



## HOUSEHOLD INSURANCE PROPOSAL / SCHEDULE

<b>Insurer :</b>		<b>Kuwait Qatar Insurance Company (KSCC)</b> (hereinafter referred to as Company)				
<b>Insured :</b>		<b>Name:</b>				
<b>Phone:</b> .....	<b>Address:</b>	Flat No.: ....., Building/Villa No: ....., Area: .....,				
<b>Fax:</b> .....		P.O.Box: ....., City: ....., State of Kuwait				
<b>E-mail:</b> .....						
<b>Period of Insurance:</b>	<b>From:</b>	<b>To:</b>			} both dates inclusive	
		<b>Option/Limits:</b>	<b>Premium:</b>	<b>Select an Option</b>	<b>Sums to be Insured</b>	
<b>2) Contents Sum Insured</b>		KD 4,000/- KD 6,000/- KD 8,000/-	KD 40/- KD 50/- KD 60/-	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>3) Additional Expense of Alternative Accommodation</b>		20% of the Total Sum Insured on Contents – FREE				
<b>4) Accidental Damage to Contents of the Insured (Optional)</b>				<input type="checkbox"/>		
<b>5) Compensation for Death/permanent Disabling (Optional) Section V</b>				<input type="checkbox"/>		
<b>a). Insured and/or Children of the Insured</b>	KD 2,000/- Free for Insured	KD 4,000/- Premium KD 8/-	<input type="checkbox"/>	KD 8,000/- Premium KD 12/-	<input type="checkbox"/>	
<b>b). Spouse of the Insured</b>	KD 2,000/- <input type="checkbox"/> Premium KD 4/-	KD 4,000/- <input type="checkbox"/> Premium KD 8/-	<input type="checkbox"/>	KD 8,000/- Premium KD 12/-	<input type="checkbox"/>	
<b>c). Domestic Servant/Driver</b>	<b>As per Continental Scale attached</b>	KD 4,000/- <input type="checkbox"/> Premium KD 16/-	<input type="checkbox"/>	KD 8,000/- Premium KD 20/-	<input type="checkbox"/>	
<b>6) Loss of or Damage to Servant/Driver Property</b>		Eligible for 15% of the total Sum Insured on Contents				
<b>7) Visitor's Personal Effects</b>		KD 195/- in total for loss or damage to your visitor's personal belongings - FREE				
<b>8) Liability to Public/Landlord</b>		KD 15,000/- in respect of any one claim or series of claims arising out of one event – FREE  KD 25,000/- in respect of any one claim or series of claims arising out of one event – KD 6/- <input type="checkbox"/>  KD 50,000/- in respect of any one claim or series of claims arising out of one event – KD 21/- <input type="checkbox"/>				
<b>TOTAL SUM INSURED</b>						
<b>General</b>					<b>Yes</b>	<b>No</b>
(i)	Has your residence been affected by storm or flood during the past 5 years?				<input type="checkbox"/>	<input type="checkbox"/>
(ii)	Do you have any other policy in force in respect of your contents?				<input type="checkbox"/>	<input type="checkbox"/>
(iii)	In the last 6 months have you sustained any loss or damage?				<input type="checkbox"/>	<input type="checkbox"/>

I/We declare that the foregoing statements and particulars are true and complete and that this Schedule shall form the basis of the contract with Kuwait Qatar Insurance Company. I/We agree to accept insurance subject to the terms and conditions of the Homecare Household Insurance policy document issued by the Company attached herewith. I/We note that the insurance will not be in force until the Schedule has been accepted by the Company and confirmation of such received by me/us in writing along with Endorsements if any.

Signed for & on behalf of  
Kuwait Qatar Insurance Company

Authorised Signatory/Bank/Agent  
As per Attached Terms and Conditions.

**Date of Issue:**

Date of Proposal and Declaration  
Signature of the Insured

[retail@gickwt.com](mailto:retail@gickwt.com) & [Sabah.bkairat@gickwt.com](mailto:Sabah.bkairat@gickwt.com)  
**Telephone: 22960 157 & 22960 160**