

Your Advantage

# **Enterprise Home Protection Policy**

| Personal Details  |
|---|
| 1. Name of Proposer (Mr/Ms/Mrs/Dr/Prof)   |
| 2. Postal Address   |
| 3. Business/ Occupation   |
| 4. Tel./ FaxEmail   |
| 5. Address of property to be Insured  |
|   |
| General Information   |
| 6. Is your home a Flat  |
| 7. If your home is a house, is it Detached Semi-Detached  |
| 8. Details of Construction  |
| a. Building(s)  |
| i. Wallsii. Roof  |
| b. Fence  |
| 9. Have you or any member of your household permanently living with you ever been refused insurance or had any              |
| special terms or conditions imposed by any insurance company? Yes No  |
| 10. Have any property or possessions been stolen, lost or damaged in the last three years, whether insured or not?  Yes No  |
| (IF YOU ANSWERED YES TO QUESTIONS 12 AND 13, PLEASE PROVIDE DETAILS ON A SEPARATE SHEET AND ATTACH IT TO THE PROPOSAL FORM) |

# **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



Agency.....

# **Enterprise Home Protection Policy**

|                    | ltem  | Do you wish to Insure? | Sum Insured             | Premium            |
|--------------------|---|------------------------|-------------------------|--------------------|
| Section 1          | Building - (The sum insured must represent the full cost of rebuilding and make allowance for the costs of shoring up, debris removal, architect's and surveyor's fees) | Yes No                 |                         |                    |
| Fence              |   |                        |                         |                    |
|                    | Alternative Accommodation and Rent  | Yes                    |                         |                    |
|                    |   | No                     |                         |                    |
|                    | Your Legal Liability as Proirity owner  |                        | ¢ 500                   | FREE               |
| Section 2          | Content - Please note that we shall not<br>pay more than GHS 2,000.00 for any<br>single item unless specifically listed   | Yes                    | ¢ 10,000.00             | ¢ 80.00            |
|                    | and specific value indicated  | No                     |                         |                    |
| Section 3          | Personal Liability  |                        | ¢ 500                   | FREE               |
| Section 4          | Employer's Liability Number of indoor servants Number of outdoor servants Drivers   | Yes No                 | Unlimited               | ¢ 5.00<br>per head |
| Section 4          | Personal Accident to Insured a. Death b. Permanent Disability c. Medical expenses (per annum)   |                        | ¢ 500<br>¢ 500<br>¢ 500 | FREE               |
|                    |   |                        | Total Premium           |                    |
| ontinuing effect a | statements and particulars are true and I hereby<br>and shall form the basis of and be deemed to be<br>and I am willing to accept a policy subject to the               | incorporated in the    | Contract between        | me and the         |
|                    |   | Signature              |                         |                    |
|                    |   |                        |                         |                    |