

**VEHICLE DETAILS:**

Vehicle Make: \_\_\_\_\_ Year of Make: \_\_\_\_\_

Vehicle Model: \_\_\_\_\_

Chassis No: \_\_\_\_\_

Engine No: \_\_\_\_\_

Usage: \_\_\_\_\_ (Private/Commercial)

Vehicle Type: \_\_\_\_\_ (Saloon/Jeep/Coupe etc)

Please select an option:

PRODUCT	AUTO FLEXI BRONZE	AUTO FLEXI SILVER	AUTO FLEXI GOLD
Sum Insured:	N300,000	N500,000	N1,000,000
Accidental Damage/Fire:	N300,000	N500,000	N1,000,000
3rd Party Property Damage:	Up to N2,000,000	Up to N2,000,000	Up to N2,000,000
Other benefits:	See overleaf	See overleaf	See overleaf
Premium:	N15,000	N25,000	N40,000

**DECLARATION**

*I/We hereby declare that the above statements are complete and true, that this declaration and the proposal will form the basis of the contract between myself/ us and FBN General Insurance Limited.*

Signature of proposer/date

DDMMYYYY

Referred by: \_\_\_\_\_ Ref. Phone no: \_\_\_\_\_

Head Office: 298, Ikorodu Road, Lagos.  
Tel: +234 1 905 4810, +234 1 905 4444.  
Email: insuranceinfo@fbninsurance.com | Website: www.fbngeneralinsurance.com



**How To Make Claims**

- In case of accident, theft and fire, call our dedicated claim number 01-9054832 or send an email to insuranceinfo@fbninsurance.com
- Take pictures of the accident vehicle, get a Police report in the case of theft or fire claims.



**Sales Outlets Nationwide**

Hotline: 01-9054810, 01-9054832, 01-9054364-5, 01-9054444

Email: insuranceinfo@fbninsurance.com

Website: www.fbngeneralinsurance.com

FBN General FBN General Insurance  
 @FBNGeneral FBN General Insurance



**BOARD OF DIRECTORS:** Chairman: Olugbenga Shobo, MD/CEO: Bode Opadokun, Executive Director: Tunde Mimiko, Non-Executive Director: Val Ojumah, Non-Executive Directors (South Africans): Hendrik Nel, Johan Schalkwyk, Independent Directors: Titi Adebisi, Yusufu Modibbo

Choose from any of our **trusted plans**



...because YOU really matter



An FBNHoldings Company  
A LISTED MEMBER OF THE NIGERIAN STOCK EXCHANGE PREMIUM BOARD

associated with Sanlam group



## Introduction

This is a motor insurance policy designed to cover the insured against specific, pre-agreed losses. It covers the policyholder from legal liability to pay compensation to a third party in the event of an accident that caused property damage or bodily injury to the third party.

It also covers the insured in the event of damages due to an accident and fire damage up to the agreed value insured.

### General Features:

- It is affordable
- It is simple
- It has wider coverage
- It allows you exercise an option to decide your insured value

## Auto Flexi



This policy is available in three variants:  
**Flexi Gold, Flexi Silver and Flexi Bronze.**

BENEFITS/FEATURES	FLEXI GOLD	FLEXI SILVER	FLEXI BRONZE
Agreed Insured Value	N1,000,000	N500,000	N300,000
Accidental damage or fire (up to Insured Value)	N1,000,000	N500,000	N300,000
Premium payable	N40,000	N25,000	N15,000
Third Party Property Damage	Up to N2,000,000	Up to N2,000,000	Up to N2,000,000
Towing Limit (Inter/Intra)	N30,000	N30,000	N20,000
Authorised Repair Limit	N50,000	N50,000	N20,000
Third Party Bodily Injury and Death Cover	Unlimited	Unlimited	Unlimited
Deduction for Depreciation	Zero	Zero	Zero
Strike, Riot, and Civil Commotion Cover	Free	Free	Free
Free Flood Damage	Free	Free	Free
Excess	Free	Free	Free

## How To Pay Your Premium



Premium can be paid through the following channels:

- Pay into our bank account

*Please include your name and policy number on all payments*

**Do not pay cash to/through our agents or staff.**

**Our account details are as follows:**

- FBN General Insurance - Retail Collection Account  
First Bank Account Number: 2032934500

**FBN**  
**General Insurance**



PROPOSAL FORM

00001

*NOTE: An Insurance agent who assists an applicant to complete an application or proposal form for insurance shall be deemed to have done so as the agent of the applicant.*

Please print in block letters using black or blue ink and tick the appropriate boxes.

### DETAILS OF PROPOSER:

Title: Mr  Ms  Mrs  Other: \_\_\_\_\_

Full name: \_\_\_\_\_

Contact address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address of insured property (If different to contact address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business/Occupation: \_\_\_\_\_