

PLANT MACHINERY AND EQUIPMENT PROPOSAL FORM

COVER PROVIDED

Loss of or damage to the Equipment insured by any accident or misfortune (subject to the Exclusions named in the policy and Schedule) occurring within the Territorial Limits stated in the Schedule.

ITEMS THAT CAN BE COVERED

- (a) Fixed and/or movable Plant, Machinery and Equipment
- (b) Construction Machinery and Equipment

Items must be insured for the cost of their replacement by new items of the same kind and capacity, which means their replacement costs including ordinary freight charges, custom duties and dues, erection / installation costs and cost to site.

If the Sum Insured is less than the cost of replacement, we will pay only in such proportion as the Sum Insured bears to the amount required to be insured.

The Insurance is subject to the more precise terms of the Policy a specimen of which can be obtained on application.

EACH OF THESE QUESTIONS MUST BE ANSWERED COMPLETELY

PLEASE
USE
BLOCK
LETTERS

Names of Proposer (s) / Company _____
Date of Birth (individual) _____ mm/dd/yy Marital Status (individual) _____
Profession/Occupation _____
Postal Address _____

Email _____
Telephone Nos. Home _____ Office _____ Cell _____

1. Do you have any policies in force with us? YES NO
If 'YES', please give details

2. Have you ever insured Plant Machinery and Equipment for ALL RISKS, FIRE,
BURGLARY or THEFT Insurance? YES NO
If 'YES', please state the names of all previous insurers

3. Have you or anyone with a financial interest in the items to be insured ever had an insurer:
(a) declined your proposal? YES NO
(b) increased your premium? YES NO
(c) increased your excess? YES NO
(d) refused to renew your policy? YES NO
(e) cancelled your policy? YES NO

If 'YES' to any of these, please state the reasons together with the name(s) of insurer(s) _____

4. Are you the sole owner of the Plant Machinery and Equipment to be insured? YES NO
If 'NO', please give name and address of any Mortgage, Lease or Interested Party Arrangements

5. Period of Insurance from _____ mm/dd/yy to _____ mm/dd/yy

6. Location of Plant Machinery and Equipment if different from postal address _____

7. How long have you been established in the Business?
(a) at your present location? _____ (b) elsewhere? _____

8. Is Plant Machinery and Equipment deployed at one site only? YES NO
 If 'YES', please state the exact location of contract site, name and type of project

9. Will any of the Plant Machinery and Equipment be deployed offshore? YES NO
 If 'YES', please give details

10. Do you require cover to apply:

(a) at the Premises only? YES NO
 (b) as per the Territorial Limits stated in the schedule? YES NO
 (c) anywhere in the Caribbean? YES NO

(If cover is to apply differently to some items please specify in the schedule of items which cover is to apply to which item)

11. Is additional cover required for:

		Limit Per Policy Period
(a) Extra charges for overtime work, night work, working on public holidays and express freight but excluding airfreight	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
(b) airfreight costs	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
(c) recovery costs (for equipment working underground or in or near water or equipment installed on barges and pontoons)	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____

12. Will the Plant Machinery and Equipment be hired out? YES NO
 If 'YES', please state:

(a) what liability for damage to the Plant Machinery and Equipment is placed on the person hiring it by the conditions of hire?

(b) whether the Plant Machinery and Equipment when hired out is operated by an employee of yours or by an employee of the person hiring it?

(c) experience of operators of the Plant Machinery and Equipment

13. Has any of your Plant Machinery and Equipment sustained any damage in the last three years? YES NO
 If 'YES', please give details

Year	Item	Cause of Damage	Cost

