

Asset Insurance Renewal Application

Applicant Details

Name of Insured:

Enter full name

Policy Number:

Existing Policy Number

Contact Number:

Phone number

Email:

Email address

Address:

Mailing address

Asset Details

Asset Description	Model/Serial Number	Current Value	Year of Purchase	Location
e.g. Office Laptop	Model/Serial	Value	YYYY	e.g. Head Office

Insurance Details

Type of Coverage:

e.g. Fire, Theft, All Risk

Sum Insured:

e.g. 100000

Renewal Period:

e.g. 1 Year

Previous Claims (if any):

Provide details or 'None'

Declarations

☐ I hereby declare that the information provided above is true and correct to the best of my knowledge.

Signature: Date:

Important Notes

- Ensure all information provided is accurate and up-to-date to avoid issues in claim processing.
- List all assets to be covered and update values as required for renewal.
- Disclose any previous claims or incidents related to the insured assets.
- Keep copies of all submitted documents and this application for your records.

- This application is subject to the insurer's evaluation and may require additional documentation.