

Fire & Extended Perils application form



Section 1 Applicant details

1 Applicant's Full Name

2 Mailing Address

3 Telephone No.

4 Email

5 Fax

6 Nature of Business

Is the risk address the same as the mailing address?



If No, please provide the risk address below:

Section 2 Location details

7

Section 3 Technical details

Separate buildings must have a separate sum insured upon each, and if stock or effects are kept in two or more distinct buildings, the sum to be insured in each building must be specified.

If the premises consists of more than one building, a ground plan should be furnished and the various buildings marked 1, 2, 3, etc. These letters may be referred to in completing the proposal.

----- SUM INSURED -----

DESCRIPTION OF PROPERTY	BUILDING 1	BUILDING 2	BUILDING 3
1. BUILDING			
2. ON STOCK OF			
3. Goods in trust or on commission for which the Applicant is responsible			
4. FURNITURE, FIXTURE & FITTINGS			
5. MACHINERY AND EQUIPMENT			
6. ALL OTHER OFFICE CONTENTS			
7. 12 MONTHS RENT OF PREMISES			
NUMBER OF STORIES			
CONSTRUCTION OF EXTERNAL WALLS			
CONSTRUCTION OF ROOF			
OF WHAT IS THE FLOOR CONSTRUCTED			

HOW IS THE BUILDING OCCUPIED?			
WHEN WAS THE BUILDING CONSTRUCTED?			
ARE THERE ANY FIRE EXTINGUISHERS?			
ARE THERE ANY SMOKE DETECTORS?			
ARE THERE ANY 'NO-SMOKING' SIGNS?			

8 If Yes, to Fire Extinguishers, Smoke Detectors and/or No-Smoking Signs, please give details below:

9 Are there any other Fire fighting equipment or facility installed on the premises? If yes, give details below:

10 Do you occupy the entire building? If No, please give details of other occupants below:

11 Are there any buildings attached to or communicating with the premises proposed to be insured? If Yes, details

12 Are there any buildings within 20 feet of the premises proposed to be insured? If Yes, state construction and occupancy.

Section 4 Stock details

If Stock is to be insured, please provide the following information:

13 When was the last physical stock inventory taken?

14 How frequently is stock inventory taken?

15 Are the account books locked up in a fire-proof safe or removed to another building at all times when the premises are not open for business purposes?

16 Are hazardous goods kept in the building? If Yes, state details and quantity

Section 5 Loss details

17 Have you EVER sustained loss by Fire or ANY of the Perils that you are proposing to be insured? If Yes, give history

PERIOD	AMOUNT	CAUSE OF LOSS

Section 6 General Questions

18 Is the Property subject to a Mortgage Agreement? If Yes, state name of finance company

19 Has any insurer ever: CANCELLED your insurance?
REFUSED to renew your insurance?
DECLINED your request for insurance? If you answer Yes to any of these three questions,
please provide full details below:

20 How far is the premises from any large body of water?

21 How high is the premises from the high water mark?

Section 7 Cover and Deductibles

Cover Requested: Full Cover including Catastrophe Cover Fire & Perils Cover EXCLUDING Catastrophe
 Full Cover with Catastrophe Sublimit of _____ % of the Building(s) value(s) only.

I understand that if I choose a Catastrophe Sublimit, the Company's will only be liable up to the percentage sub-limit selected for loss from a Catastrophe Peril.

- a. _____% of the Total Sum Insured for loss from Catastrophe Perils of Hurricane, Windstorm, Tornado, Volcanic Eruption, Earthquake, Tsunami or Flood resulting from a Catastrophe Peril subject to a minimum of _____.
- b. 5% of the Total Sum Insured for loss due to Subsidence and Landslip.
- c. _____ Any Other Loss

Section 8 Declaration

I/we the undersigned desire to effect an Insurance with the Company in the terms of the Policy to be issued by the Company against Fire & Extended Perils as mentioned above, and hereby declare that the answers given to the above questions are true and that I/we have not suppressed, withheld or mis-stated any material fact or any information whatever, which might tend to influence the decision of the Company regarding the insurance. I/we undertake to exercise all reasonable precautions for the safety of the property to be insured and I/we agree that this proposal shall form the basis of the Contract between myself/ourselves and the Company.

Applicant's Signature

Date

Signing this application does not bind the Applicant or the Company to complete this Insurance.

FOR COMPANY USE ONLY

POLICY NO.

AGENT

UNDERWRITING NOTES: