



# TAKAFUL PAKISTAN LIMITED

Business Centre, 6th Floor, Plot NO. 19-1-A, Block-6, P.E.C.H.S., Shahrah-e-Faisal,  
Karachi-75400. UAN: (+92 21) 111 875 111; Fax: (+92 21) 34373195

## ALL RISK CONTENTS TAKAFUL QUESTIONNAIRE AND PROPOSAL FORM

(Please use a separate sheet wherever necessary)

Name of the Proposer:	
Occupation:	
Please state Location, Construction and Occupation of the Premises containing the Property.	
Are you the sole occupier of the premises? If not, please state how many else are occupying?	
Did you have any previous Takaful/ insurance Policy? If so, with whom and when?	
Have you ever suffered a loss under All Risk Contents Policy? If yes, please state the date and circumstances.	
Is the property in good condition and subject to regular maintenance program?	
If your proposal being declined, renewal being refused or the Takaful/insurance Policy being terminated or an increased premium/contribution being required or special condition(s) been imposed?	
Value of the Contents? (Please give details on the reverse)	
Desired period of coverage: From: <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> To: <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	
Is there a watchman or caretaker on the premises?	
List of Articles covered at: (Location)	

## LIST OF ITEMS TO BE COVERED

Sr. No.	Item No.	Description	Make / Model	No. of Articles	Value to be Covered (Rs.)
<b>Total</b>					

## DECLARATION

- I/We hereby confirm that the details contained in this proposal form are true and correct to the best of my/our knowledge and belief and I/We have not concealed, misrepresented or misstated any material fact. I/We further undertake to inform the company of any material alterations to these facts occurring during the currency of this Policy.
- I/We agree that the statements and declaration contained in this proposal form shall be the basis of my/our beneficiary status in the Takaful Fund and deemed to be incorporated in the Policy
- I/We hereby undertake to contribute the agreed amount to the Takaful Fund maintained and operated by the Company.
- I/We understand that as per the rules of Takaful Fund, by doing so I shall stand entitled to the membership of the Takaful Fund and being one of its beneficiaries subject to the rules and regulations of the Fund.
- As a prospective beneficiary of the Fund, I/We offer my/our property, as specifically described in the attached schedule, for the indemnity cover provided by the Fund to its beneficiaries.
- I/We hereby request to be issued with a confirmation to acknowledge my membership and my consequential rights as a beneficiary of the Fund.

Signed at: \_\_\_\_\_

Signature of the Proposer \_\_\_\_\_

Dated:- 

D	D	M	M	Y	Y	Y	Y
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