SolutionAllianz (II)

Bajaj Allianz General Insurance Company Limited

P - 0425 -

PROPOSAL FORM

ELECTRONIC EQUIPMENT INSURANCE

(The liability of the Company does not commence until this proposal has been accepted by the Company and premium paid). (Information given herein will be treated in strict confidence)

Age	nt																C	lien	t Co	de							
1.	a.	Name	e and	addı	ress	of p	rop	osei	r																		
	b.	Туре	ofbus	ines	s _						 	 	 										 		 		
		Tel. N	lo. :								 	 	 _	E	-ma	iil							 		 		
	b.	Locat	ion of	equ	ipm	ent	to b	e in	sure	ed _																	
		(addr	ess of	bui	lding	g sto	orey)																			
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PUT A 🗹 MARK WHEREVER APPLICABLE

All the questions to be answered completely. Incase of shortage of space kindly enclose the information as an annexure :

2	Has any of the equipment to be insured previously been	Yes No
	covered byother insurance companies?	
	a. if yes, which items of the specification and by which	
	companies	
	b. State when the insurance is to commence	
	Period of insurance to expire at midnight of previous	(dd/mm/yy) a.m./p.m.
	date of next year?	
3	Is all the equipment to be insured new?	Yes No
	a. If not, which items of the list are old?	

4.	Condition of aquinment	
4.	Condition of equipment	Yes No
	Is the equipment maintained in accordance with the	
	manufacturers Instructions?	
5.	Quality of staff	Yes No
	Have operators been trained with manufacturer?	
6.	Is there a risk of flood and indundation ?	Yes No
	if yes, specify	By bodies of water By sewer backflow
		By torrential rain Or by others
7.	Are dangerous materials used in the vicinity	Yes No
	If so specify acids prepared or sensitized papers	Acids Prepared or sensitized papers
		Dyes Test solutions Developers
		Explosives Isotopes Others
8.	Valid maintenance contract in force?	
	If yes, copy to be enclosed	Yes No
9.	Air conditioning plant	Pressurised Recommended by manufacturers
		not necessary

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 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 _____

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Signature

ELECTRONIC DATA PROCESSING (EDP)

BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED

Additional Questionnaire for the Insurance of Electronic Data Processing (EDP systems)

1. Name and address of proposer

b. Type of business _

PUT A MARK WHEREVER APPLICABLE

All the questions to be answered completely. Incase of shortage of space kindly enclose the information as an annexure :

2.	EDP System -	
	a. If the system is rented state monthly rent	Rs.
	b. Date of start of operation	dd/mm/yy
	c. Operational hours per day in shifts	
	d. Name and address of manufacturer	
	and/or lessor	
	e. What are the provisions of your lease contract	
	regarding your liability in the case of damage to	
	the EDP system ?	
	Please furnish copy of lease contract if available	
3.	Housing of the EDP System -	
	a. Central Unit -	Basement Ground floor Floor
	b. Peripheral Unit -	Basement Ground floor Floor
	c. Total value of plant located	In basement Rs.
		On ground floor Rs.
		On floor Rs.
	d. Is Installation in accord- ance with the	Yes No
	manufacturer's recommendations	
	If not, specify deviation has from instructions	
	e. Manner in which the EDP system has been	On vibration absorbers On rollers
	installed	By rigid anchoring Without anchoring
4.	Air-conditioning Plant	Prescribed
		Recommended by the manufacturer
		Used for EDP system only

a. Maintenance By the manufacturer By	/
b. Loss prevention	
c. Does the air conditioning plant automatically	No
shut off by limit switches, if the normal control	
facility fails? Moisture	
d. Is the air-conditioning plant also equipped with Yes	No
an independent signaling device in the case of Optical	Acoustic signal
disturbance or failure? Presence of corrosive gases	Excessive temp.
Moisture	
Are adequate loss prevention measures initiated Yes No	
immediately, even if the above protective devices are	
actuated outside operational hours	
5. External Data Media Mark those data media, which are stored	
Note - Please answer the following questions only, if specification' Mark data media stored in a	
insurance is desired with a 'B'	
a. Storage On wooden shelves	In steel cabinets
Together with EDP system	In fire-proof cabinets
b. Air-conditioning If not, how is air conditioning	
effected	
Risk aggravating circumstances as in the storage rooms Steam & water lines	Vibrations
Acid atmosphere	
6. Conditions (Excess) desired 2 times 5 times 10 times	times 20 times
7. A) Exclusion of Fire & Allied Perils as per Standard Fire Yes No	
& Special Perils Policy	

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Executed at

this day of

20 _____

Signature

INCEASED COST OF WORKING

BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED

Additional Questionnaire for the Insurance of Electronic Data Processing (EDP systems)

1. Name and address of proposer

b. Type of business ____

PUT A MARK WHEREVER APPLICABLE

All the questions to be answered completely. Incase of shortage of space kindly enclose the information as an annexure :

2.	EDP system to be insured -	
	a. Operational hours on average	Per day Per month
	b. Is it possible in the event of failure to utilize other	Yes No
	EDP system so as to obviate using an outside	
	system?	
	c. Are there any special agreement regarding	Yes No
	continued payment of the rent and other costs	
	if the EDP system fails ?	
	If so, please specify	
3.	Outside EDP system available for use -	
	a. Name and address of -	Owner -
		Lessee -
	b. Is the use of the outside EDP systems subject to	Yes No
	any special conditions (waiting periods,	
	conversion measures, etc.) ?	
	If so, please specify	
	c. Has the system already been used?	Yes No
	If so, how often?	

	d)	Causes	
		Max. duration	
		Max. cost incurred	
4.	Sums to	be insured -	
	a)	Rent of substitute equipments	Rs per hour
	b)	Indemnity period per occurrence	Rs weeks
	c)	Limit per occurrence (a x b)	Rs.
	d)	Aggregate indemnity limit during the period of	Rs.
		insurance	
	e)	Personnel expenses	Rs.
	f)	Transportation of material	Rs.
5.	Conditi	ons desired -	
	a)	Period of indemnity per occurrence (minimum)	Rs weeks
	b)	Time Excess	4 days (96 hrs) 7 days (168 hrs)
			14 days (336 hrs) 28 days (672 hrs)

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Executed at this day of	20
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Signature

The following is the copy of section 41 of the Insurance Act 1938 PROHIBITION OF REBATES

- 1. No person shall allow or offer to allow either directly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India any rebate of the whole or part of the commission payable or any rebate of the premium shown in the policy nor shall any person taking out or renewing or continuing a policy except such rebates as may be allowed in accordance with the published prospectus or tables of the insurer.
- 2. Any person making default in complying with the provision of this section shall be punishable with a fine, which may extend to five hundred rupees.