
Please provide claims Experience during the last 3 years. _____

Are safety measures in place at the work site e.g.

Are Machinery, plants and ways properly fenced and guarded and otherwise in good order and condition? Yes No

Is your Boiler and Machinery checked and certified annually by competent and qualified authorities? Yes No

Are acids, gases, chemicals or explosives used and to what extent? Yes No

Any other please specify _____

Please disclose any other material information pertaining to the risk referred herein

Insurance to commence on _____

For _____ months from _____ to _____

I/We, the person(s) signing here below who has proposed for insurance (or signing on behalf of the owner of the property) do hereby declare that the statements given are true and complete and I/We agree that this proposal and the statements given in this proposal shall be the basis of the proposed contract of insurance between the company and myself/ourselves and that if anything contrary to the truth be stated or if any information which ought to be made known to me/us with reference to the proposed insurance be withheld or concealed, any policy which may be granted in pursuance of this proposal shall be null and void.

Date of signature of this proposal form _____

Signature and stamp _____

Name and designation of the person signing this form _____

Note: No liability is accepted by the Company until the acceptance of this Proposal and the payment of the premium or the issue of a cover note by the Company.

*Disclaimer : this leaflet provides only summary information about the coverage. Full details of terms, coverage, conditions and exclusions are contained in the Policy available from any of our offices.



**OMAN UNITED
INSURANCE CO.**
S.A.O.G



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Workmen's Compensation Insuran

