



# INSURANCE MANAGEMENT (BAHAMAS) LIMITED

## INSURANCE BROKERS AND AGENTS

### NEW PROVIDENCE

PO Box SS-6283  
Rosetta Street East,  
Palmdale, Nassau  
Tel: (242) 394-5555  
Fax: (242) 323-6520

Email: info.nassau@imbbah.com

### GRAND BAHAMA

PO Box F-42541,  
1 Pioneers Way,  
Freeport  
Tel: (242) 350-3500  
Fax: (242) 350-3510

Email: info.freeport@imbbah.com

### ABACO

PO Box AB-20666  
Queen Elizabeth Drive,  
Marsh Harbour  
Tel: (242) 367-4204  
Fax: (242) 367-4206

Email: info.abaco@imbbah.com

### ELEUTHERA

PO Box EL-25190  
Queen's Highway,  
Governor's Harbour  
Tel: (242) 332-2862  
Fax: (242) 332-2863

Email: info.eleuthera@imbbah.com

### EXUMA

Queen's Highway,  
George Town  
Tel: (242) 336-2304  
Fax: (242) 336-2305

info.exuma@imbbah.com

# COMMERCIAL THEFT INSURANCE PROPOSAL FORM

Unless all material facts are disclosed, this insurance could be invalidated. Material Facts are those facts an Insurer would regard as likely to influence the acceptance and/or assessment of the Proposal. If you are in any doubt about whether facts are material, you should disclose them. A copy of the completed Proposal Form will be supplied on request but you should keep a record (including copies of letters) of all information supplied to us for the purposes of entering into this contract. A specimen Policy is available on request.

This Policy is Subject to Average which means you may not receive the full amount of any claim that is payable in the event of under-insurance. This is explained in more detail in a separate notice issued with this Proposal Form.

Day    Month    Year	Day    Month    Year
Commencement Date of Insurance: <input type="text"/> <input type="text"/> <input type="text"/>	Expiry Date of Insurance: <input type="text"/> <input type="text"/> <input type="text"/>
(Which cannot be before the acceptance of the Proposal by the Insurers)	

Proposers Name: \_\_\_\_\_

Business: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Address of premises  
containing property to be insured \_\_\_\_\_

Telephone: \_\_\_\_\_ (Business) \_\_\_\_\_ (Facsimile) \_\_\_\_\_ (Cell)

E-mail: \_\_\_\_\_

<b>Full description of property to be insured</b>	<b>Sum to be Insured</b>
<p>Unless otherwise arranged the sum to be insured under A and B must represent the value of the property as claims are settled in the proportion that the sum insured bears to the full value at the time of the loss.</p> <p>A. Stock in trade belonging to the Proposer consisting of</p>	
<p>Maximum value of any single article \$</p>	
<p>B. Goods in trust or on commission for which the Proposer is responsible consisting of</p>	
<p>Maximum value of any single article \$</p>	
<p>C. Business furniture, fittings, plant and appliances belonging to the Proposer or for which the Proposer is responsible.</p>	

