



NIGERIAN AGRICULTURAL INSURANCE CORPORATION

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

Email: info@naic.gov.ng

PASSPORT
PHOTOGRAPH

Proposal Form for Small Domestic Animals (Rabbit/Grasscutter/Guinea pig etc.) INSURANCE

“An agent who assists an applicant to complete a proposal for insurance shall be deemed to have done so as an agent of the applicant”

BROKER/AGENT:.....

1. Name and address of Proposer		2. Location of farm	3. District/Community	4. Farm Land Area 9. Age at maturity for the species
5. L.G.A.	6. State	7. Type of animal /class	8. Total No. of Animals on the farm	
10. Purpose of animal Breeding Meat Laboratory Others.....		11. Source of Feed Outside source..... Farm source..... Stream Others	12. Source of water Tap..... Well/Borehole	13 What is the History of Losses in the past 5 years?
14 Type of Pen Construction Cements bricks..... Wooden..... Iron cages..... Others (specify)		15. Average weight per Animal at maturity.		16. Period of Cover: From.....to.....

15. Estimated Cost of Production:

- a) Cost of Foundation stock
- b) Feeds
- c) Medication (if any)
- d) Labour (attendant(s))
- e) Utilities and miscellaneous cost
- f) Interest on loan (if any)

Amount (₦)

TOTAL INPUT = _____

16. Finance/Funding

- a) Self
- b) Loan (State source

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 terms, exceptions and conditions prescribed by the Corporation. Furthermore I/we shall undertake to abide by the recommended rearing technology for the insured Small Domestic Animals agree that any false statement or misrepresentation made by me/us in this proposal shall be a ground for non-payment of my/our claim.

Date:

Signature of Proposer:.....

No Insurance is in force until the proposal has been accepted by the Corporation and premium fully paid

Provide a sketch of farm illustrating:

- a) Landmarks such as boundaries, rivers, roads, etc
- b) Location of buildings and pens on the farm.

NOTES

Minimum stock for coverage: The cover is effective for the following stock levels:

Grasscutter - a minimum of 10
Others - a minimum of 50

Minimum loss to attract claim: in order to qualify for payment of claim under this policy, the following minimum Loss must have been incurred:

Grasscutter - above 10% of total stock
Others - above 10% of total stock

Excess Clause: In the event of any loss for which the Corporation is liable the insured shall be responsible for 10% of each and every claim.

No Claim Discount: Premium on renewal is to be reduced by 5% after a claim free year

OFFICIAL USE ONLY

(REMARKS ON OTHER OBSERVATIONS AND CONDITIONS)

NOTES:

Period of cover – 12 months

Excess Clause: In the event of any loss for which the insurer is liable, the insured shall be responsible for 10% of each and every claim.

I also recommend the acceptance of this proposal

NAME:..... SIGNATURE:.....

DESIGNATION:..... DATE:.....

OFFICE:.....