KERALA STATE INSURANCE DEPARTMENT, THIRUVANANTHAPURAM.

Questionnaire and Proposal for Electronic Equipment Insurance Policy

(The liability of the Department does not commence untill proposal has been accepted by the Department and premium paid)

PU	IT - A (3) MARK WHERE\	ER APPLICAB	LE							
1.	Name and address of Pro	pposer :								
	Type of business	:								
	Location of equipment to Insured (address of build									
	Structure of building	Steel skeleto	on 🗌	Brick	work	Concre	ete 🗌	Wood		
2.	Has any of equipment to insured previously been by other Insurance Comp	covered		res 🗌	No specific	•		ms of the ch Companies	?	
	State when the Insurance is to commence?		Date: Time :		Period of the Insurance to expire at the same date and time next					
3.	Is all the equipment to be insured new?	2	Yes		No			ns of the e second hand	?	
	What equipment can stil be obtained ex works?	l			State iter	ms of the	e specific	cation		
4.	Condition of equipment	Condition of equipment Is the equipment maintained in accordance with the Manufacturer's Instructions?								
5.	Quality of Staff			Operatores	rs been tra	ained wit	h manufa	acturer?		
6.	Is there a risk or flood and Inundation? Yes No If so, by Bodies of water Torrential rainfall Sewer backflow Other Yes No so specify Acids Prepared or sensitized papers.									
7.	Are dangerous materials			yes	Test	t solutio	าร	Developers	 S	
	used in the vicinity?			xplosives	s Sotop	pes	Othe	ers		
	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 that this Questi and Proposal for the basis and it of any Policy is connection with above risk (s)	onnaire orms s part ssued in	insurers accordant terms of only and red will n	ed that th are liable nce with th the policy that the in not lodge a nims of wh ure.	in to he inf / co nsu- any	e Insurer deal with ormation nfidence.	in strict		
Ex	ecuted at	tl	nis		(day of .		20		