



NITOL INSURANCE COMPANY LIMITED

HEAD OFFICE: POLICE PLAZA CONCORD, TOWER-2 (6th FLOOR), ROAD # 144, PLOT # 02, GULSHAN-1, DHAKA-1212, BANGLADESH TEL: +88 02 55045202-05, +88 02 55045210, FAX: +88 02 55045206, EMAIL: info@nitolinsurance.com, WEB: www.nitolinsurance.com, **CALL CENTER: 09643 214 070**

PROPOSAL FORM FOR LIVESTOCK INSURANCE

Policy No.....

1. Details of the Proposer	Farm Name							
	Proprietor Name							
	Occupation							
	Office Address							
	Contact Person							
	Contact No.							
	NID No.							
	Location of Farm							
	Owner of the Premises							
	Construction of the Premises							
2. Name & Address of the Aggregator								
3. Name & Address of the Bankers/Lenders								
4. Scope of Cover								
5. Period of Insurance		From:		To:				
6. Total Sum Insured								
7. Details of Livestock		Please reply fully to all the following questions.						
Livestock Number	Species & Breed	Age	Sex	Colour	Weight(kg)	Identification Number	Other distinguished marks	Agreed Value (Each Livestock)
Total:								

(Kindly provide complete information and attach a separate sheet if required)

DECLARATION

I/we hereby declare that the above information is correct and I/we agree that this proposal shall be the basis of contract between me/us and the **NITOL INSURANCE COMPANY LIMITED**.

Seal & Signature of the Proposer

Date: