

**OneSource
MultipleChannels**

FBNGI Hybrid Portal

www.fbngi-ecosystem.com/Apps/ePortal/login.php

User/Functional Guide *Version 1.1*

Table of Contents

| | | |
|-------|---|-------|
| 1.0 | Introduction | 2 |
| 1.1 | Login Page Features (User Authentication) | 3 |
| 1.1.1 | Admin..... | 3 |
| 1.1.2 | Staff..... | 3 |
| 1.1.3 | Intermediary..... | 3 |
| 1.1.4 | Direct Customer..... | 3 |
| 1.2 | Intermediary Dashboard Features | 4 |
| 2.1 | Products (Sales/Purchase Process) | 6 |
| 3.1 | Auto-Standard | 6- 9 |
| 4.1 | Marine | 10-15 |
| 4.1.1 | Marine-Quick | 11 |
| 4.1.2 | Marine-Standard | 12-16 |
| 5.1 | Package Policy | 17-19 |
| 5.1.1 | New Purchase..... | 17 |
| 5.1.2 | How to Insure Additional Site/Location (One Individual having Multiple Sites) | 19 |
| 6.1 | Retail Special | 21-32 |
| 6.1.1 | Auto Flexi..... | 21-24 |
| 6.1.2 | Flexi Home | 25-28 |
| 6.1.3 | Flexi Guard | 29-32 |
| 7.1 | Life Products | 33-35 |
| 8.1 | Renewal Process | 36-39 |
| 8.1.1 | Agency Banking (Package Policy) | 36 |
| 8.1.2 | Others | 38 |
| 8.2 | Claims Process | 39 |

1.1 Introduction

FBNGI Hybrid Portal is an interactive, insurance-specific digital (Web/Mobile) solution with an e-payment system that enables our stakeholders (customers, intermediaries and staff improve service levels, minimize costs, and improve sales via self-service capabilities. Its robust administrative (back-office monitoring dashboard) functionality, and a seamless integration with our core application (PREMIA), enables an end-to-

end operation. This solution, digitally bridges the gap between our company FBNGI, partners, customers, employees, and other relevant external entities.

Therefore, this solution is fortified with some the following capabilities

1. Quick Quote
2. Product Purchase/Sale
 - A. Auto Insurance
 - Comprehensive
 - Third Party Fire & Theft
 - Third Party
 - Auto Flexi
 - AutoFlexi-Bronze
 - AutoFlexi-Silver
 - AutoFlexi-Gold
 - B. House Holder Insurance
 - FlexiHome-Bronze
 - FlexiHome-Silver
 - FlexiHome-Gold
 - FlexiHome-Platinum
 - C. Personal Accident Insurance
 - FlexiHome-Silver
 - FlexiHome-Gold
 - FlexiHome-Platinum
 -
 - D. Marine Insurance
 - E. Package Insurance
 - F. Goods in Transit Insurance
3. Policy Tracking (Status Check)
4. Policy Renewal
5. Payment
6. Claims Notification (Reporting)
7. Claims tracking (Status Check)
8. Customers' Satisfaction Survey (Real-time)
9. Performance Analysis (Sales Perspective)
10. Analytics

1.1 Login Page Features (User Authentication)

The login page presents basic users' authentication options through Username, Password and User Type. For staff, username and password will be based on system logon account, while that of non-staff will be profiled based on the portal account creation procedure.

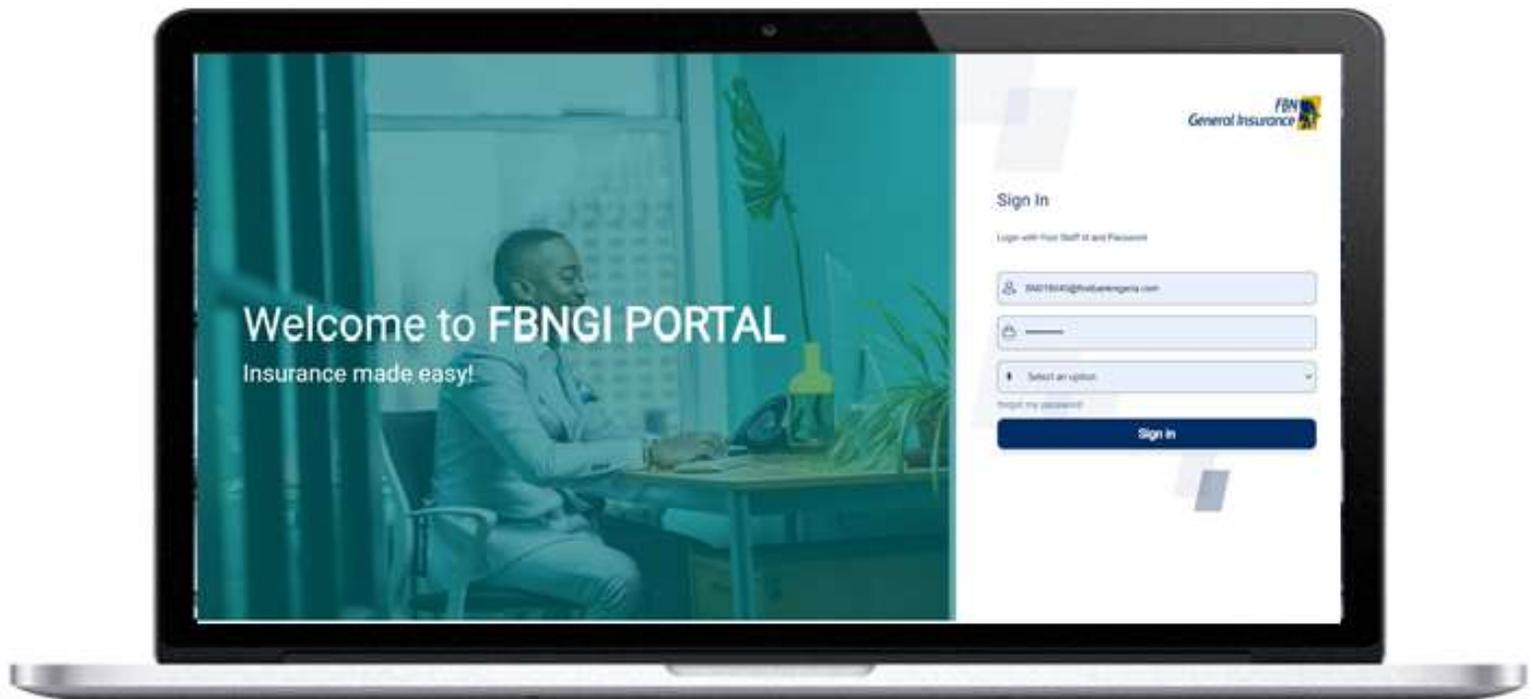


Figure 1.1

User Type

- Administrator
- Direct Customer
- Intermediary
- Staff

1.1.1 **Admin:** The 'Admin' User Type is strictly used by users who are profiled as administrators.

1.1.2 **Staff:** The 'Staff' User Type is an option for staff of FBN General Insurance, for performance monitoring and reporting.

1.1.3 **Intermediary:** The 'Intermediary' is an option for profiled sales agent/staff, brokers and other licensed insurance brokerage outfit.

1.1.4 **Direct Customer:** The 'Direct Customer' option is for B2C customers, who purchase insurance products through a self-service.

1.2 Intermediary Dashboard Features

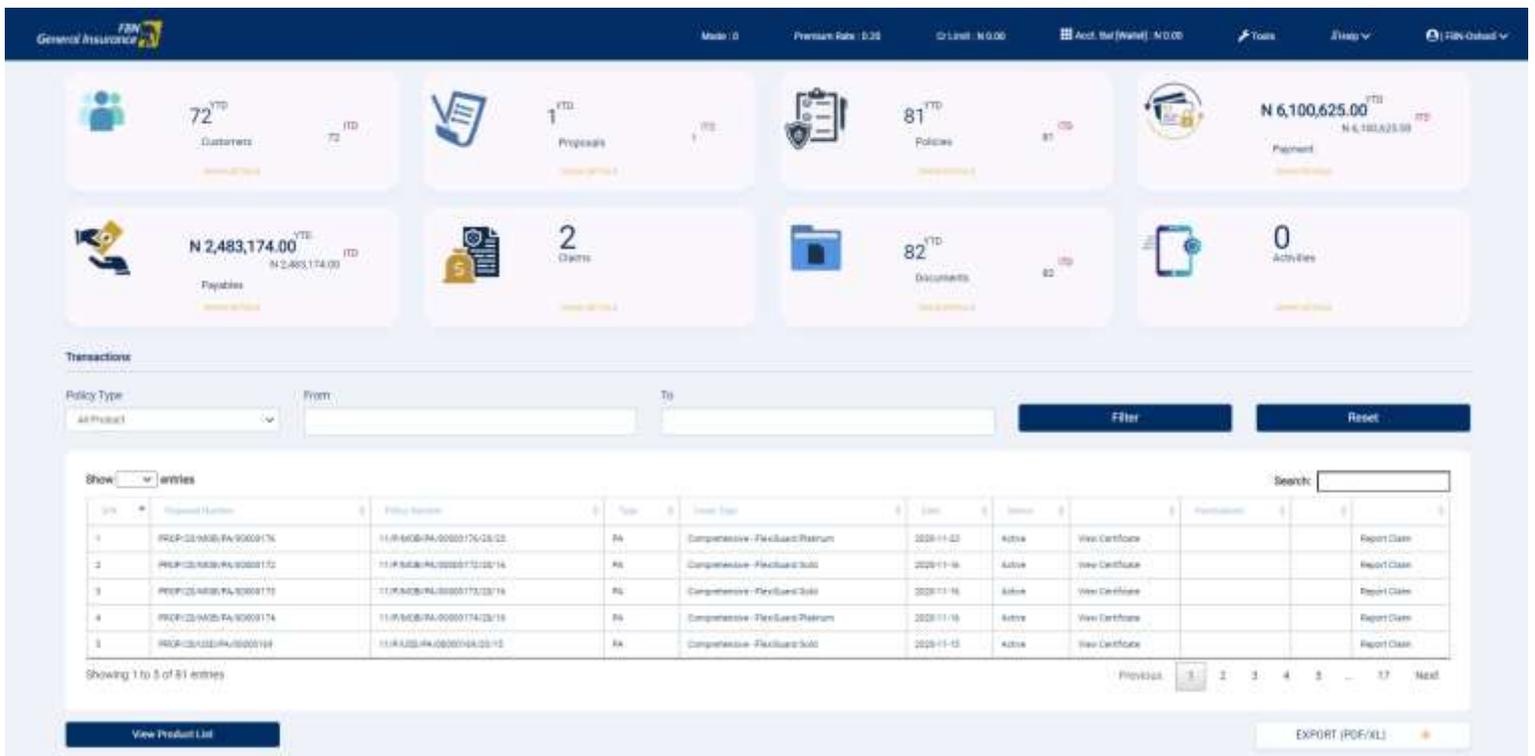


Figure 1.2

The intermediary dashboard consists of two sections, which are; *menu bar* and *activity section*.

1.2.1 **Menu Bar:** This is a top most bar of the dashboard; it houses business various product options (Marine-Quick, Marine-Standard, Auto-Standard, Retail Special and Package Policy), Help Tool and other user setup information.

1.2.2 **Activity Section:** This section avail user the opportunity to monitor and evaluate performance, reporting and managing customer portfolio (purchasing additional products and renewing transactions). The features on this section are;

-  **Customers:** for customer portfolio management.
-  **Proposals:** for managing proposals and incomplete transactions.
-  **Policies:** for viewing status of existing policies and to evaluate growth in terms of policy count.
-  **Payment:** for evaluating performance in terms of premium receipted through the platform.
-  **Payables:** for evaluating performance in terms of premium received outside the platform.
-  **Claims:** for viewing reported claims.
-  **Documents:** for viewing and managing documents upload.
-  **Activities:** for viewing and monitoring user activities on the dashboard.
-  **Transactions:** This is used for production reporting through Export by Periods and Products.

2.1 Products (Sales/Purchase Process)

The products on the platform are Marine-Quick, Marine-Standard, Auto-Standard, Retail Special (Personal Accident, Householder in variants) and Package Policy.

