

## PROPOSAL FOR ELECTRONIC EQUIPMENT INSURANCE

<b>1.</b>	<b>Name and address of proposer</b> <b>E-Mail Address</b> <b>Type of business</b>  <b>Location of equipment to be insured, (address of building)</b>	<hr/> <hr/> <hr/> <hr/>															
	<b>Structure of building</b>	<input type="checkbox"/> steel skeleton <input type="checkbox"/> brickwork <input type="checkbox"/> concrete <input type="checkbox"/> wood															
<b>2.</b>	<b>Has any of the equipment to be insured previously been covered by other insurance companies?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No      If so, which item of the specification and by which companies? <hr/>															
	<b>State when the insurance is to commence</b>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Date</td> <td style="width: 33%; text-align: center;">Time</td> <td style="width: 34%; text-align: center;">Period of the insurance to expire at the same date and time next year</td> </tr> </table>	Date	Time	Period of the insurance to expire at the same date and time next year												
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<b>3.</b>	<b>Are all the equipment to be Insured new?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No      If so, which items of the specification are second-hand? <hr/>															
	<b>What equipment can still to obtained ex works?</b>	State items of the specification <hr/>															
<b>4.</b>	<b>Condition of equipment</b>	Is the equipment maintained in accordance with the Manufacturers' instructions? <input type="checkbox"/> Yes <input type="checkbox"/> No															
<b>5.</b>	<b>Quality of staff</b>	Have operators been trained with the manufacturer? <input type="checkbox"/> Yes <input type="checkbox"/> No															
<b>6.</b>	<b>Is there a high risk of flood and inundation?</b>	<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;"><input type="checkbox"/> Yes</td> <td style="width: 25%;"><input type="checkbox"/> No</td> <td style="width: 25%;">If so, by</td> <td style="width: 25%;"><input type="checkbox"/> bodies of water</td> <td style="width: 20%;"><input type="checkbox"/> torrential rainfall</td> </tr> <tr> <td colspan="5"><input type="checkbox"/> Sewer backflow      <input type="checkbox"/> other</td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If so, by	<input type="checkbox"/> bodies of water	<input type="checkbox"/> torrential rainfall	<input type="checkbox"/> Sewer backflow <input type="checkbox"/> other									
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<b>7.</b>	<b>Are dangerous materials used in the vicinity?</b>	<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;"><input type="checkbox"/> Yes</td> <td style="width: 25%;"><input type="checkbox"/> No</td> <td style="width: 25%;">If so, by</td> <td style="width: 25%;"><input type="checkbox"/> acids</td> <td style="width: 20%;"><input type="checkbox"/> prepared or sensitized papers</td> </tr> <tr> <td colspan="5"><input type="checkbox"/> Lyes      <input type="checkbox"/> test solutions      <input type="checkbox"/> developers      <input type="checkbox"/> explosives      <input type="checkbox"/> isotopes</td> </tr> <tr> <td colspan="5"><input type="checkbox"/> others</td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If so, by	<input type="checkbox"/> acids	<input type="checkbox"/> prepared or sensitized papers	<input type="checkbox"/> Lyes <input type="checkbox"/> test solutions <input type="checkbox"/> developers <input type="checkbox"/> explosives <input type="checkbox"/> isotopes					<input type="checkbox"/> others				
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**DECLARATION**

It is the duty of the proposer to disclose all material facts relevant to the risk. A material fact is one that is likely to influence our judgment and acceptance of your proposal. If your proposal is a renewal, it should include any change in facts previously advised to us. If you are in any doubt about facts considered material, disclose them. Please note that failure to disclose a material fact or if any information provided proves to be incorrect, we may void your policy and decline to pay any claim.

I/We declare that the statements and particulars made by me/us in this proposal are, to the best of my/our belief, complete and true and I/we agree that this proposal, together with any other information supplied by me/us, shall form the basis of the contract of insurance effected thereon.

I further declare and agree that if the statement and particulars above have been completed in the handwriting of any other person other than the undersigned, such person is deemed to be the representative of the proposer for the purpose of completing this proposal.

Signing this proposal form does not bind the proposer or underwriter to complete this insurance.

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Agent:** \_\_\_\_\_

## SPECIFICATION OF ITEMS TO BE INSURED - ELECTRONIC

Item No.	Description of items <sup>1</sup> Please give full and exact description of all equipment including name of manufacturer, type, serial number, voltage, Power input, etc. In the case of outdoor lines, indicate length And method of laying	Year of manufacture	Remarks Give particulars of any part of the equipment to be insured which has had a breakdown or failure during the last three years and shows and signs of repair. In the case of mobile equipment, state means and frequency of transport, areas of operation and distances Please state if picture or admitter tubes are built in	A <sup>2</sup> B <sup>2</sup>	Replacement value Please state current cost of replacing the equipment by new equipment of the same kind plus freight charges, customs duties, costs of erection package material

1. For the insurance of electronic data processing (EDP) equipment, an additional questionnaire for EDP equipment has to be completed  
 2. In the case of bought equipment, mark "A"  
 3. In the case of hired equipment, mark "B"

**Total:**

