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Sanima GIC Insurance Ltd.

OUESTIONNAIRE A	ND PROPOSAL FOR ELECTRONIC EQUIPMENT I	INSURANCE
Name and address of		
proposer		
Types of business		
Location of equipment to be insured (address o building, storey)		
Structure of building	Steel skeleton	wood
Has any of the equipment to be insured previously been	yes no if so, which items of the specification and by wh	ich companies.
covered by other insurance companies ?		
State when the insurance is		
to commerce:	Date: Time: Period of the insura the same date and the same date a	
3. Is all the equipment to be insured new ?	yes no if so, which items of the specification are s	second-hand ?
What equipment can still be obtained ex works?	State items of the specification	
4. Condition of equipment	Is the equipment in accordance with the manufacturers' instructions?	res 🗆 no
5. Quality of staff	Have operators been trained with the manufacturer?	res no
6. Is there a risk of flood and inundation?	yes no if so, by bodies of water	torrential train
mundation :	sewer backflow other	
7. Are dangerous materials	yes no if so, by acids prepared or se	nsitized papers
used in the vicinity?	☐ lyes ☐ test solution ☐ developers ☐ explosives	isotopes
	others	
complete and true, and we hereby as with the above risk(s). It is agreed	ents made by us in this Questionnaire and Proposal are, to the best of our know tree that this Questionnaire and Proposal forms the basis and is part of any policy isset that the Company reliable in accordance with the terms of the policy only and that ever nature. The Company undertakes to deal with this information in strict confidence.	sued in connection at the Insured will
Executed at	this day of	20

Signature

Speci	Specification of Item to be Insured				
Item No.	Description of Items: 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 any sings of repair. In the case of mobile equipment state means and frequency of transport, areas of operation and distance. Please state if picture or admitter tubes are built in.	A 2 B 3	Replacement value: Please states current cost of replacing the equipment by new equipment of the same kind plus freight charged, customs duties, costs oferection, package material.
- 2. %	For the Insurance of electronic data processing (EDP) equipment, an additional questionnaire for EDP equipment has to be completed. In the case of bought equipment, mark "A" In the case of hired equipment, mark "B"	g (EDP) equipmer mpleted.	ıt, an additional		Total: