



Proposal Form for Industrial All Risks Insurance Policy

Proposer's Details (To be filled in BLOCK CAPITALS)

- 1. Name of the Company:
2. Location of the Risk:
Flat Building
Road/Street/Sector
Area
City
State
Phone
Email
Zip Code
Country
Mobile
Fax

Table with columns: Sr. No., Block No. (Main, Communicating), Description of the risk, Class of the const., and Sum Insured in SR. (Bldg., Machinery, Furniture, Piping, Cabling, Stock & Stock-in-process, Stock in Godown, Material in open Gasholders/Tank Farms, Total Sum Insured)

3. Name of the Insured:

Table with columns: Location/Premises, Business, Sum Insured

N.B.: Detailed Schedule of the Property proposed for Insurance for each location/premises be submitted.

- 4. Voluntary Deductible proposed to be opted for:
a. Material Damage Claims - Section I -
b. Business Interruption Claims - Section II -

5. Premium Data
Please furnish details of Sum Insured and Premium paid location wise for the past 5 years (if available for 10 years).

6. Claims Data
Claims Data for each claim be furnished.

Authorised Signatory

Name of the Insured

Authorised Signatory

Name of the Insurance Co.

I/We the undersigned hereby declare that the above statements and particulars are true and complete and I/We declare and agree that this declaration and the answers given above shall be held to be promissory and shall be the basis of the contract between me/us and the company.

Place:

Date:

Signature of Proposer