



# NIGERIAN AGRICULTURAL INSURANCE CORPORATION

Head Office: Plot 590, Zone A0, Central Area  
P.O. Box 3754, Garki, Abuja

[www.naic.gov.ng](http://www.naic.gov.ng)

Email: info@naic.gov.ng



## PROPOSAL FORM FOR FISHERY/FISHFARM/HATCHERY INSURANCE

Broker/Agent "An Agent who assists an Applicant to complete an application or proposal for Insurance shall be deemed to have done so as the Agent of the applicant" Date:.....

- 1(a) Name of Proposer:.....  
(Surname first)
- (b) Residential address:..... Permanent
- (c) residential address..... Postal
- (d) address..... (e) Telephone
- Number..... email address.....
- (f) Business/Occupation:.....
- (g) Nationality..... Sex..... Marital Status.....
- (h) Form of identification (tick): International Passport National ID Card Driver's License Others (specify)
- (i) Permanent/Temporary Residence Permit Number (for non-Nigerians):.....

2 Farm location (in Km nearest to the village or town):	3 District/Community	4 Local Government Area:
5 State:	6 Land Area of the: farm in square meter	7 Total No. of ponds on the farm
8 Dimension of ponds (length x breath x depth)	9 Type/Name of species reared and number stocked	10 Type of pond: Earthen <input type="checkbox"/> Concrete <input type="checkbox"/> Recyclatory <input type="checkbox"/> Flowthrough <input type="checkbox"/> Plastic <input type="checkbox"/> Others (specify)
11 Source and name of feed (Specify) .....	12 Type of production: fingerling <input type="checkbox"/> Adult marketable <input type="checkbox"/>  Breeders <input type="checkbox"/>	13 Present value of the Pond(s) excluding fishes
14 Average market weight per fish (in kg)	15 Period of Cover From:.....20.... to .....20....	

- 16 (a) Date of stocking:.....
- (b) Source of fish fingerlings/broodstocks.....
- (c) Cost per fingerling at purchase:.....
- (d) Age at stocking:.....
- (e) Other input cost per fish up to market size:.....
- 17 **Details of Risk Management**
- (a) **How do you intend to handle the following?**
  - (i) Poor water quality:.....
  - (ii) Off – flavor:.....
  - (iii) Pesticides contamination:.....
  - (iv) Poachers and vandals:.....
  - (v) Diseases:.....
  - (vi) Oil Pollution:.....
- (b) Is enough water available to fill the pond and replace water losses through the year?
- (c) Has the farm suffered losses from the following? Yes / No: If yes, state the extent of the loss.
  - (i) Disease:.....
  - (ii) Poisoning:.....
  - (iii) Water pollution:.....
  - (iv) Poor water quality:.....
  - (v) Other causes (specify):.....
- (d) State equipment you intend to use to measure the following;
  - (i) Water PH .....
  - (ii) Dissolved Oxygen .....

- (iii) Total Ammonia to Nitrogen.....
- (iv) Water Temperature.....

**18 Loss/Insurance History**

- (a) When was the farm established?.....
- (b) Do you consult any fishery personnel for inspection regularly? .....
- (c) Is the farm (or any part of it) insured at present Yes / No .....
- (d) If yes with which insurance company and to what extent?.....
- .....
- (e) Has any insurance company ever declined your offer to insure Yes / No. ....
- (f) If yes which company and give details:.....

**19.For Hatchery Insurance Cover**

- (a)What is the number of Broodstocks in the hatchery (If applicable) .....
- (b) What is the number of Eggs produced per kg of broodstock? .....
- (c) What is the percentage hatchability ? .....

**20. Do you require Farmers' personal accident death benefit extension? Yes.....No.....**

- a) If yes, what is the value of the loan? ₦..... ii) What is the loan tenor?.....

**21 Do you require insurance cover for the farm structures, machinery and equipment ?**

If yes, complete the attached proposal form.

**DECLARATION**

***I/We hereby warranted and declare the true of all the foregoing statement and that I/We have not withheld any material information. I/We further agree that this declaration shall be basis of the contract between me/us and the Corporation named overleaf and to accept a policy subject to the terms, exceptions and conditions prescribed by the Corporation.***

**Date:..... Signature of proposer:.....**

**NOTES:**

**1. PERIOD OF COVER**

**A) Categories of Fishes**

- Friers to Juveniles - 6 weeks
- Fingerlings to Table size - 6 months
- Breeders - 1 year renewable annually

**B) Ponds and other Investment**  
1 year renewable annually

**2. MINIMUM LOSS TO ATTRACT CLAIM:**

In order to qualify for indemnity under this policy, the following minimum loss must have been incurred:

- Fingerlings/Juvenile production - - NIL -
- Fingerlings to marketable size - Above 20% of total stock
- Breeders - Above 10% of total stock

**FOR OFFICIAL USE ONLY**

REMARKS AND OTHER OBSERVATIONS AND CONDITIONS

**Signed:\_\_\_\_\_**

**Fishery Specialist**

\_\_\_\_\_

**Approving Authority**  
**Branch Manager or Zonal Manager**

**Date :.....**