



ROYAL GOLDEN SEAL INSURANCE BROKERS LIMITED

FORM EOI (MOTOR INSURANCE)

PARTY NAME:
(NB: NAME MUST BE CLEARLY WRITTEN IN CAPITAL LETTER AND AS IT APPEARS ON VEHICLE PARTICULARS)

REG NO..... **VEHICLE TYPE.....**

CHASIS NUMBER

INSURANCE COVER TYPE (Tick accordingly):

THIRD PARTY

COMPREHENSIVE

Value of the vehicle: **Color:.....**

REGISTERED ADDRESS:
.....

STATE: **LGA:**

NATURE OF BUSINESS/OCCUPATION:

CONTACT PERSON/ADDRESS: *(If not the same with the one above)*
.....

PHONE NUMBER(S):

EMAIL ADDRESS:
(NB: EMAIL ADDRESS MUST BE VALID)

INSURED SIGN/DATE:

OFFICIAL USE ONLY

APPROVED OFFICER

NAME:

SIGNATURE :

DATE ACCEPTED :

STATUS :