



GA Insurance House, Ralph Bunche Road,
P O Box 42166 - 00100 Nairobi, Kenya.
Telephone: 2711633 Fax 2714542
E-mail: insure@gakenya.com

QUESTIONNAIRE AND PROPOSAL FOR MACHINERY INSURANCE

AGENT:	POLICY NO.
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FULL NAME

FULL ADDRESS:

TELEPHONE No.

AGENCY

PERIOD OF INSURANCE:	From:	To:
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1. Name and address of proposer

Address of plant _____

Nature of business _____

Name of chief engineer or plant manager _____

Nearest railway station/airport _____

2. Has any of the machinery to be insured previously been covered by other companies?

Yes No

If so, which items of the specification and by what companies

State when the insurance Date _____: Time _____:

Period of insurance to expire at is to commence the same date and time next year.

3. Do you wish to insure the foundations of the machinery?

Yes No

If so, please state the relevant items of the specification.

4. Does the specification include all the machinery coverable under a Machinery policy?

Yes No

If not, does the machinery to be insured represent all the machinery coverable in one plant section?

5. Do you wish the cover to express freight, overtime, night work, work on public holidays?

Yes No

Include extra charges (in case of loss) for air freight?

Yes No

Limit of indemnity for air freight:

6. Give details of any special extension of cover required.

Declaration

I/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.

Date. _____ **Signature of Proponent** _____

Specification of Items to be Insured

Item No	Description of items Please give full and exact description of all machines, including name of manufacturer, type, output, capacity, speed, load, weight, voltage, amperage, cycles, fuel, pressure, temperature, etc.	Year of manufacture	Remarks Give particulars of any part of the machinery to be insured which has had a break-down or failure during the last three years, which shows any signs of repair, or which is exposed to any special risk.	Replacement value Please state current cost of replacing the machine by new machinery of the same kind and capacity (including oil in the case of transformers and switches) plus freight charges, customs duties, costs of erection and also value of foundations, if the latter are to be insured.
				Total