

Address: 1st floor, Imperial Court, Dr. Ziauddin Ahmed Road, Karachi-75530

| Phone : 92-21-35640715 |
| Court, Fax : 92-21-35640714 |
| Karachi-75530 | E-mail: info@sindhinsuranceltd.com |
| Web : http://www.sindhinsuranceltd.com |
| MOTOR VEHICLE INSURANCE PROPOSAL FORM |

C.N.I.C. NO OF THE USER							
ADDRESS:							
TEL NO. (OFF/MOB):			(RES)			(FAX)	
Would you like to be on our SM			] No			,	
BUSINESS OR PROFESSION:							
REFERENCE THROUGH:							
VEHICLE TYPE:		PRIVATE CAR		MOTOR C		☐ COMMER	
COVERAGE REQUIRED		COMPREHENSI			TY	☐ ACT ONL	Y
	PAI	RTICULARS OI	THE VE	HICLE			
REGISTRATION NO:					C.C.:		
MAKE:		MODEL:				COLOUR:	
ENGINE NO				CHASSIS N	O		
MILEAGE:				VALUE TO	BE COV	ERED Rs	
PERIOD OF INSURANCE FR	ROM	то _					
PARKING CONDITIONS		GARAGE		WITHIN CO	MPOUN	D 🗆 OPEN	SPACE
	ACCESS	ORIES FITTE	D IN THI	E VEHIC	LE		
ACCESSORIES		TICK ( )		IF OTHER		ACTORY FIT	
ACCESSORIES	FITTED	OTHERS		MAKE		MODEL	VALUE (F
RADIO/CASSETTE PLAYER							
CD/ DVD PLAYER							
AIR CONDITIONER							
C.N.G. KIT							
ALLOY RIMS							
ANY OTHER ITEMS  ATTACHED COPIES OF: ( ) Registration Book/Transfe ( ) C.N.I.C. of the Participant ( ) Last Renewal Notice (if et	ntitled to NCD)	e-II-d misk maki d	,				
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The liability of the Company does not commence until the Proposal has been accepted and the priumim paid. Only official receipt issued from the Company on printed form is binding on the Company.