

## PROPOSAL FOR PLANT AND MACHINERY ALL RISK INSURANCE

<b>1.</b>	<b>Name and address of proposer</b>	_____	
		_____	
	<b>E-Mail</b>	_____	
	<b>Occupation / Nature of Business</b>	_____	
<b>2.</b>	<b>Period of Insurance</b>	From:	_____
		To:	_____
		Geographical scope of cover:	_____
<b>3.</b>	<b>Has there been any previous Insurance?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, for which item(s) of the specification and by which insurance Companies?
			_____
			_____
<b>4.</b>	<b>Have the plant and machinery to be insured (partly or in total) been hired?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, please specify the owner's name and address
			_____
			_____
<b>5.</b>	<b>Are the plant and machinery highly exposed to special hazards?</b>	<input type="checkbox"/> Fire, explosion	<input type="checkbox"/> Earthquake, volcanic activity, tsunami
		<input type="checkbox"/> Storm, cyclone	<input type="checkbox"/> Flood, inundation
		<input type="checkbox"/> Landslide	<input type="checkbox"/> Blasting
		<input type="checkbox"/> Employment in mountainous terrain	<input type="checkbox"/> Employment underground
		<input type="checkbox"/> Other	
<b>6.</b>	<b>Do you wish the cover to include extra charges for</b>	overtime, night work, work on public holidays? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Limit of indemnity for such extra charges:	
		_____	
<b>7.</b>	<b>Do you wish the cover to include inland transport?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, please specify
		Maximum value transported by one means of transport:	
		_____	
<b>8.</b>	<b>Please give details of any Special extension of cover required</b>		
	_____		

## **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 PLANT AND MACHINERY TO BE INSURED

Item No.	Description of items (Please give full and exact description of all plant and machinery)			Year of manufacture	High exposure of special hazards (Please specify hazards of item 5 overleaf)	Replacement value Please state current cost of replacing the machinery by new machinery of the same kind and capacity (including oil in the case of transformers and switches) plus freight charges, customs duties, costs of erection.
	name of manufacturer	type and serial number	output			
						<b>Total sum insured:</b>