐
- If yes, state fully its nature and whether you require cover under the Policy for such work.....
.....
22. State (a.) Estimated annual amount of wages and salaries paid to employees and number of employees
(excluding clerical staff). GH¢..... No. of employees.....
(b.) Estimated annual earnings of any Principal Director or Partner who will engage in manual labour?
GH¢..... No. of Directors/ Partners.....

DECLARATION

I warrant that the above statements and particulars are true and I hereby agree that this Declaration shall be held to be promissory and of continuing effect and shall form the basis of and be deemed to be incorporated in the Contract between me and the ENTERPRISE INSURANCE and I am willing to accept a policy subject to the Terms prescribed by the Company herein, and to pay the Premium thereon.

Date.....

Signature.....

Agency.....

Code number.....



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Contact Details

Head Office

Advantage Place,
7th Avenue Mayor Road, Accra, Ghana
Telephone: 0302634777
Info.insurance@enterprisegroup.net.gh
www.enterprisegroup.net.gh

Branches:

Enterprise Market, Advantage Place.

Ridge West, Accra
Tel: 0302634777 EXT. 1060

Enterprise Market, High Street.

No. 11 High Street
Tel: 0302634777

Airport Office

No. 47 Patrice Lumumba Street
Airport Residential Area, Accra
0302634738

Tema Office

Lodestar Heights,
in front of Melcom Plus Community 1, Tema
0302634747

Odorkor Office

1st Floor, Obrapa House
Kaneshie-Mallam Motorway, Accra
0302634742

Takoradi Office

Room 316, 2nd Floor, SSNIT House
Plot 39, Accra Road
0302634752

Tamale Office

Hospital Road
0302634752

Achimota Office

Sonnidom House 365
Achimota-Nsawam Rd
Mile Seven-Achimota
0302634739

Kumasi Office (Mbrom)

Former Internal Revenue Building
Opposite Shell Filling Station, Mbrom
0302634750

Kumasi Office (Ahodwo)

Opposite Ahodwo Melcom Building
0302634749

Spintex Office

1st Floor, Takyi Plaza
Plot no. 40, Accra (Near Papaye Fast Food)
0302634741

Weija Office

Genesis Mall, Adjacent SilverBird 3D Cinema
House no. 8, MILE 81/210, Winneba Road, Weija
0302634744

Lapaz Office

Ground Floor
House no. 104/23
Abeashie Street, Nyamekye, Lapaz, Accra
0302634746

Trade Fair Office

1st Floor, Number 37
Trade Fair Road, La, Accra.
0302634744

South Industrial Office

1st Floor opposite, Barclays building near
St. Theresa's school, North Kaneshie, Accra
0302634745

