

Alliance Insurance Corporation Limited



Registered & Head office: 7th Floor Exim Tower, Ghana Avenue, Dar Es Salaam, Tanzania, Tel No.: +255222139100

Covering Risks. Improving Lives

QUESTIONNAIRE AND PROPOSAL FOR MACHINERY INSURANCE

Scope of cover: A brief scope of cover is described at the end of this proposal. However a specimen copy of the relevant policy from and other terms applicate are available on request. We advise you to retain a copy of all the correspondence other than this proposal form with you. A copy of this proposal will be available on request once the insurance is concluded.

Please answer the following questions carefully.

Broker / Agent:

Policy Number:
(for office use only)

1. Name and address of Proposer -----
Address of plant -----
Nature of business -----
Name of chief engineer or plant manager -----
Nearest railway station/airport -----

2. Has any of the machinery to be insured previous been covered by other companies?-----
If so, which items of the specification and by what companies? -----
State when the insurance is to commence:- Date: Time:
Period of insurance to expire at the same time next year.

3. Do you wish to insure the foundations of the machinery? Yes----- No-----
If so please state the relevant items of the specification -----

4. Does the specification include all the machinery coverable under a Machinery policy?
Yes----- No-----
If not, does the machinery to be insured represent all the machinery coverable in one plant section?
Yes----- No

5. Do you wish the cover to include extra charges (in case of loss) for:
- express freight, overtime, night work, work on public holidays? Yes----- No -----
- airfreight? Yes----- No -----
Limit of indemnity for air freight: -----

6. Give details of any special extension of cover required -----

7. We hereby declare that the statements made by us in this Questionnaire and Proposal are, to the best of our knowledge and belief, complete and true, and we hereby agree that this Questionnaire and Proposal forms the basis and is part of any policy issued in connection with the above risk(s). It is agreed that the Insurers are liable in accordance with the terms of the policy only that the insured will not lodge any other claims not whatever nature. The Insurers undertake to deal with this information in strict confidence.

Executed at _____ this _____ day of _____ 19____

Signature

Alliance Insurance Corporation Limited



Registered & Head office: 7th Floor Exim Tower, Ghana Avenue, Dar Es Salaam, Tanzania. Tel No.: +255222139100

Covering Risks. Improving Lives

SPECIFICATION OR ITEMS TO BE INSURED

Item No.	Description of Items Please give full and exact description of all machines, including name of manufacturer type, output, capacity, speed, load, weight, voltage, amperage, cycles, fuel, pressure, temperature, etc	Year of Manufacturer	Remarks Give particulars of any part of the machinery to be insured which has had a breakdown or failure during the last three years, which shows any signs of repair, or which is exposed to any special risk.	Replacement value Please state current cost of replacing the machine 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 and also value of foundations. If the letter are to be insured.

Total

N.B. This Insurance will not be in force until the proposal has been accepted by the Corporation.