



رؤية جديدة / للتأمين
redefining / insurance

Car Insurance Proposal Form

INSURANCE IS THE SUBJECT MATTER OF SOLICITATION

AXA Insurance (Gulf)'s liability does not commence until the Proposal has been accepted and the Premium has been paid. AXA Insurance (Gulf) reserves the right to ask for special terms or decline the Proposal. Please refer to the Policy Handbook for full terms, conditions & exclusions. A specimen copy of this Policy is available on request.

Please complete this form using block CAPITALS and by ticking the relevant boxes

1 APPLICANT'S DETAILS

Name as per ID Card	<input type="checkbox"/> Mr.	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss
First Name:	Second Name:		
Third Name:	Last Name/Tribe:		
Occupation:	Nationality:		
Date of Birth: DD/MM/YYYY	ID No.:		
P.O.Box:	Postal Code:		
Area:	Home:		
Office:	Mobile:		
Fax:	Email:		

Please provide details of persons authorized to drive the vehicle.

Name	Sex	Date of Birth	Relationship	ID No.

Clarification: The Insurer has no right to refuse settlement of any claim on the grounds that the driver is not listed among those authorized to drive the vehicle. The Excess specified in the Policy Schedule shall apply.

2 APPLICANT'S CLAIM(S) DETAILS

Do you have any claim(s) unsettled with any Insurer? Yes No

If the answer is yes, please state the claim and its date. Which type?

3 DETAILS OF PREVIOUS INSURERS

Have you ever had any insurance policy/quote declined or cancelled, renewal refused, special conditions imposed or a claim rejected by any insurance company? If the answer is yes, please provide details.	<input type="checkbox"/> Yes <input type="checkbox"/> No

4 VEHICLE INFORMATION

Registration No.:	Make:		
Model:	Chassis No.:		
Engine CC/HP:	Seats 1+:		
Year of Mfg.:	Engine No.:		
Model Year:	Colour:		
Insured Value: OMR	Mortgaged to: Bank/Finance Company:		
Type:	<input type="checkbox"/> Passenger/Saloon	<input type="checkbox"/> 4 Wheel Drive	<input type="checkbox"/> Motor Cycle
<input type="checkbox"/> Small Truck	<input type="checkbox"/> Large Truck	<input type="checkbox"/> Transportation/Bus	<input type="checkbox"/> Trailer
<input type="checkbox"/> Fuel Tanker	<input type="checkbox"/> Water Tanker	<input type="checkbox"/> Others	
Usage:	<input type="checkbox"/> Private	<input type="checkbox"/> Commercial	<input type="checkbox"/> Taxi
	<input type="checkbox"/> Driving School	<input type="checkbox"/> Others	
Period of Insurance:	From: DD/MM/YYYY	To: DD/MM/YYYY	

5 EXCESS: THE INSURED PAYS THE FOLLOWING AMOUNT

1.	If the driver is one of the persons authorized to drive the vehicle in the list stated in this proposal form, and his age is 25 years old or more	OMR
2.	If the driver is one of the persons authorized to drive the vehicle in the list stated in this proposal form, and his age is less than 25 years	OMR
3.	If the driver is not one of the persons indicated in this proposal form, and his age is 25 years old or more	OMR
4.	If the driver is not one of the persons indicated in this proposal form, and his age is less than 25 years old	OMR

Signature of the Insured:	Date:
Signature of the Insurer:	Date:

6 COVERS & OPTIONS AVAILABLE

Sr. No	Covers	Motor Executive	Motor Perfect	Motor Select	Unified Motor Insurance Policy (Comprehensive)	Compulsory Insurance (Third Party Liability) + Fire, Theft, Burglary & MD	Compulsory Insurance (Third Party Liability only)	Premium (OMR)	Signature
Write Yes to select the appropriate cover									
1	Insurance against loss and damage	√	√	√	√	Fire, Theft, Burglary & Malicious Damage only	X		
2	Compulsory Insurance – Liability to third party	√	√	√	√	√	√		
3	First aid expenses	√	√	√	√	√	√		
4	Natural Calamities (STF)	√	√	√	√				
5	Personal Accident	√	√	√	√				
6	Riot, strikes, civil commotion	√	√	X	X	X	X		
7	Family members as third party	√	√	X	X	X	X		
8	Loading and unloading	√	√	X	X	X	X		
9	Replacement locks	√	√	X	X	X	X		
10	Motor trade and valet parking	√	√	X	X	X	X		

11	New for old in first year (Total Loss)	√ (up to 12 months)	√ (up to 6 months)	X	X	X	X		
12	No Depreciation on spare parts (Partial Loss)	√ (up to 5 years)	√ (up to 2 years)		√ (First year of brand new vehicle)	X	X		
13	Personal belongings	√	√	X	X	X	X		
14	No-claim discount	√	√	√	√	√	√		
15	Windscreen damage excess waiver	√	√		X	X	X		
16	Replacement of Windscreen at Agency only	√		X		X	X		
17	UAE Cover	√	√						
18	Vehicle towing service without limit for distance	√	√	X					
19	Protected no-claim discount	√		X	X	X	X		
20	Agency repairs (after first year)	√ (up to 5 years)	√ (up to 2 years)			X	X		
21	GCC Cover	√		X		X	X		
22	Cover for damage to Insured's property outside the vehicle	√		X					
23	Accident and breakdown recovery	√							
24	Alternative vehicle during the repair period						X		
25	Cash compensation of OMR _____ per day for vehicle stoppage			X			X		
26	Automatic renewal if there is no claim			X					
27	Without payment of Excess			X					
Total Premium in RO (including tax@1.60%)									
√ Covered		X Not Covered			Write yes if option needed and initial/sign				

Note: Motor Executive Policy is by invitation only for existing customers who have no losses during last 3 years or for new customers who can provide written confirmation from their current insurers that they had no losses during the preceding 3 years.

7 DECLARATION (PLEASE READ CAREFULLY)

I hereby declare to the best of my knowledge and belief that the above statements and particulars are true and correct and that I have not withheld any information material to this proposal. I agree that this proposal and declaration shall form the basis of the contract between AXA Gulf and me. AXA liability does not commence until this proposal has been accepted. We reserve the right to impose special terms or decline this proposal. Please refer to the Policy booklet for full terms, conditions, limits, sum insured & exclusions. A specimen copy of the policy is available on request.

Signature of the Insured:	Date:	DD/MM/YYYY
Signature of the Insurer:	Date:	DD/MM/YYYY

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A Foreign branch of AXA Insurance (Gulf) BSC(c), a company incorporated in the Kingdom of Bahrain and registered with the Ministry of Commerce and Industry of the Sultanate of Oman under Commercial Registration No. 1112244 and holding Insurance registration No. 6 issued by the Capital Markets Authority

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