

MACHINERY BREAKDOWN INSURANCE PROPOSAL FORM

1.	Name of the Proposer in full (IN BLOCK LETTERS)	
2.	Address for communication P.B. No. P.C. No. Location	
3.	Tel. No GSM Fax No. Email Id	
4.	Occupation / Trade / Profession / Business of the proposer	
5.	Location of the Plant to be covered House/Flat/ shop No. Building No. Way No. Location Wilayat Region / Governorate	
6.	Do the items listed represent the whole of the plant.	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Are you aware of any defects / damages existing in the machinery? If yes, please give details.	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Has your machinery sustained any damage from breakdown or other cause during last 3 years? If yes, please give details of damage(s) and repairing cost.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	Are regular periodical inspection of the machinery carried out? If yes, by whom and at what intervals?	<input type="checkbox"/> Yes <input type="checkbox"/> No





10.	On payment of additional premium do you wish to cover the following a. Escalation Amount / percentage b. Express Freight (excluding Air freight), Overtime and Holiday rates of Wages c. Air Freight d. Owners Surrounding Property e. Third Party Liability <ul style="list-style-type: none">• AOA• AOY f. Additional Customs Duty	<input type="checkbox"/> Yes	<input type="checkbox"/> No	OMR
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	OMR
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	OMR
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	OMR
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	OMR
		<input type="checkbox"/> Yes <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> No	OMR OMR
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	OMR
11.	Period of Insurance	From To		
12.	No. of items to be insured (As per Annexure)			
13.	Is the proposed property insured with any other Insurance Company with same type of coverage? If so, give details.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
14.	Has this insurance been <ul style="list-style-type: none">• Declined• Cancelled by other insurance company• Any Special Conditions imposed	Yes / No Yes / No Yes / No		

DECLARATION

I/ We understand and agree that the information disclosed in this proposal will form the basis of the insurance contract. I/ We also declare that the information and details mentioned in this proposal are correct to the best of my / our knowledge and if proven otherwise in any respect, the insurance contract will become null and void without any notice.

Place:
Date:

Signature of the Proposer





Notes:

1. If the space provided is insufficient for answers or for any supporting information, please use additional sheet(s) and attach.
2. It is helpful if a plan of the layout the area concerned is enclosed.
3. Complete details of permanent plant & equipment may please be submitted.
4. List of construction Plant & equipment with their values may also be attached.

SPECIFICATION OF ITEMS TO BE INSURED						
Item No.	Description	Serial No. / Identification No.	Maker's Name/ Year of Manufacture	Capacity of the Machines	Own Equipment or Hired	Replacement Value
	Total Value Insured					

THE LIABILITY OF THE COMPANY DOES NOT COMMENCE UNTIL THE COMPANY HAS ACCEPTED THIS PROPOSAL AND THE PREMIUM PAID

Notes:





- a. Each machinery should be entered separately with necessary specification as mentioned in the Schedule.
- b. The sum insured must be calculated on the present day new replacement value of the machinery to be insured including provision for packing, freight and also value of erection costs, customs duty etc., to afford protection under this policy.
- c. If any of the machinery is a 'stand by' this fact should be mentioned.
- d. All portable machinery must be designated. All items in the open must be described separately.
- e. Separate value for foundation masonry and brickwork or oil in transformers and other electrical equipments are to be specified if cover is required.

