



SUN
insurance

Company Limited

PROPOSAL FOR FIDELITY GUARANTEE

(EMPLOYER'S FORM - ALL EMPLOYEES COVER)

"You are to disclose in this proposal form, fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be void."

1. Full Name of Proposer:

2. Address: Telephone:

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3. Trade or Business:

4. Period of Insurance Required: From: To:

5. Is this the only security to be held by you in respect of the employees named in the Schedule?	
6. Did you receive a satisfactory reference from the last employer of each of the employees named in the Schedule?	
7. Have any of your employees past or present, proved dishonest in the course of their duties?	
8. Have all accounts always been and are they now in order?	
9. Within what period have the employees to account for money received?	
10. State (a) the largest amount any employee is allowed to retain. (b) how often such amounts are accounted for and by whom checked? (c) how often a bank statement is sent to the management?	(a) (b) (by) (c)
11. (a) Will any of your employees named in the Schedule have any stock under their control? (b) If so, how often and by whom will stock be checked?	(a) (b) (by)
12. Are your employees authorised to sign cheques? If so, (a) Will they be countersigned and by whom? (b) If not countersigned, up to what limits may they be signed	(a) (by) (b)

13. Does one person act as both Cashier and Bookkeeper?	
14. Do your receipts for money received, have (a) counterfoils? (b) a printed serial number?	(a) (by) (b)
15. Do any of your employees named in the Schedule pay out wages or salaries? If so, (a) Who will check wage or salary sheets with staff records? (b) Who will compare salary or wages cheques with the Sheets?	(a) (b)
16. What are your usual terms of credit?	
17. How soon do you write DIRECT to customers regarding overdue accounts?	
18. How often and by whom is: (a) a cash audit made? (b) a full professional audit made?	(a) (by) (b) (by)
19. (a) What defaults have occurred during the last 5 years? (b) If so, please give full details stating (i) the amount (ii) how the defalcations were carried out and; (iii) what steps you have taken to prevent a recurrence?	(a) (i) (ii) (iii)
20. Has any insurer ever-: (a) declined your proposal? (b) refused to renew your policy? (c) required an increased premium or imposed special terms?	(a) (b) (b)

DECLARATION

I/We declare that the above answers are true to the best of my/our knowledge and belief and that I/We have disclosed all particulars affecting the assessment of the risk.

I/We agree that this proposal and declaration shall be the basis of the contract between me/us the company.

Date:

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(Signature of Proposer)