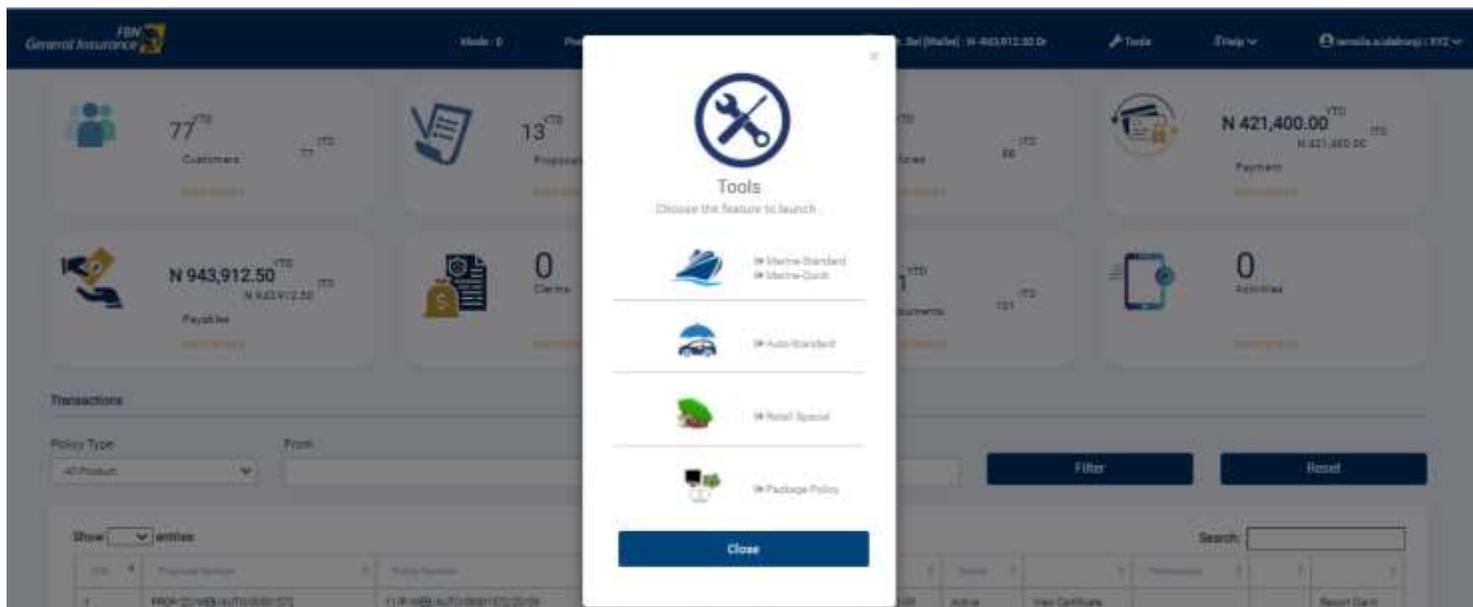
Products Selection

Steps:

1. Locate Tools icon as shown on Figure 1.2 above and click, to display list of products.



2. Select product of your choice.



3.1 Auto-Standard

The Auto-Standard is a product for standard motor insurance; this product handles comprehensive, third party and third party fire and theft cover.

Steps:

1. Locate Auto-Standard on the product list, populate the basic customer information and other vehicle information as shown in *Figure 3.1* below.

MOTOR PROPOSAL FORM



CUSTOMER INFORMATION

NOTE: Fields marked with * are required.

Acct Number

2211223311

Check Individual

Email

ismailidakwoji@yahoo.com

Phone Number

2348034518764

First Name

Ismaila

Middle Name

Attai

Last Name

Idakwoji

Gender

Select an Option

Date of Birth

01-01-2000

Occupation

Trader

Address

11.

Nationality

Nigeria



VEHICLE INFORMATION

Registration No. *

Test12YX

Make of Vehicle *

50 TONS LOWBOY TRAILER

Model of Vehicle *

Toyota Avenxis

Year of make *

2020

Engine Number *

Testeng123

Chasis No. *

chasis112233

Vehicle Color *

Black

Date of Purchase *

11-06-2019

Figure 3.1

2. Then proceed to Figure 3.2, upload supporting documents and click submit to generate **Proposal Id.**

Type of Cover *

Third Party

Upload Supporting Documents

NB: You are required to upload scanned copy of the following documents. Size of each file **must not exceed 1mb** and format **must be in PDF, JPEG or PNG.**

Document 1 (Vehicle License) *

Choose File fbnbroker_logo.png

Document 3 (Means of Identification) *

Choose File fbnbroker_logo.png

Document 2 (Direct Debit Mandate)

Choose File fbnbroker_logo.png

Document 4 (Utility Bill)

Choose File fbnbroker_logo.png

Declaration

I hereby declare that the above statements and particulars are true and correct, and I agree that this proposal and declaration shall be the basis of a contract of insurance between me and the company (FBN General Insurance) ; such contract to be expressed in the form of a policy ([click here to read policy document](#)). I am willing to accept a policy subject to the terms, exception and conditions prescribed by the company (FBN General Insurance) therein. I undertake that the vehicle to be insured shall only be driven by my authorized nominee and also shall not be driven by any person who to my knowledge is not legally authorized to drive, or has been refused any motor vehicle insurance/continuance thereof.

I also hereby affirm that in line with the **Nigeria Data Protection Regulation, 2019 (NDPR)** , I consent to the collection and processing of my personal data/information in line with the consent clause of the data protection regulation. [Click here to read the Consent Clause.](#)

- check to confirm declaration above

- check to confirm acceptance of policy terms, exceptions and conditions

Date **2020-11-22**

Figure 3.2

3. Click Proceed button on Figure 3.3 to make payment.

Figure 3.3

Proposal Details Submitted



You have successfully submitted your proposal with form Id : **PROP/20/WEB/AUTO/00001587.**

Next Step is to Make Payment to complete the process.

4. In Figure 3.4 below, there three (3) payment options; (1) Online Payment, (2) Fund Transfer and (3) Direct Debit. Choose any option as the name suggest and make payment.

Figure 3.4

Below is the summary of the transaction to be executed if you are okay, Click pay now to make Payment:

Proposal Id: PROP/20/WEB/AUTO/00001587 Email: ismailidakwoji@yahoo.com

Customer: Idakwoji Attai Ismaila

Vehicle Make: 50 TONS LOWBOY TRAILER
Vehicle Model: Toyota Avenxis
Excess Buy back (1% of SI): NGN 0
Cover/Product Type: Third Party
Total Premium Due: **NGN 5,000.00**

Option 1: Online Payment ▼

A. Make payment with your local debit/ATM card



Pay Now **Pay Later**

Option 2: Fund Transfer - Direct Payment to Our Account [Teller, USSD or Mobile App] ➤

Option 3: Direct Debit [Pay with Bank Account] ➤

5. In demonstrating the first option, follow the procedure in the following figures and print certificate.

Below is the summary of the transaction to be executed if you are okay, Click pay now to make Payment:

Proposal Id: PROP/20/WEB/AUTO/00001587 Email: ismailidakwoji@yahoo.com

Customer: Idakwoji Attai Ismaila

Vehicle Make: 50 TONS LOWBOY TRAILER
Vehicle Model: Toyota Avenxis
Excess Buy back (1% of SI): NGN 0
Cover/Product Type: Third Party
Total Premium Due: **NGN 5,000.00**

Option 1: Online Payment ▼

A. Make payment with your local debit/ATM card



Pay Now **Pay Later**

Option 2: Fund Transfer - Direct Payment to Our Account [Teller, USSD or Mobile App] ➤

Option 3: Direct Debit [Pay with Bank Account] ➤

FBN General Insurance
: 5,000.00 NGN

Card number *
5123 4500 0000 0000



Expiry month * Expiry year *
05 21

Cardholder name *
Ismail

Security code *
100 3 digits on back of your card

Powered by First Bank of Nigeria 

Figure 3.5a

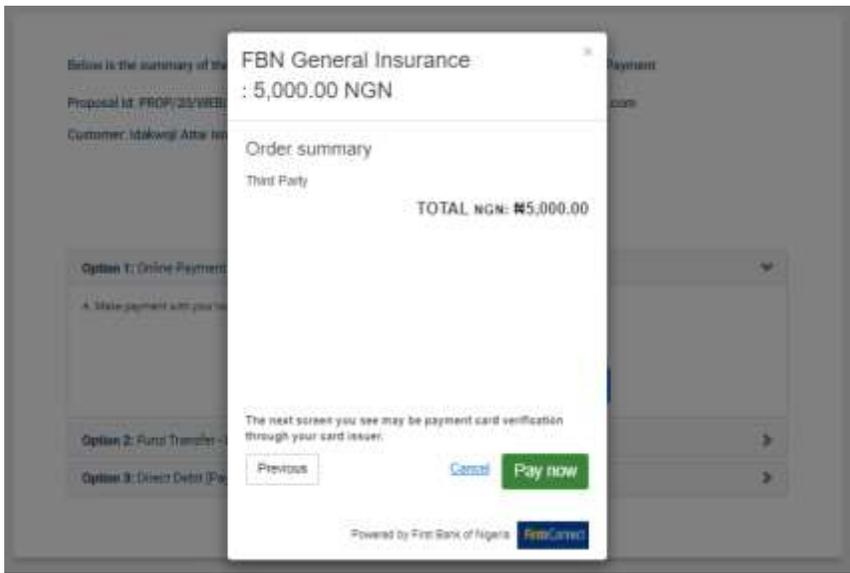


Figure 3.5b

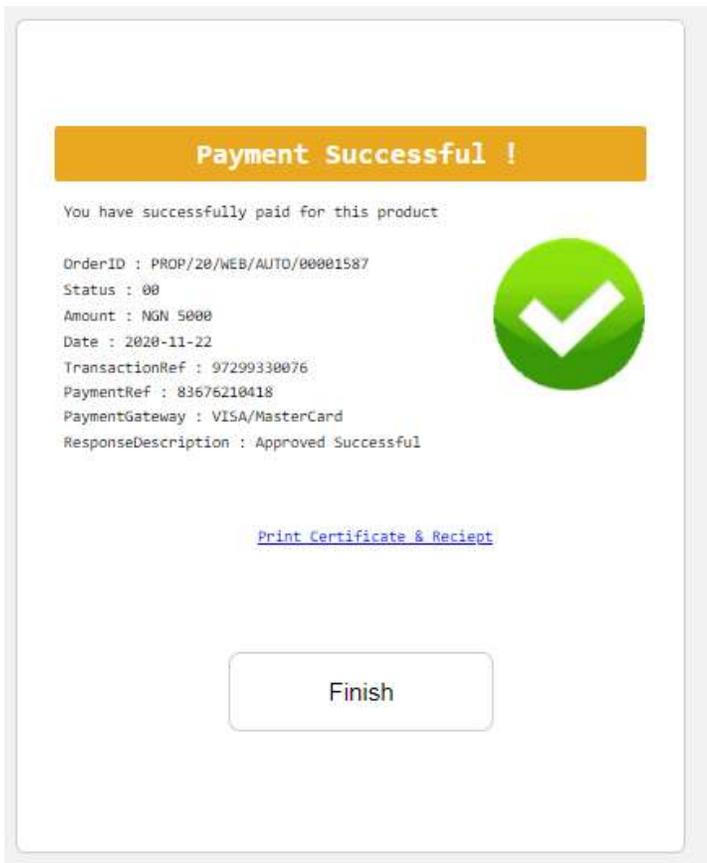


Figure 3.6

MOTOR VEHICLES (THIRD PARTY INSURANCE) ACT 1945 (NIGERIA)

eCERTIFICATE OF INSURANCE

W.A.X.1

4.1

| | | |
|---|--|--|
| Certificate Number | <input type="text" value="CT/WEB/AUTO/00001587/22-11-2020"/> | Policy Number: 11/P/WEB/AUTO/00001587/20/22 |
| 1 | Vehicle Reg. Number | Test12YX |
| | | Make: 50 TONS LOWBOY TRAILER Toyota Avenxis |
| 2 | Name of Policy Holder | Ismaila Attai Idakwoji |
| 3 | Commencement Date | 2020-11-22 |
| 4 | Expiry Date | 2021-11-22 |
| 5 | Persons or Classes of persons entitled to drive | |
| | a. The Policy Holder: | |
| | The policy holder may also drive a Motor Car not belonging to him under a hire | |
| | b. Any person who is driving on the policy holder's order or with his/her permission. | |
| | Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive Motor Car or has been so permitted and is not disqualified by order of a court of law or by reasons of enactment or regulations in that behalf from driving such Motor Car. | |
| 6 | Limitations to use | |
| | Use only for social, domestic and pleasure purposes and for the policy holder's business | |
| | The Policy does not cover for hire or reward for racing, pace-making, reliability trial, speed-testing or use for any purpose in connection with the Motor Trade. | |
| Third Party | | |
| <i>To confirm the authenticity of your Motor Insurance policy text Policy Number * Number Plate to 33125 e.g. 11/P/WEB/AUTO/00001587/20/22 * Test12YX Or visit www.niid.org</i> | | |
| <small>Limitations rendered inoperative by the provisions of the Motor Vehicle (Third Party Insurance) Act, 1945 (Nigeria).</small> | | |

Marine

This is product option to underwrite marine transactions; there two (2) menu options for this category (Quick and Standard)

The Quick menu option is a computerized version of manual receipt, predominantly used by insurance brokers to maintain an open cover for their clients, while Standard option represent the standard underwriting procedure for insurance underwriters in underwriting marine transactions.

4.1.1 Marine-Quick

Steps:

1. Locate Marine-Quick option on the product list and populate details, as shown in Figure 6.1.1 below.

eCERTIFICATE

Marine Cargo Insurance

Policy Number :

Tax Identification (TIN)

1 Issued in Favour Of

Name

Address

2 Value Declared (in figures) NGN

3 Value Declared (in words)

4 Interest Insured

5 Means of Conveyance

6 Vessel ANY APPROVED VESSEL

7 Voyage Specify

8 Premium NGN

9 Exchange Rate NGN

10 Institute Cargo Clause Clause A Clause C

11 Proforma Invoice # Date

Upload Document (Proforma Invoice) Quote - FB...Insurance.pdf

Terms and Condition

- * Institute Cargo Clauses (A), (AIR), (B), and (C)
- * Radioactive Contamination Exclusion Clause
- * Liability Exclusion Clause "B"
- * War Clauses (Cargo)
- * Strike Clauses (Cargo)
- * Replacement Clauses
- * Private Jetty Clause
- * Supervised Discharge Warranty
- * Warranted No Risk After Discharge from Overseas Carrying Vessel or Aircraft
- * Institute Bulk Oil Clauses
- * Nigeria Classification Clauses

Exclusion

- * Rust
- * Oxidation & Discolouration
- * Mechanical & Electrical Derangement
- * Fresh Water Damage and Midstream
- * Discharge Exclusion
- * Political, Communal Risk Class
- * Terrorism

12 Policy Excess % Date 2020-11-24

Examined By



Counter signed

[Signature]
MD/CEO

-

Figure 4.1.1

2. Click Save in Figure 4.1.1 above and generate certificate.

4.2.1 Marine-Standard

Steps:

1. Locate Marine-Option option on the product list and populate details, as shown in *Figure 4.2.1* and *4.2.2* below.

AVIATION/MARINE CARGO PROPOSAL FORM

CUSTOMER INFORMATION

NOTE: Fields marked with * are required.

| | | |
|-----------------------------------|--|-----------------------|
| Tax.Id(TIN) 00172231-0001 | <input checked="" type="checkbox"/> Check Individual | |
| Email ismailidakwoji@yahoo.com | Phone Number 2348034518764 | |
| First Name Ismaila | Middle Name Attai | Last Name Idakwoji |
| Gender Male | Date of Birth 2020-01-28 | |
| Occupation Trader | | |
| Address 11. | Nationality Nigeria | |

CARGO INFORMATION

Please indicate Category of goods to be insured * **NOTE: No cover for Stockfish, frozen foods etc. ***

Highly Susceptible Products (e.g. Oil, Cement, Rice, Salt, Canned Foods, Stationery, Bottled Products, Glass etc.)

Above Normal Products (e.g. Household, Personal Effects, Electronics etc.)

Normal Products (e.g. Iron rods, Steel, Finished goods, Automobiles, Tractors, Truck head, Machinery, Equipments etc.)

Exact description of goods to be insured *

Electronic Equipment

Figure 4.2.1

| | |
|---|--|
| Type of packaging * Containerized | Means of Conveyance * Air |
| Will there be supervision for landing & unloading of goods ? * <input type="radio"/> Yes <input checked="" type="radio"/> No | Vessel Identification #* VesTestXYZ111 |
| Voyage * Port to Port | Specify Voyage * Any Seaport in South Africa to Tin Can |
| Sum to be Insured (Numbers only) * 2000000 | Policy Excess % 10 |
| Sum to be Insured (In Words) Two Million Naira, zero Kobo | |
| Proforma Invoice Number * TestXYZ111 | Invoice_Date 11/20/2020 |

Upload Supporting Documents

NB: You are required to upload scanned copy of the following documents. Size of each file **must not exceed 1mb** and format **must be in PDF, JPEG or PNG.**

| | |
|---|---|
| Document 1 (Proforma Invoice)* Choose File fbnbroker_logo.png | Document 2 (Bill of Laden) Choose File fbnbroker_logo.png |
| Document 3 (Form M) Choose File fbnbroker_logo.png | Document 4 (Means of Identification) * Choose File fbnbroker_logo.png |
| Document 5 (Utility Bill) * Choose File fbnbroker_logo.png | Date 2020-11-23 |

Declaration

I hereby declare that the above statements and particulars are true and correct, and I agree that this proposal and declaration shall be the basis of a contract of insurance between me and the company (FBN General Insurance) ; such contract to be expressed in the form of a policy (click here to read policy document). I am willing to accept a policy subject to the terms, exception and conditions prescribed by the company (FBN General Insurance) therein. I undertake that the Marine to be insured shall only be driven by my authorized nominee and also shall not be driven by any person who to my knowledge is not legally authorized to drive, or has been refused any motor Marine insurance/continuance thereof.

I also hereby affirm that in line with the **Nigeria Data Protection Regulation, 2019 (NDPR)** , I consent to the collection and processing of my personal data/information in line with the consent clause of the data protection regulation. [Click here to read the Consent Clause.](#)

- check to confirm declaration above
- check to confirm acceptance of policy terms, exceptions and conditions

Figure 4.2.2

Proposal Details Submitted



You have successfully submitted your proposal with form Id : **PROP/20/WEB/MCARGO/00001074.**

Next Step is to Make Payment to complete the process.



Please choose the type of Product you wish to subscribe to.

NB: Cost is computed based on Sum to be Insured, Packaging Type, Mode of Conveyance and Category of goods indicated earlier on. Click [here](#) to read information about available products.

Proposal Id : PROP/20/WEB/MCARGO/00001074

Sum to be Insured : NGN 2,000,000.00

| Cover Type | Aggregate Rate (%) | Cost (N) |
|---|---|----------------------------|
| 1 <input type="radio"/> Clause A | Base Rate=; Packaging Factor=25% Excess Loading; Voyage Factor= | 5,000.00 |
| 2 <input checked="" type="radio"/> Clause C | Base Rate=; Packaging Factor=25% Excess Loading; Voyage Factor= | 2,000.00 |
| | | Total Premium Due 2,000.00 |

Add to Cart

Cancel

Figure 4.2.3

- Click Add to Cart in *Figure 4.2.3* above and follow steps below to make payment and generate marine certificate



Below is the summary of the transaction to be executed if you are okay, Click pay now to make Payment

Proposal Id: PROP/20/WEB/MCARGO/00001074

Email: ismailidakwoji@yahoo.com

Customer: Idakwoji Attai Ismaila

Category of goods: Above Normal
Packaging Type: Containerized
Mode of Conveyance: NGN Air
Cover/Product Type: Port to Port [Any Seaport in South Africa to Tin Can]/Clause C
Total Premium Due: **NGN 2,000.00**

Option 1: Online Payment ▼

A. Make payment with your local debit/ATM card

Option 2: Fund Transfer - Direct Payment to Our Account [Teller, USSD or Mobile App] ▶

Option 3: Direct Debit [Pay with Bank Account] ▶

FBN General Insurance
: 2,000.00 NGN

Card number *
5123 4567 8900 0000

Expiry month * Expiry year *
05 21

Cardholder name *
Ismail

Security code *
100

Cancel Next

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FBN General Insurance
: 2,000.00 NGN

Order summary

Port to Port (Any Seaport in South Africa to Tin Can/Cape Town)

TOTAL NGN: ₦2,000.00

The next screen you see may be payment card verification through your card issuer.

Previous Cancel Pay now

Powered by First Bank of Nigeria

Payment Successful !

You have successfully paid for this product

OrderID :
PROP/20/WEB/MCARGO/00001074
Status : 00
Amount : NGN 2000
Date : 2020-11-23
TransactionRef : 15002216538
PaymentRef : 73513001017
PaymentGateway : VISA/MasterCard
ResponseDescription : Approved Successful



[Print Certificate & Receipt](#)

Finish

eCERTIFICATE

Marine Insurance

Policy Number : 11/P/WEB/MCARGO/00001074/20/23

| | | | |
|----|-----------------------------|--|------------------------|
| 1 | Issued In Favour Of | Ismaila Attai Idakwoji 11, Bamgboye Street, Agliti, Mile 12 | |
| 2 | Value Declared (in figures) | NGN 2,000,000.00 | |
| 3 | Value Declared (in words) | Two Million Naira, zero Kobo | |
| 4 | Interest Insured | Electronic Equipment | |
| 5 | Vessel | VesTestXYZ111 | |
| 6 | Voyage | Port to Port [Any Seaport in South Africa to Tin Can] | |
| 7 | Premium | NGN 2,000.00 | |
| 8 | Conversion Rate | NGN 365 | |
| 9 | Institute Cargo Clause | <input type="radio"/> Clause A <input checked="" type="radio"/> Clause C | |
| 10 | Proforma Invoice # | TestXYZ111 | Date 11/20/2020 |

Terms and Condition

- * Institute Cargo Causes (A), (AIR), (B), and (C)
- * Radioactive Contamination Exclusion Clause
- * Liability Exclusion Clause "B"
- * War Clauses (Cargo)
- * Strike Clauses (Cargo)
- * Replacement Clauses
- * Private Jetty Clause
- * Supervised Discharge Warranty
- * Warranted No Risk After Discharge from Overseas Carrying Vessel or Aircraft
- * Institute Bulk Oil Clauses
- * Nigeria Classification Causes

Exclusion

- * Rust
- * Oxidation & Discolouration
- * Mechanical & Electrical Derangement
- * Fresh Water Damage and Midstream
- * Discharge Exclusion
- * Political, Communal Risk Class
- * Terrorism

| | | | |
|----|-------------------|--|------------------------|
| 11 | Policy Excess 10% | | Date 2020-11-23 |
|----|-------------------|--|------------------------|

Examined By: - System [Auto]



5.1

This product is specially designed to meet the insurance need of First Money Agent (Agent Banking for Financial Inclusion). The product in itself consist of three (3) products (Money Insurance, Electrical Equipment and Group Personal Accident). Also, there are four (4) options available for customers to buy, based on limit and risk exposure, with a fixed premium of N5,000, 7,500, 15,000 and 27,500 for option A, B, C and D respectively.

5.1.1 New Purchase

Steps:

1. Locate Package Policy on the product list and pick any of the options, as shown in *Figure 5.1* below.



Package Insurance (Agency Banking) PROPOSAL FORM

Section A: Details of Firstmonie Agent (Proposer)

NOTE: Fields marked with * are required.

Names *

Firstmonie Agent Id: SOL ID:

First Name: Middle Name: Last Name:

Gender: Male Female

DOB(Age)*:

Contact *

Address:

phone(GSM): email: Confirm.email:

Occupation: Nationality:

Section B: Select preferred Bouquet by simply Clicking either of the 4 Options A to D.

N.B - Each Bouquet is valid for 12 months and Premium is renewable annually.

Option A : Total Premium Payable - NGN 5,000.00 (Five Thousand Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|----------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 500,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 2,500.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option B : Total Premium Payable - NGN 7,500.00 (Seven Thousand, Five Hundred Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|------------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 1,000,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 5,000.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option C : Total Premium Payable - NGN 15,000.00 (Fifteen Thousand Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|------------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 1,500,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 12,500.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option D : Total Premium Payable - NGN 27,500.00 (Twenty Seven Thousand, Five Hundred Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|------------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 5,000,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 25,000.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Upload Supporting Document (1 MB Max)
 fbnbroker_1000.png

Payment Reference Id

Figure 5.1

2. Click on Submit to generate proposal

- Click Finish in *Figure 5.2* below and follow step 4 to 5 in section 3.1 above to make payment and generate policy document and receipt.



Figure 5.2



General Insurance

PLOT 298, IKORODU ROAD, ANTHONY
LAGOS NIGERIA
Insurance:info@fbninsurance.com
019054810

POLICY SCHEDULE

POLICY NO.:

THE INSURERS:

THE INSURED:

ADDRESS:

THE BUSINESS:

PERIOD OF INSURANCE:

EXCESS:

11/P/WEB/PKGI/00020436/20/23

FBN GENERAL INSURANCE LIMITED

CHUKWUJEKWU NDUBUISI OBINDINMA

11

AGENCY BANKING

FROM 2020-11-23 TO 2021-11-23

10% OF EACH LOSS

.Option C @ NGN 15,000.00

| Money | | Electronic Equipment | | Group Personal Accident | | | |
|----------------|----------------------|----------------------|---------------------|-----------------------------------|----------------------------|----------------|-------------------|
| Limit | NGN 1,500,000.00 | Value | NGN 100,000.00 | Person(s) | Cover | Limit | Premium |
| Premium | NGN 12,500.00 | Premium | NGN 2,000.00 | OBINDINMA NDUBUISI CHUKWUJEKWU | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | | Medical Expense | NGN 20,000.00 | |

AUTHORISED SIGNATORY

Counter signed







MD/CEO

Figure 5.3

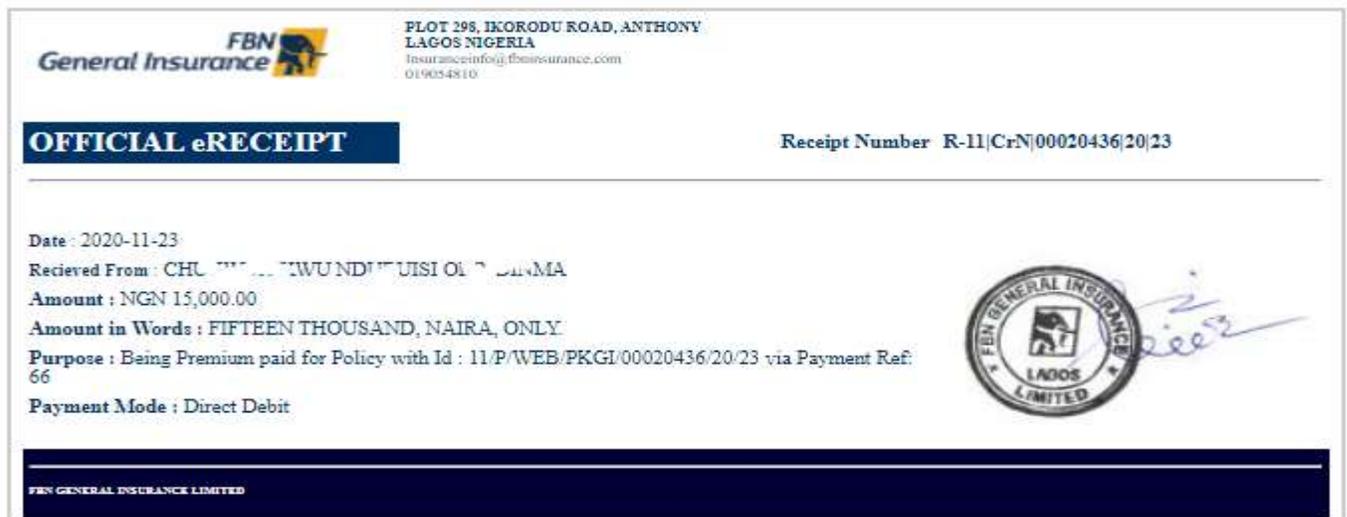


Figure 5.3

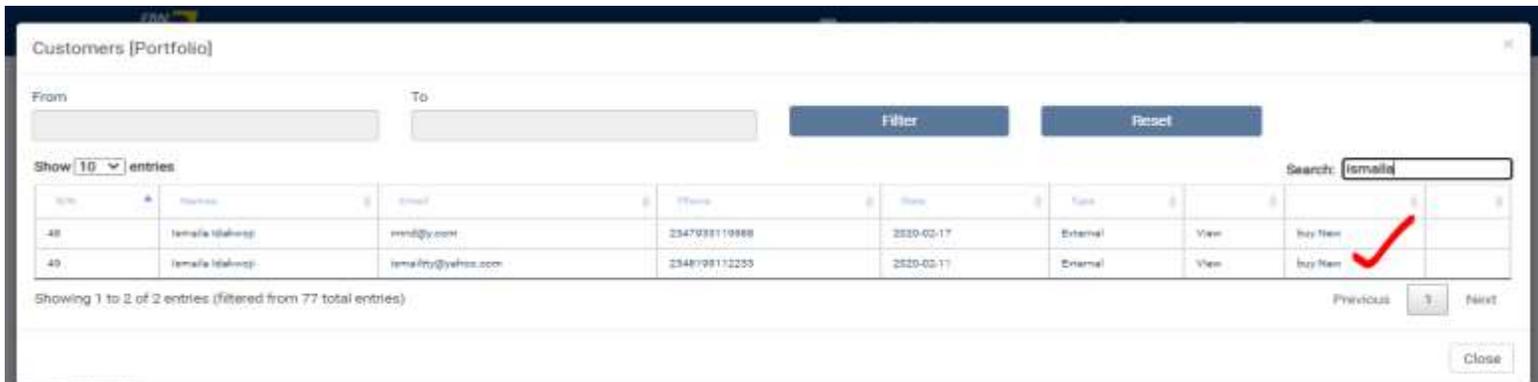
5.1.1 How to Insure Additional Site/Location (One Individual having Multiple Sites)

Steps:

1. Go to Customers Section

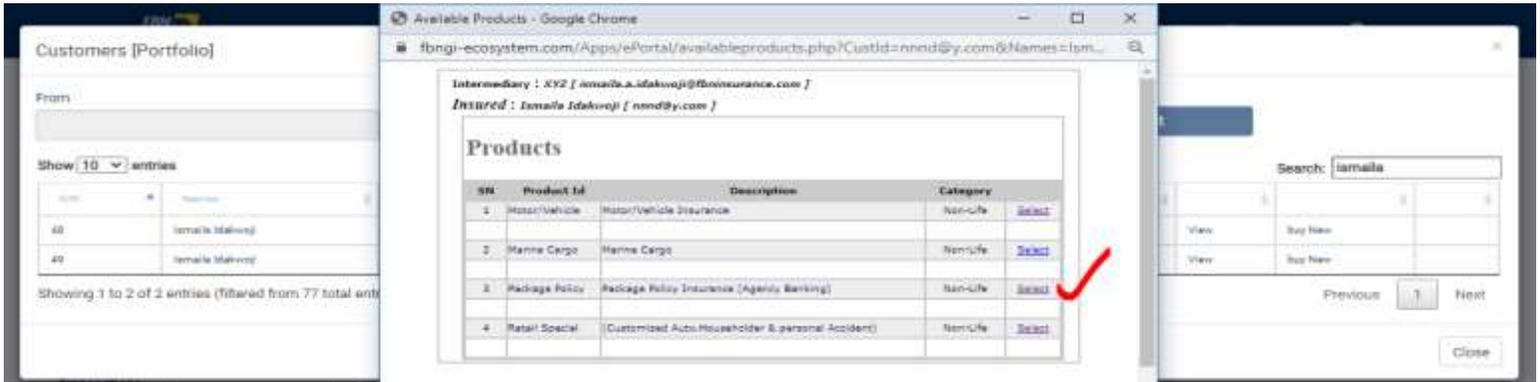


2. Search for the Individual/Company from your Customers list via Customer Details (e.g. Name, Email) in the Search Box



3. Click on Buy New against the Individual/Company

4. Select the product (Package Policy) by clicking **Select** Button



5. Provide necessary info before submission



Package Insurance (Agency Banking) PROPOSAL FORM [FLEET]

Section A: Details of Firstmonie Agent (Proposer)

NOTE: Fields marked with * are required.

Names * *Ismaila Idakwoji [nnnd@y.com]*

Location *

Enter Address of the additional premises to be Insured

298 Ikorodu Road, Lagos

Enter Name of the additional Person to be Insured for GPA

Anthony

Section B: Select preferred Bouquet by simply Clicking either of the 4 Options A to D.

N.B - Each Bouquet is valid for 12 months and Premium is renewable annually.

Option A : Total Premium Payable - NGN 5,000.00 (Five Thousand Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|---------------------|----------------------|---------------------|----------------------------|----------------|-------------------|
| Limit | NGN 500,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 2,500.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option B : Total Premium Payable - NGN 7,500.00 (Seven Thousand, Five Hundred Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|---------------------|----------------------|---------------------|----------------------------|----------------|-------------------|
| Limit | NGN 1,000,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 5,000.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option C : Total Premium Payable - NGN 15,000.00 (Fifteen Thousand Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|----------------------|----------------------|---------------------|----------------------------|----------------|-------------------|
| Limit | NGN 1,500,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 12,500.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option D : Total Premium Payable - NGN 27,500.00 (Twenty Seven Thousand, Five Hundred Naira Only)

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|----------------------|----------------------|---------------------|----------------------------|----------------|-------------------|
| Limit | NGN 5,000,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 25,000.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Upload Supporting Document (1 MB Max)

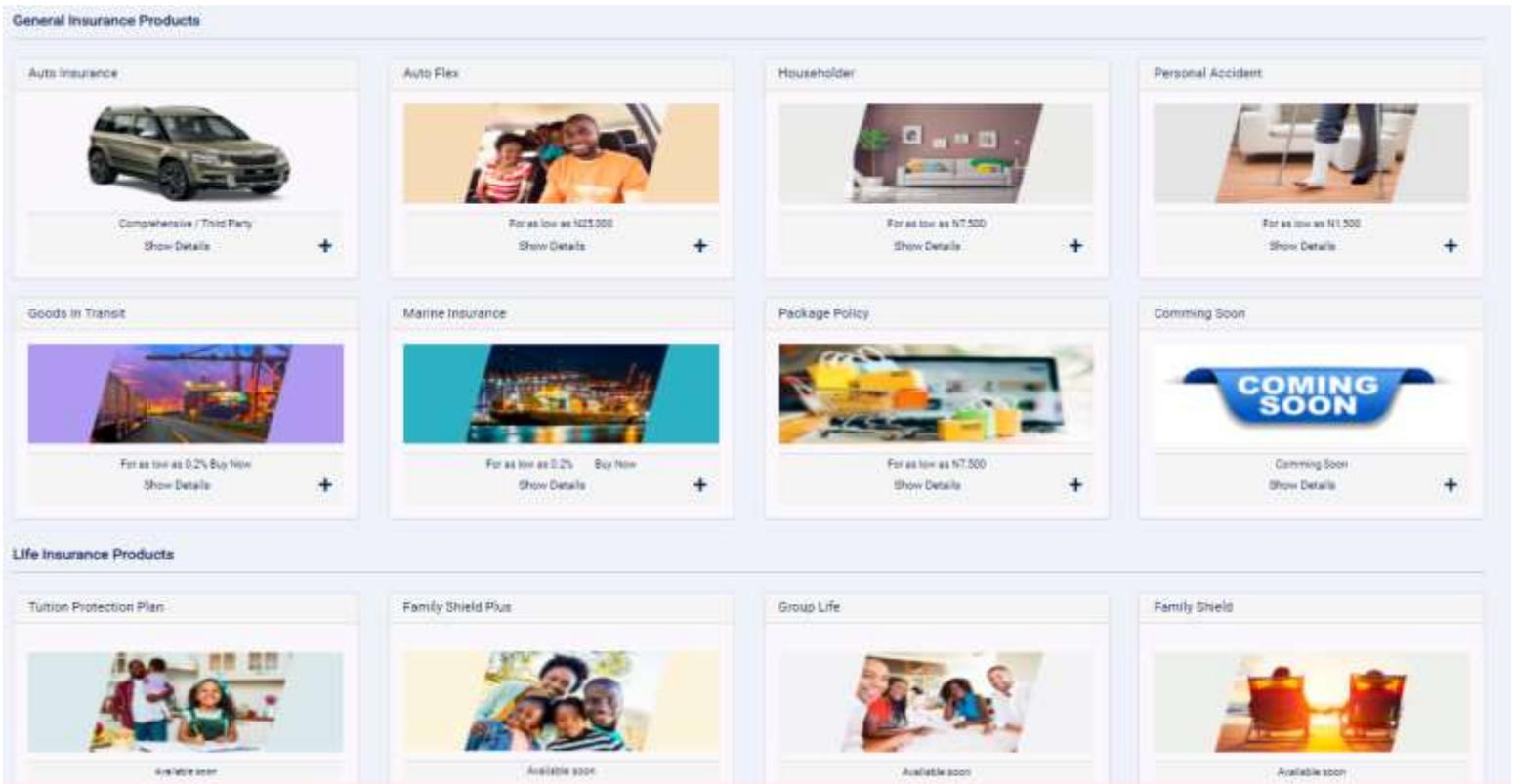
f_logo.png

Payment Reference Id

Date **2020-11-24**

6.1 Retail Special

This is a custom made products with fixed sum insured and premium across three (3) line of business in FLEXI product names, as follows: Auto Flexi, Flexi Guard and Flexi Home.



