



**NICO Life Insurance Company Limited**

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Blantyre, Malawi  
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**SAVINGS PROTECTION ASSURANCE PROPOSAL FORM**

**1. LIFE ASSURED**

SURNAME .....MAIDEN NAME.....

FORENAMES .....

TITLE (TICK) HON.  PROF.  DR  REV.  MR.  MISS.  MRS.

MARITAL STATUS (TICK) MARRIED  SINGLE  WIDOWED  DIVORCED  SEPARATED

DATE OF BIRTH .....PLACE OF BIRTH .....ANB .....

POSTAL ADDRESS.....

TEL NO (O) .....TEL NO (H).....CELL NO.....

E-MAIL ADDRESS .....

HOME ADDRESS.....

**2. PROPOSER (Complete only if other than life assured)**

SURNAME .....MAIDEN NAME .....

FORENAMES .....

TITLE (TICK) HON.  PROF.  DR.  REV.  MR.  MISS.  MRS.

MARITAL STATUS (TICK) MARRIED  SINGLE  WIDOWED  DIVORCED  SEPARATED

RELATIONSHIP TO LIFE ASSURED: MOTHER  FATHER  WIFE  HUSBAND  EMPLOYER

DATE OF BIRTH .....PLACE OF BIRTH .....ANB .....

POSTAL ADDRESS .....

TEL NO. (O) .....TEL NO (H).....CELL NO.....

E-MAIL ADDRESS .....

HOME ADDRESS.....

**3. DESCRIPTION OF ASSURANCE**

Sum Assured K.....Premium.....Policy Term.....

Mode of Payment (Tick) Monthly  Quarterly  Half Yearly  Yearly

(Monthly Payment should be made through Standing Order Only) ESO  BSO

TYPE OF STANDING ORDER.....

Premium Increase at every policy anniversary (Optional) 5%  10%  15%  20%  25%

**4. OCCUPATION AND ACTIVITIES OF LIFE ASSURED/PROPOSER**

Occupation .....

Employer .....

Full description of duties.....

**5. OTHER ASSURANCES**

5.1 Do you already have a life policy with this company or any other company?

5.2 Has a proposal for life assurance ever been declined, postponed or withdrawn, by any company?

5.3 Is any other proposal pending on your life?

5.4 Is this proposal to replace any other proposal to this Company?

5.5 If the answer to any of the questions is yes, please give full particulars below, including policy number dates and **NAMES OF COMPANIES**

QUESTION No.	PARTICULARS
.....	.....
.....	.....

**6. DECLARATION**

**6.1 I HEREBY DECLARE THAT THE STATEMENTS MADE IN THIS PROPOSAL AND IN ALL OTHER DOCUMENTS SUBMITTED TO NICO LIFE IN CONNECTION WITH IT, WHETHER IN MY HANDWRITING OR NOT, ARE TRUE, CORRECT AND COMPLETE AND FORM THE BASIS OF THE PROPOSED CONTRACT**

6.2. I agree that if a representative of the company or broker completes the proposal form or other documents submitted in connection there-with he/she does so as my agent and not an agent for the Company.

6.2 . I further agree that if anything contrary to the truth be stated or if any information which ought to be made known to the company with reference to the proposed assurance be withheld, or concealed, any policy which may be granted in pursuance of this Proposal shall be null and void.

**DATED at..... on .....**

.....  
*Signature of life assured*

.....  
*Signature of proposer*

.....  
*Signature of guardian (if proposer is under 18)*

**6.1 INTRODUCER'S REPORT**

Give below any special report on the assured and proposers' (e.g.) source of income.

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**Name of the introducer ..... Code..... Signature .....**