

**JUBILEE INSURANCE SITE VISIT FORM**  
**CONFIRMATION OF SECURITY GUARDING SITE VISIT**

Name of Tenderer/Buyer/Company.....

Date of Site Visit.....

Name, position and signature of the Tenderer's visiting staff

Name.....

Position.....

Signature..... Tenderer's Official Stamp.....

Site Visit conducted by Jubilee Life and Health Insurance Companies of Uganda  
Limited

Name.....

Designation.....

Signature.....