6.1.1 Auto Flexi: This has three (3) variants; Auto Flexi Bronze, Silver and Gold. Follow the steps below to buy the product.

Steps:

1. Locate Retail Special on the product list and choose any of the three (3) variant of AutoFlexi, as shown in Figure 6.1.1 below. Same processing procedure applies to all the three.

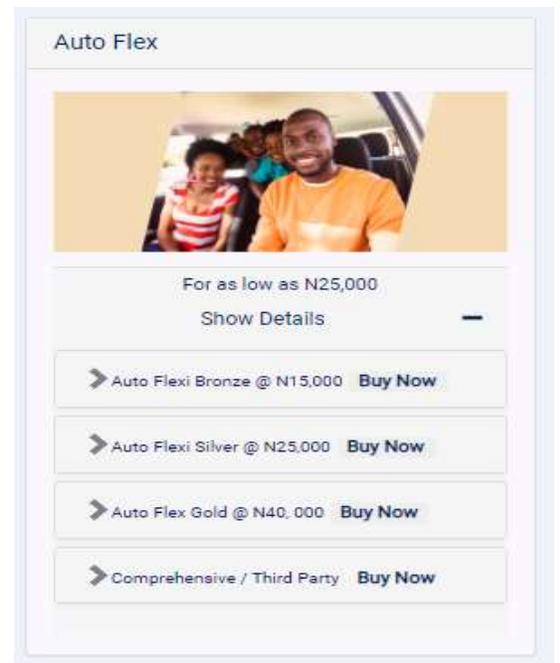


Figure 6.1.1

- In Figure 6.1.1, click on the arrow (>) to view product details and click Buy Now to provide customer basic information and risk details.

Customer Information

| | |
|--|--|
| Email * ismailidakwoji@yahoo.com | Phone 2348034518764 |
| Surname * Idakwoji | Other names * Ismaila |
| Contact Address * 11, | Agent Id SN011316@firstbanknigeria.com |

RISK DETAILS (Vehicle | AutoFlexi-Bronze)

| | |
|---|---|
| Vehicle Registration No * 234ww | Engine Number* 234 |
| Chasis Number * Please enter Chassis No * | Model of Vehicle * Toyota Camry |
| Make of Vehicle * TOYOTA | Year of Make* 2011 |

Upload Supporting Documents

| | |
|---|--|
| Document 1 (Vehicle Licence)* Choose File fonbroker_logo.png | Document 2 (Picture)* Choose File fonbroker_logo.png |
| Document 3 Means of Identification * Choose File fonbroker_logo.png | Document 4 Utility Bill * Choose File fonbroker_logo.png |

I hereby declare that the above statements and particulars are true and correct, and I agree that this proposal and declaration shall be the basis of a contract of insurance between me and the company (FBN General Insurance) ; such contract to be expressed in the form of a policy (click here to read policy document). I am willing to accept a policy subject to the terms, exception and conditions prescribed by the company (FBN General Insurance) therein.

I also hereby affirm that in line with the **Nigeria Data Protection Regulation, 2019 (NDPR)** , I consent to the collection and processing of my personal data/information in line with the consent clause of the data protection regulation. [Click here to read the Consent Clause.](#)

check to confirm declaration above

check to confirm acceptance of policy terms, exceptions and conditions

* These fields are required.

Figure 6.1.2

- Click Submit Proposal.

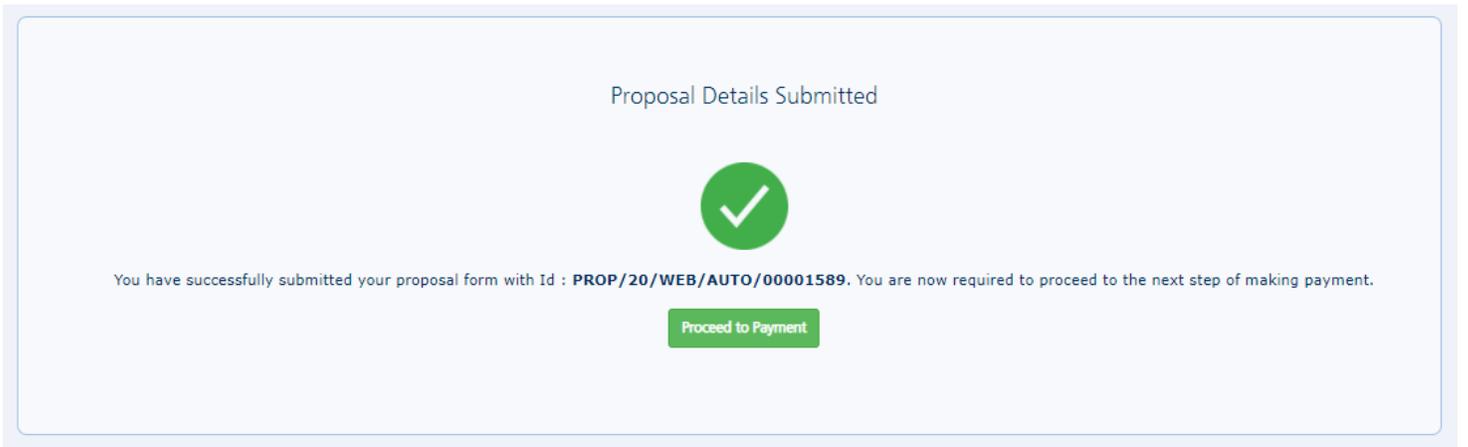
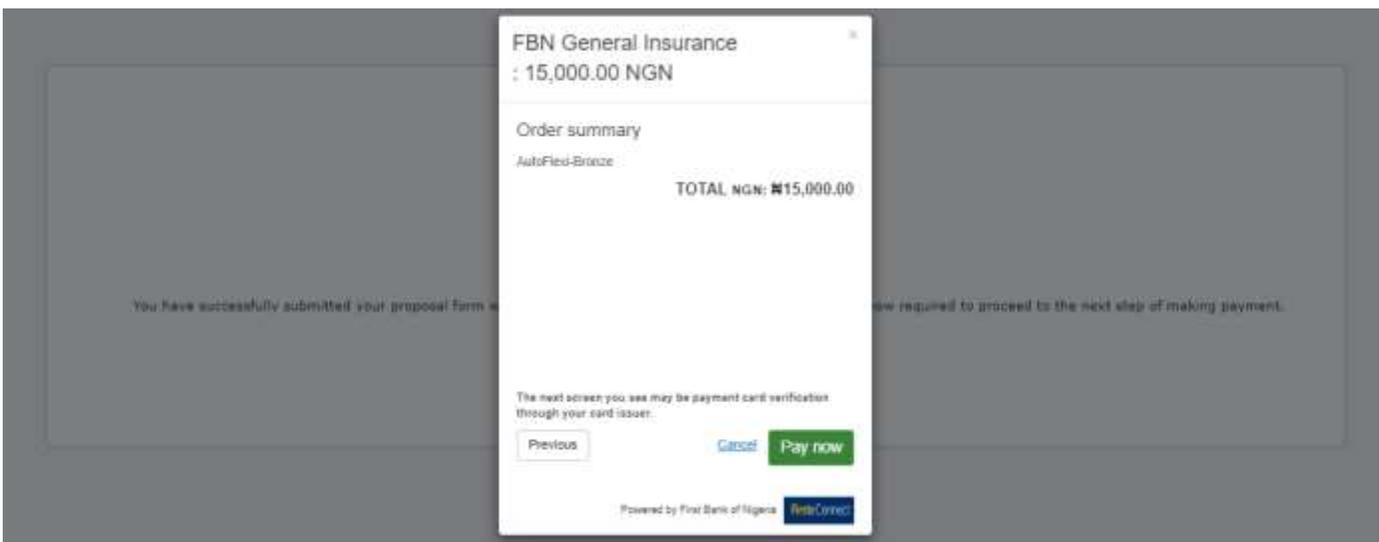
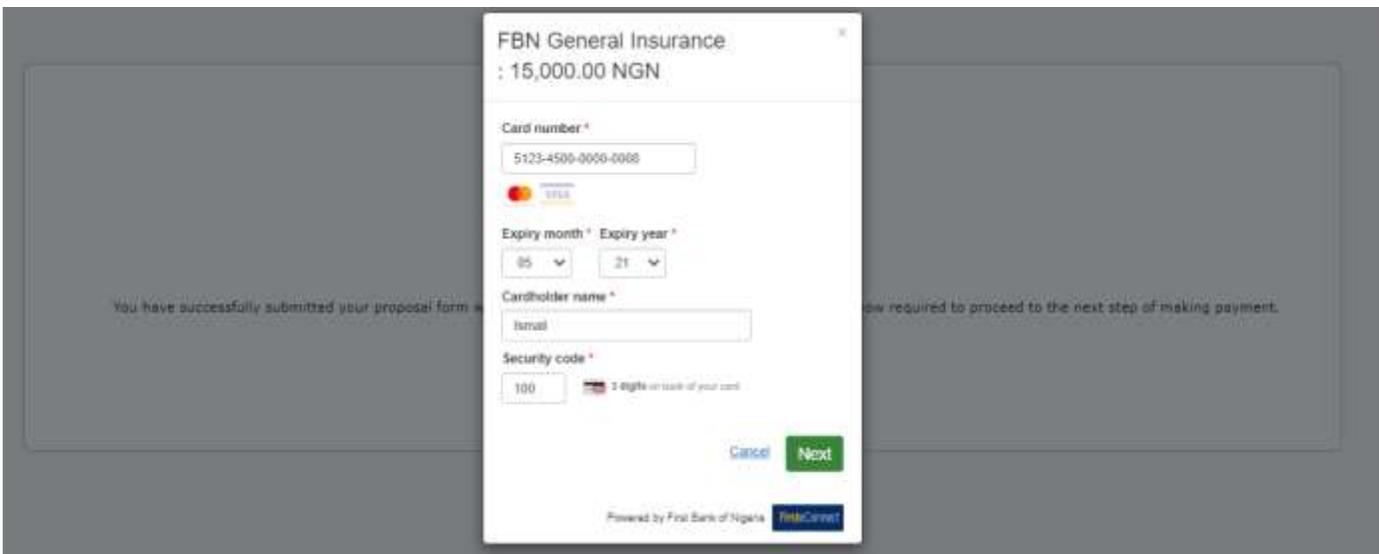


Figure 6.1.3

4. Follow steps below to make payment and generate certificate.



Document has been sent to [adabisi@niid.org](#)

Payment Successful !

You have successfully paid for this product

OrderID : PROP/20/WEB/AUTO/00001589
Status : 00
Amount : NGN 15000
Date : 2020-11-23
TransactionRef : 27842707419
PaymentRef : 49565000180
PaymentGateway : VISA/MasterCard
ResponseDescription : Approved Successful



[Print Receipt](#)

Finish



MOTOR VEHICLES (THIRD PARTY INSURANCE) ACT 1945 (NIGERIA)

eCERTIFICATE OF INSURANCE

W.A.X.1

Certificate Number

Policy Number: 11/P/WEB/AUTO/00001589/20/23

- 1 Vehicle Reg. Number **234ww** Make: **TOYOTA Toyota Camry**
- 2 Name of Policy Holder **Ismaila Attai Idakwoji**
- 3 Commencement Date **2020-11-23**
- 4 Expiry Date **2021-11-23**
- 5 Persons or Classes of persons entitled to drive
 - a. The Policy Holder:
The policy holder may also drive a Motor Car not belonging to him under a hire
 - b. Any person who is driving on the policy holder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive Motor Car or has been so permitted and is not disqualified by order of a court of law or by reasons of enactment or regulations in that behalf from driving such Motor Car.
- 6 Limitations to use
Use only for social, domestic and pleasure purposes and for the policy holder's business
The Policy does not cover for hire or reward for racing, pace-making, reliability trial, speed-testing or use for any purpose in connection with the Motor Trade.

AutoFlexi-Bronze

To confirm the authenticity of your Motor Insurance policy text Policy Number * Number Plate to 33125 e.g.
11/P/WEB/AUTO/00001589/20/23 * 234ww
Or visit www.niid.org

Limitations rendered inoperative by the provisions of the Motor Vehicle (Third Party Insurance) Act, 1945 (Nigeria).

I/WE HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Insurance) Ordinance 1945 (Nigeria).

W.A.X.1

6.2.1 Flexi Home: This has Four (4) variants; Flexi Home Bronze, Silver, Gold and Platinum. Follow the steps below to buy the product.

Steps:

1. Locate Retail Special on the product list and choose any of the four (4) variants of FlexiHome, as shown in Figure 6.2.1 below. Same processing procedure applies to all the four.
2. In Figure 6.2.1, click on the arrow (>) to view product details and click Buy Now to provide customer basic information and risk details.

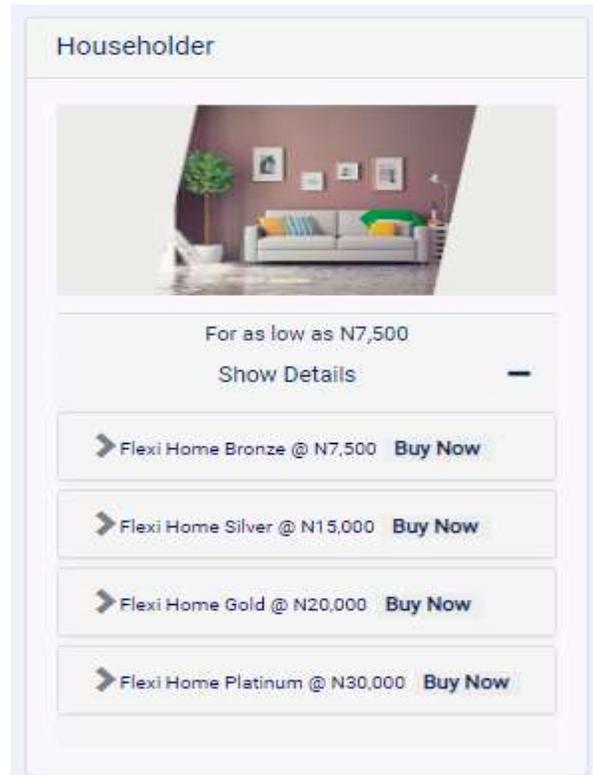


Figure 6.2.1

Customer Information

Email *

ismaildakwoji@yahoo.com

Phone

2348034518764

Surname *

Idakwoji

Other names *

Ismaila

Contact Address *

11, Bamgboye Street, Agiliti, Mile 12

Agent Id

SN011316@firstbanknigeria.com

RISK DETAILS (House Content | FlexiHome-Bronze)

The cover includes your household goods, fixtures, fittings and personal effects and the insurance is against loss or damage caused by fire, lighting, explosion and burglary etc. (full details are defined in the policy document/schedule.

Upload Supporting Documents

Document 1 (Item Schedule)*

fbnbroker_logo.png

Document 2 (Picture)*

fbnbroker_logo.png

Document 3 Means of Identification *

fbnbroker_logo.png

Document 4 Utility Bill *

fbnbroker_logo.png

I hereby declare that the above statements and particulars are true and correct, and I agree that this proposal and declaration shall be the basis of a contract of insurance between me and the company (FBN General Insurance) ; such contract to be expressed in the form of a policy (click here to read policy document). I am willing to accept a policy subject to the terms, exception and conditions prescribed by the company (FBN General Insurance) therein.

I also hereby affirm that in line with the [Nigeria Data Protection Regulation, 2019 \(NDPR\)](#) , I consent to the collection and processing of my personal data/information in line with the consent clause of the data protection regulation. [Click here to read the Consent Clause.](#)

check to confirm declaration above

check to confirm acceptance of policy terms, exceptions and conditions

* These fields are required.

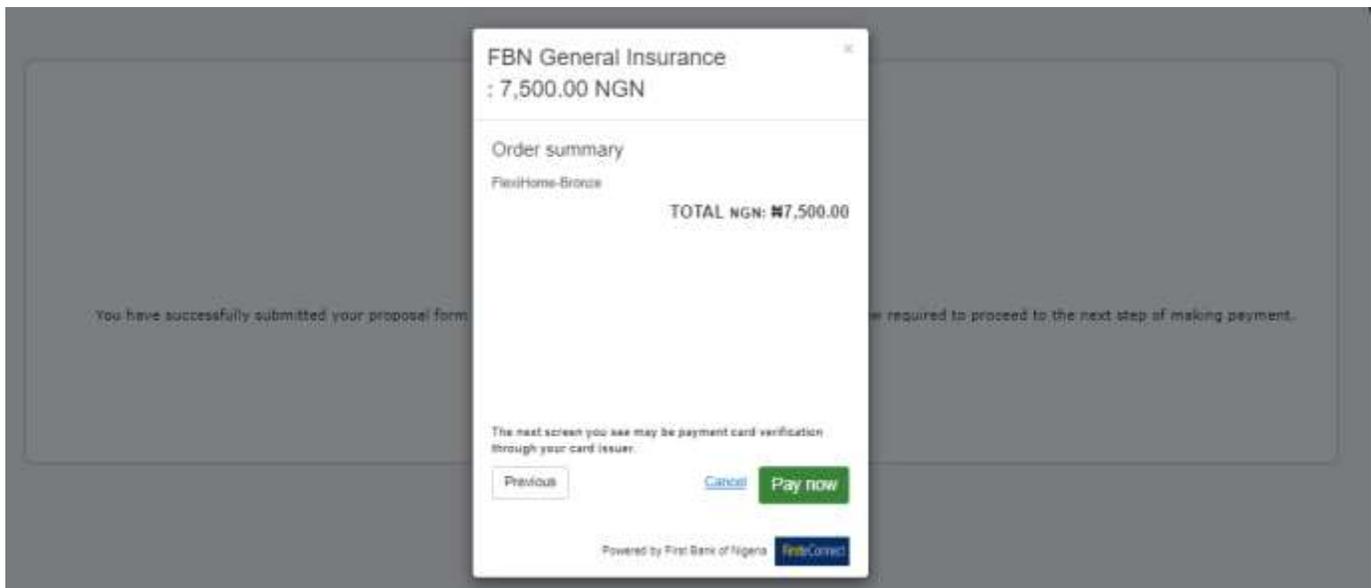
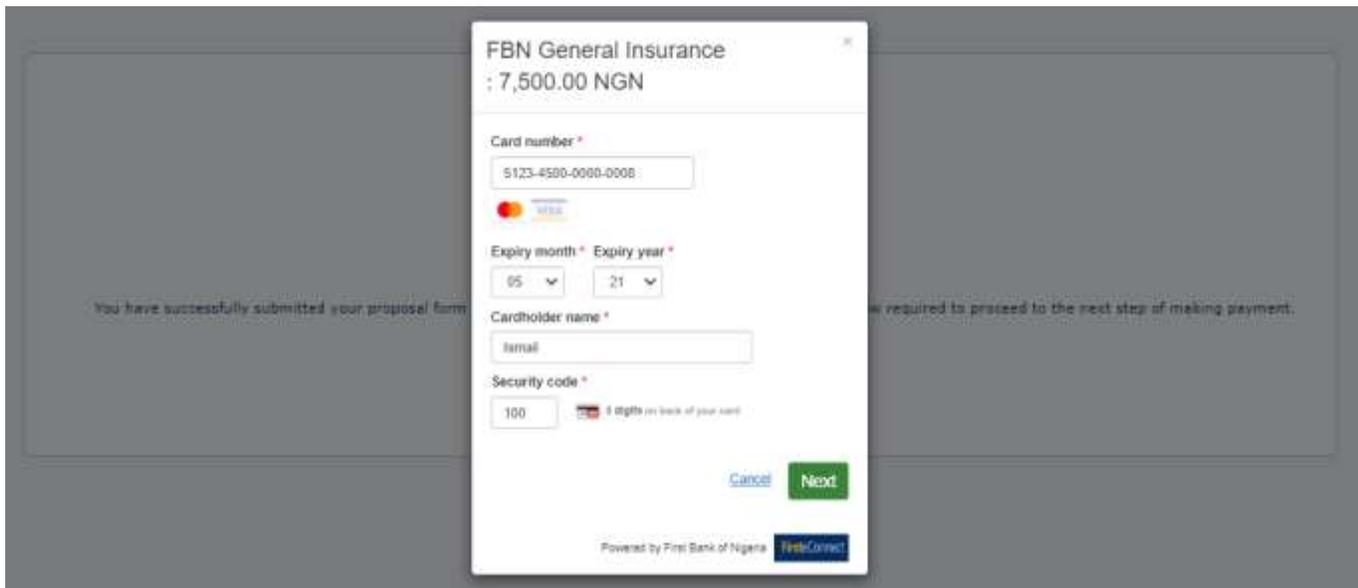
3. Click Submit Proposal.

4. And follow steps below to make payment and generate policy document.

Proposal Details Submitted



You have successfully submitted your proposal form with Id : **PROP/20/WEB/HH/00000167**. You are now required to proceed to the next step of making payment.



POLICY SCHEDULE

POLICY NO.: 11/P/WEB/HH/00000167/20/23
 THE INSURERS: FBN GENERAL INSURANCE LIMITED
 THE INSURED: Ismaila Attai Idakwoji
 ADDRESS: 11, Bangboye Street, Agiliti, Mile 12
 THE BUSINESS: HOUSE HOLDER
 PERIOD OF INSURANCE: FROM 2020-11-23 TO 2021-11-23
 EXCESS: 10% OF EACH LOSS

.FlexiHome-Bronze @ NGN 7,500.00

| House Holder | | |
|-----------------------|------------------|--------------|
| Cover | Limit | Premium |
| Insured Content Value | NGN 1,000,000.00 | NGN 7,500.00 |
| Period of Cover | 1 year | |
| Single article limit | NGN 50,000.00 | |

DETAILS

- Insured Content Value of NGN 1,000,000.00
- Period of Cover is 1 year
- Covers damage to contents from theft/burglary, natural disasters and fire. Furniture & furnishings, carpets and rugs; Electrical items; Home theatre equipment; Clothes, Jewelleries and shoes; Bedding, towels and other related items; Kitchen Utensils, Toys and sporting equipment.
- Single article limit of NGN 50,000.00 is applicable.

AUTHORISED SIGNATORY

Counter signed



MD/CEO

6.3.1 Flexi Guard: This has three (3) variants; Flexi Guard Silver, Gold and Platinum. Follow the steps below to buy the product.

Steps:

1. Locate Retail Special on the product list and choose any of the three (3) variant of FlexiGuard, as shown in Figure 6.3.1 below. Same processing procedure applies to all the three.

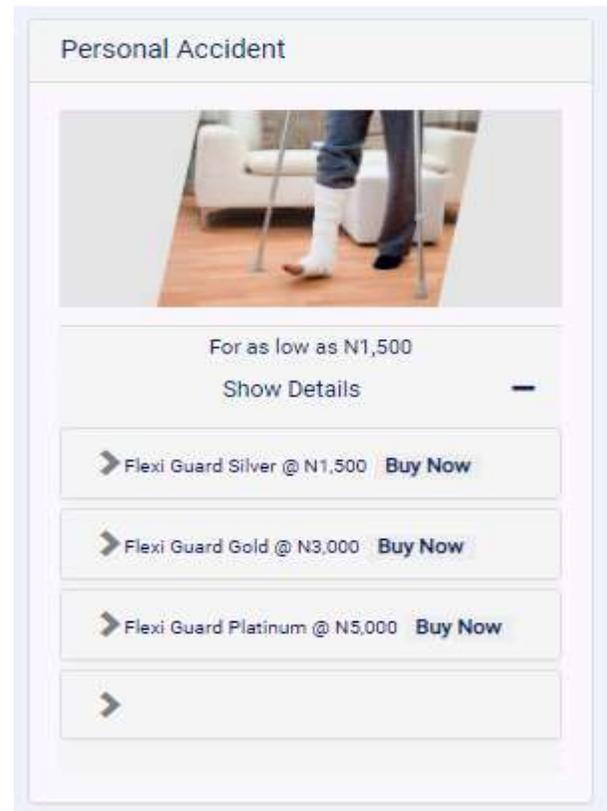


Figure 6.3.1

Customer Information

Email *

ismalidakwoji@yahoo.com

Phone

2348034518764

Surname *

Idakwoji

Other names *

Ismaila

Contact Address *

11, Bangboye Street, Agiliti, Mile 12

Agent Id

SN011316@firstbanknigeria.com

RISK DETAILS (Personal Accident | FlexiGuard-Silver)

Add Person

| SN | Name - Detail | |
|-------|------------------|-------------------------------|
| 1 | Idakwoji Ismaila | Remove |
| 2 | Haj | Remove |
| 2,850 | | Gross Premium (NGN) . 3,000 |
| | | Discount (NGN) . 150 |
| | | Net Premium Due (NGN) . 2,850 |

Upload Supporting Documents

Document 1 (Group Schedule)*

[Choose File](#) fbnbroker_logo.png

Document 2 (Picture)*

[Choose File](#) fbnbroker_logo.png

Document 3 Means of Identification *

[Choose File](#) fbnbroker_logo.png

Document 4 Utility Bill *

[Choose File](#) fbnbroker_logo.png

I hereby declare that the above statements and particulars are true and correct, and I agree that this proposal and declaration shall be the basis of a contract of insurance between me and the company (FBN General Insurance) ; such contract to be expressed in the form of a policy (click here to read policy document). I am willing to accept a policy subject to the terms, exception and conditions prescribed by the company (FBN General Insurance) therein.

I also hereby affirm that in line with the **Nigeria Data Protection Regulation, 2019 (NDPR)** , I consent to the collection and processing of my personal data/information in line with the consent clause of the data protection regulation. [Click here to read the Consent Clause.](#)

check to confirm declaration above

check to confirm acceptance of policy terms, exceptions and conditions

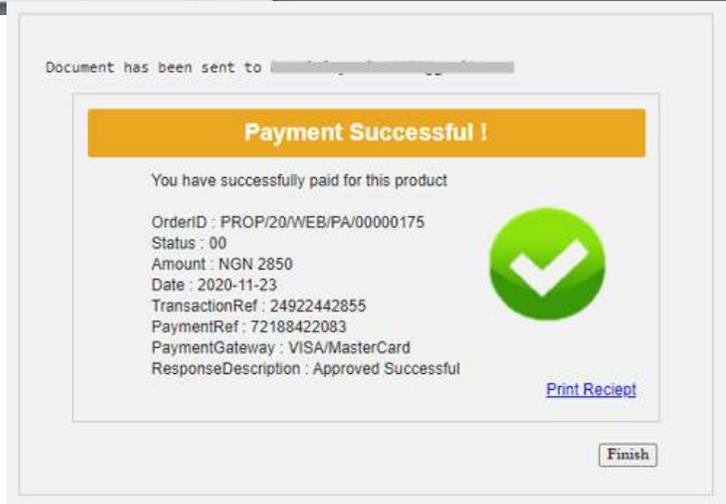
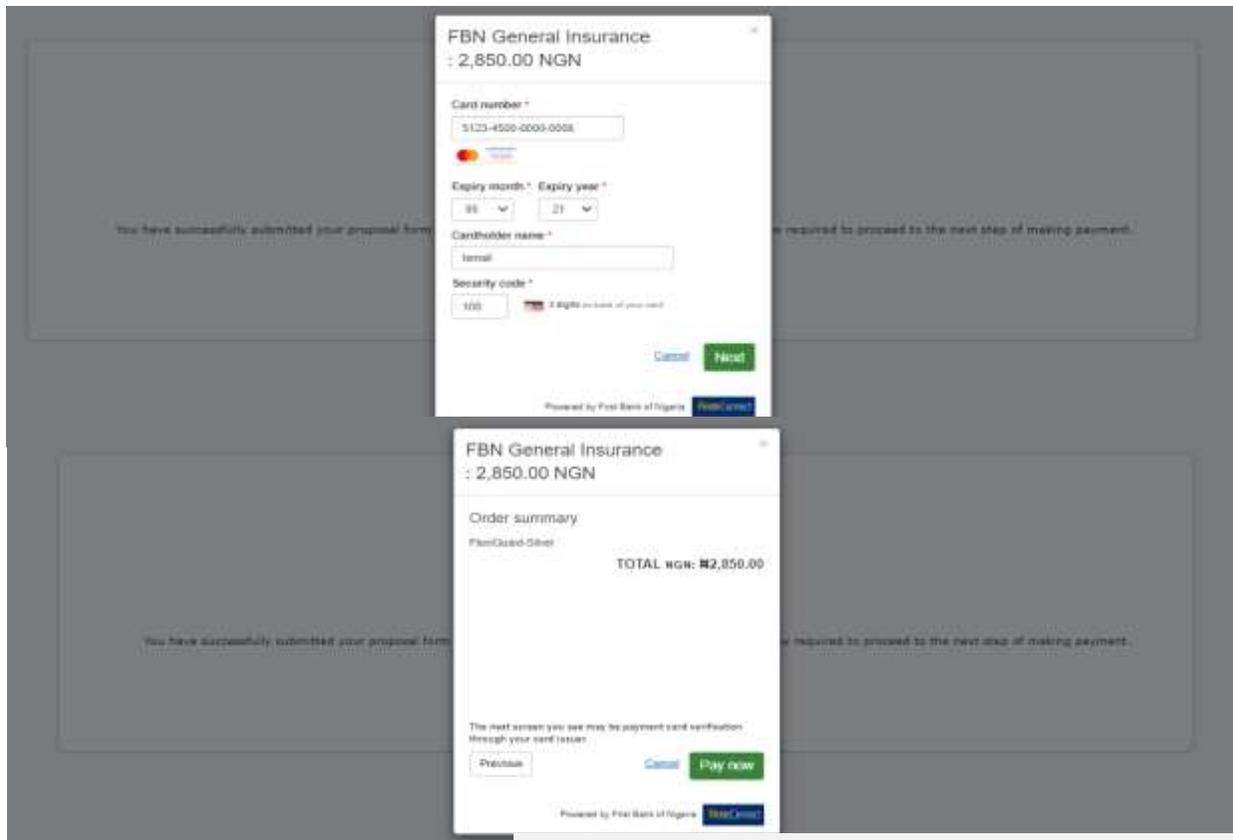
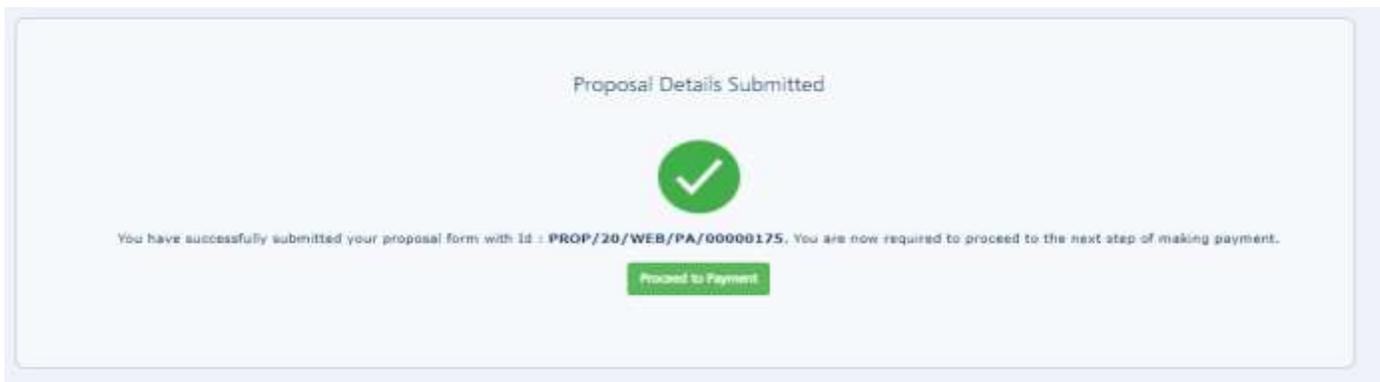
Reset

Submit Proposal

* These fields are required.

2. Click Submit Proposal.

3. Follow steps below to make payment and generate policy document.



POLICY SCHEDULE

POLICY NO.: 11.P\WEB\PA\00000175\20\23
 THE INSURERS: FBN GENERAL INSURANCE LIMITED
 THE INSURED: Ismaila Attai Idakwoji
 ADDRESS: 11, Bangboye Street, Agiliti, Mile 12
 THE BUSINESS: PERSONAL ACCIDENT
 PERIOD OF INSURANCE: FROM 2020-11-23 TO 2021-11-23
 EXCESS: 10% OF EACH LOSS

.FlexiGuard-Silver @ NGN 2,850.00

| Group Personal Accident | | |
|----------------------------|----------------|--------------|
| Cover | Limit | Premium |
| Death/Permanent Disability | NGN 500,000.00 | NGN 2,850.00 |
| Medical Expense | NGN 50,000.00 | |
| Burial Expense | NGN 50,000.00 | |

DETAILS

- The policy provides compensation in the event of injuries, disability or death caused solely by violent, accidental, external and visible events such as road accidents and domestic accidents. It will pay agreed benefits in the event of physical events or accidents resulting in the following:
- Bodily injuries to the Insured and/or member of the household;
- Permanent disability i.e. loss of limbs, eyes, toes, fingers et.c;
- Reimbursement of medical expenses incurred as a result of the incident up to the chosen limit;
- Death or Permanent Disability – *NGN 500,000.00*
- Medical Expenses – *NGN 50,000.00*
- Burial Expenses – *NGN 50,000.00*
- Strike, Riot and Civil Commotion extension;
- Disappearance extension;
- Motorcycling risks - whilst as a rider or a passenger;
- Wild animal attacks, dog bites extension;
- 24/7 coverage; Worldwide coverage;
- More than one unit can be purchased with accumulated benefits; 5% discount for 2-3 units and 10% discount for 4 units and above.

AUTHORISED SIGNATORY

Counter signed



Handwritten signature

MD/CEO

7.1 **Life Product:** the Life products on the platform include Family Shield, Family Shield Plus, Tuition Protection Plan and Group Life

Steps:

