



# askari general insurance co. ltd.

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## Questionnaire and Proposal for Electronic Equipment Insurance No

1. Name and address of proposer \_\_\_\_\_  
 \_\_\_\_\_  
 Type of business \_\_\_\_\_  
 Location of equipment to be insured (address of building, storey) \_\_\_\_\_  
 Structure of building  Steel Skeleton  brickwork  concrete  wood

2. Has any of the equipment to be insured previously been covered by other insurance companies?  Yes  No If so, which items of the specification and by which companies?  
 \_\_\_\_\_  
 State when the insurance is to commence \_\_\_\_\_  
 Date \_\_\_\_\_ Time: \_\_\_\_\_ Period of the insurance to expire at the same date and time next year.

3. Is all the equipment to be insured new?  Yes  No If not, which items of the specification are second-hand?  
 \_\_\_\_\_  
 What equipment can still be obtained ex works? \_\_\_\_\_  
 State items of the specification \_\_\_\_\_

4. Condition of equipment Is the equipment maintained in accordance with the manufacturers's instructions?  Yes  No

5. Quality of Staff Have operators been trained with the manufacturer?

6. Is there a risk of flood and inundation?  Yes  No If so, by  bodies of water  torrential rainfall  
 Sum insured  Sewer backflow  Other

7. Are dangerous materials used in the vicinity?  Yes  No If so, by  acids  prepared or sensitized papers  
 lyes  test solutions  developers  explosives  isotopes  
 others

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 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 and that the Insured will not lodge any other claims of whatever nature.

The Insurers undertake to deal with this information in strict confidence.

Executed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
Signature \_\_\_\_\_

## Specification of Items to be Insured

Item No	Description of Items	Year of manufacture	Remarks	A <sup>2</sup> B <sup>3</sup>	Replacement value
	<p>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.</p>		<p>Give particulars of any part of the equipment to be insured which has had a breakdown of failure during the last three years and shows any signs of repair, in the case of mobile equipment, state means and frequency of transport, areas of operation and distances. Please state if picture or admittance tubes are built in.</p>		<p>Please state current cost of replacing the equipment by new equipment of the same kind plus freight charges, customs duties, costs of erection, package material.</p>
<b>Total</b>					

- 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"