1. Select any of the life products, as shown in Figure 7.1 below.

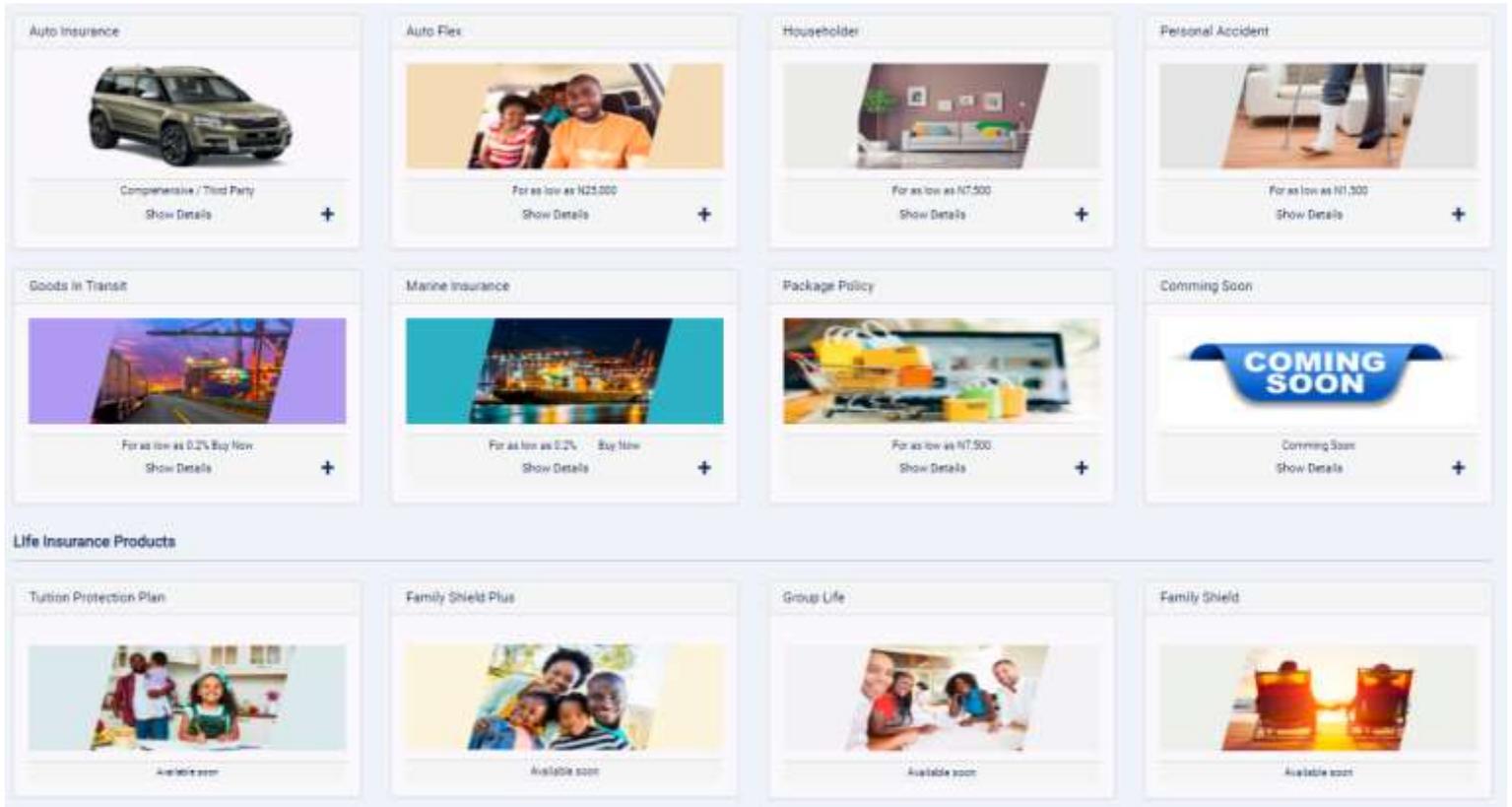


Figure 7.1

2. Preview product details, as shown in Figure 7.2 below.



Figure 7.2

3. Specify all premium parameters and click Continue to complete proposal form as shown in Figure 7.3 and 7.4 below

Insurance Brokers FBN

Pricing — Capture — Payment

FlexiEdu

Policy Premium

| | |
|----------------------|--------------|
| Date of Birth | Duration |
| 06/02/1998 | 5 |
| Premium | Sum Assured |
| 1000000 | 5,624,929.69 |
| Frequency of Payment | |
| Annually | |

Continue →

Figure

7.3

Insurance Brokers FBN

Life Insurance Plans Products

Pricing — Capture — Payment

Assured Details

Customer Data

| | |
|----------------|-----------------------------|
| Surname | Othernames |
| Benson | Giwa |
| Title | Email |
| Mr. | b.giwa@yahoo.com |
| Phone No. | Home Address |
| 08064536262 | Plot B3, Ibadan road, Lagos |
| Office Address | Nationality |
| | Nigeria |

Figure
7.4

4. Specify account number and token to debit customer, as shown in Figure 7.5 and 7.6 below

Benson Giwa
 Transaction No.: SAV00020BA
Premium Amount: 1,000,000.00

| # | Transaction Details | Amount (Naira) |
|--------------------|----------------------|---------------------|
| 1 | Premium for FlexiEdu | 1,000,000.00 |
| Balance Due | | 1,000,000.00 |

Payable Amount

Account Number

Token

Figure 7.5

| # | Transaction Details | Amount (Naira) |
|--------------------|----------------------|---------------------|
| 1 | Premium for FlexiEdu | 1,000,000.00 |
| Balance Due | | 1,000,000.00 |

Payable Amount

Account Number

Token

Figure 7.6

8.1.1 Agency Banking (Package Policy)

Step 1

Go to **Policy Portfolio** Section

The dashboard displays the following metrics:

- Customers: 11 YTD, 11 ITD
- Proposals: 1 YTD, 1 ITD
- Policies: 42 YTD, 43 ITD (highlighted with a red checkmark)
- Payment: N 311,225.00 YTD, N 311,225.00 ITD
- Payables: N 17,200.00 YTD, N 17,200.00 ITD
- Claims: 0
- Documents: 43 YTD, 43 ITD
- Activities: 0

Step 2

Locate the Expired Policy in question and Click on **Renew** Button

The Policies [Portfolio] window shows the following table:

| S/N | Proposal Number | Policy Number | Type | Cover Type | Date | Status | View Certificate | Renew Now |
|-----|--------------------------|-----------------------------|------|------------|------------|---------|------------------|-----------|
| 41 | PROP/18/WEB/PKGI/0004449 | 11/P/WEB/PKGI/0004449/18/14 | PKGI | A | 2018-11-14 | Expired | View Certificate | Renew Now |
| 42 | PROP/18/WEB/PKGI/0004450 | 11/P/WEB/PKGI/0004450/18/14 | PKGI | A | 2018-11-14 | Expired | View Certificate | Renew Now |

Showing 41 to 42 of 42 entries. Navigation: Previous 1 2 3 4 5 Next. Close button is present.

Or Go to **Transaction Section** and Search for the Policy via Policy Number in the Search Box

The Transactions window shows the following table:

| S/N | Proposal Number | Policy Number | Type | Cover Type | Date | Status | View Certificate | Renew Now | Report Claim |
|-----|--------------------------|-----------------------------|------|------------|------------|---------|------------------|-----------|--------------|
| 41 | PROP/18/WEB/PKGI/0004449 | 11/P/WEB/PKGI/0004449/18/14 | PKGI | A | 2018-11-14 | Expired | View Certificate | Renew Now | Report Claim |
| 42 | PROP/18/WEB/PKGI/0004450 | 11/P/WEB/PKGI/0004450/18/14 | PKGI | A | 2018-11-14 | Expired | View Certificate | Renew Now | Report Claim |

Showing 41 to 42 of 42 entries. Navigation: Previous 1 5 6 7 9 Next. Buttons: View Product List, EXPORT PDF, EXPORT XL.

| Date | Status | | Permissions |
|------------|---------|------------------|-------------|
| 2018-11-14 | Expired | View Certificate | Renew Now |
| 2018-11-14 | Expired | View Certificate | Renew Now |

STEP 3

On the Policy Renewal Screen, ensure you provide necessary info and option before submission.

NB: You are encouraged to review your cover to ensure you are adequately covered based on the appropriate cover as the case may be



Package Insurance (Agency Banking) - RENEWAL

Important Notice!

1 EZEKIEL G... AVENUE, O... G... PLAZA ANITA N... , M... KWU

Attention: NICHOLAS JEREMIAH

Dear Sir/Ma,

We consider it a great privilege to be your partner in success by providing protection to your business, through insurance services for the past one year.

In this regards, we wish to inform you that, your Insurance cover with policy number **11/P/WEB/PKGI/00004449/18/14** is due to expire on **2019-11-13**.

Currently, you are on **Various - A** cover, this provides a maximum protection of NGN 500,000.00, N100,000.00 and N250.00 for Money, POS and personal accident related risks respectively.

Henceforth, we would use this renewal opportunity to advise you to take the right cover that would adequately protect your business. Particularly, with reference to the volume of your cash transaction.

Kindly visit your bank branch for your renewal.

Should there be any need for further clarification **DO NOT** hesitate to contact us on the following telephone lines and email address. You can also contact us, on how you can make additional income from selling insurance for FBN General Insurance to your customers.

Phone Numbers: 01-9054817,01-9054820, 01-9054823
Email Address: fbngi_agency@fbninsurance.com

Once again thank you for your continuous patronage

Sincerely yours,

For: FBN General Insurance

Section A: Details of Firstmonie Agent (Proposer)

Please attach scanned copy of Supporting Document accordingly.

Policy Number **11/P/WEB/PKGI/00004449/18/14**
 Cover Type **Various - A**
 Cover Period **[2018-11-14 to 2019-11-13] [Expired]**
 Insured **NICHOLAS JEREMIAH [nicholasjeremiah8@gmail.com]**
 Location **51 EZENAGWU AVENUE,ODOGWU PLAZA AWKA NORTH,MGBAKWU**
 Risk Details

Section B: You have an opportunity to upgrade to an appropriate Bouquet, now. To do so, simply select a new preferred Bouquet by Clicking either of the 4 Options A to D.

N.B - Each Bouquet is valid for 12 months and Premium is renewable annually.

Option A : Total Premium Payable - **NGN 5,000.00 (Five Thousand Naira Only)**

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|----------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 500,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 2,500.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option B : Total Premium Payable - **NGN 7,500.00 (Seven Thousand, Five Hundred Naira Only)**

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|------------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 1,000,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 5,000.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option C : Total Premium Payable - **NGN 15,000.00 (Fifteen Thousand Naira Only)**

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|------------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 2,500,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 12,500.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Option D : Total Premium Payable - **NGN 27,500.00 (Twenty Seven Thousand, Five Hundred Naira Only)**

| Money | | Electronic Equipment | | Group Personal Accident | | |
|---------|------------------|----------------------|----------------|----------------------------|----------------|------------|
| Limit | NGN 5,000,000.00 | Value | NGN 100,000.00 | Cover | Limit | Premium |
| Premium | NGN 25,000.00 | Premium | NGN 2,000.00 | Death/Permanent Disability | NGN 250,000.00 | NGN 500.00 |
| | | | | Medical Expense | NGN 20,000.00 | |

Upload Supporting Document (1 MB Max) f_logo.png m-10

Declaration

I/We hereby declare that the above statements are complete and true, and I agree that this proposal and declaration shall be the basis of a contract of insurance between me and the company (FBN General Insurance) ; such contract to be expressed in the form of a policy ([click here to read policy document](#)). I am willing to accept a policy subject to the terms, exception and conditions prescribed by the company (FBN General Insurance) therein.

- check to confirm declaration above * Agent's Id **ismaila.a.idakwoji@fbninsurance.com/FIC00153**
- check to confirm acceptance of policy terms, exceptions and conditions *

Date **2020-11-24**

8.1.2 Others (Auto, Personal Accident, Householder Policy)

Repeat **Steps 1 through 3** after selecting from the list, the relevant Policy to be renewed (Motor or Personal Accident or Householder etc.)

8.1 Claims Process

Step 1

1. Go to **Transaction Section** and Search for the Policy via Policy Number in the Search Box. Then click on **Report Claim** button to open the claims screen.

The screenshot shows the 'Transactions' interface. At the top, there are search filters for 'Policy Type' (set to 'All Products'), 'From', and 'To' dates, with 'Filter' and 'Reset' buttons. Below this is a table with columns: 'Qty', 'Product Number', 'Policy Number', 'Type', 'Order Type', 'Date', 'Status', 'New Damage', 'Damage', and 'Report Claim'. The first row is highlighted, and a red checkmark is placed over the 'Report Claim' button in that row. The table shows 5 entries, with the first one being 'AUTO' type. Below the table, there are pagination controls showing 'Showing 1 to 5 of 42 entries' and buttons for 'View Product List', 'EXPORT PDF', and 'EXPORT XL'.

Step 2

- On the Claims Reporting Screen, ensure you provide necessary info before submission

The screenshot displays the 'Claims Reporting Screen' with three main sections: 'BASIC INFORMATION', 'INCIDENT INFORMATION', and 'SUPPORTING DOCUMENT'.
1. **BASIC INFORMATION:** Includes fields for 'Title' (a dropdown menu), 'Full Name' (text input), 'Policy Number' (text input), 'Location' (dropdown menu), 'Email' (text input), 'Phone Number' (text input), and 'Consent Address' (text area).
2. **INCIDENT INFORMATION:** Includes 'Nature of Incident' (dropdown menu), 'Incident Date' (text input), and 'Description of Incident' (text area).
3. **SUPPORTING DOCUMENT:** Includes five 'Choose File' buttons for uploading documents, labeled 'Document 1 (Photo of Damage - Top view)', 'Document 2 (Photo of Damage - Left view)', 'Document 3 (Photo of Damage - Right view)', 'Document 4 (Photo of Damage - Back view)', and 'Document 5 (Photo of Damage others)'.
At the bottom, there are 'Reset', 'Submit', and 'Close' buttons.