

Proposal Form - Contractor's Plant & Machinery Insurance

GUIDELINES TO FILL THE FORM (Information given herein will be treated in strict confidence.)

1. Please fill the form in BLOCK LETTERS and leave on box blank between two words. All details marked with * are mandatory.
2. Please answer all the questions completely. If a particular question is not applicable to you and/or your business please mark that question as not applicable "N/A".
3. Please attach extra sheets wherever the space is insufficient to provide the additional underwriting information. Put a (√) mark wherever applicable.
4. 'You/Your' wherever used in this proposal means the "Proposer" considered for this insurance.
5. Kindly contact the Company's Office or Agent for any doubts or clarifications on the proposal form.

Note: The liability of the Company does not commence until this proposal has been accepted by the Company and the premium paid.

FOR OFFICE USE ONLY

Branch Code : _____
 Intermediary Code* : _____
 Intermediary Location Code : _____
 Intermediary Employee Code : _____
 Intermediary Reference Code : _____
 Sales Manager Code : _____

PROPOSER INFORMATION

Proposer's Name: | |

Proposer's Trade or Business:

Correspondence Address:

Block/Flat No.*: Floor No.: Building Name*:

Street Name*: Locality:

Landmark*:

City/Village*: Pincode*:

Post Office: PAN No.:

Mobile No.*: Landline*:

Email ID 1*:

Email ID 2:

Location of Operation (site of property to be insured): Address same as above: Yes No

If not, please provide below (If there are multiple risk locations, use extra sheet)

Block/Flat No.*: Floor No.: Building Name*:

Street Name*: Locality:

Landmark*:

City/Village*: Pincode*:

Post Office:

Mobile No.*: Landline*:

Nearest Railway Station and Distance:

Do the items listed represent the entire machinery used by you at the above location? Yes No

Are you at present Insured? Yes No

- If Yes, with whom?

Has any company

- Declined to insure any of the Machinery now proposed? Yes No
- Required an increased premium or imposed special conditions? Yes No

• Requested for repairs or made other special stipulations for risk improvement? Yes No

Are you aware of any defects/damages existing in the machinery? Yes No

If 'Yes', give details thereof

Do you own or use any equipment other than that described above working on the same site? Yes No

Is any of the equipment now proposed:

• Licensed for road use? Registration no. etc Yes No

• Covered by any other insurance? Yes No

If Yes, give details

Are you the owner of the proposed equipment? Yes No

If Yes, will you be hiring out? Yes No

If the equipment is hired;

• Is Insurance your responsibility? Yes No

• Is maintenance and operation your responsibility? Yes No

Are the premises where the equipment operates well guarded? Yes No

What is the site condition where the equipment will be utilized? Plain Hilly Terrain Quarries Offshore Others

Is the equipment likely to operate on reclaimed or soft ground?

Are the equipments likely to operate underground? Yes No

Are ground condition such that equipment is exposed to the risk of toppling over? Yes No If Yes, give details

Is the site susceptible to flood, sea damage, storm, cyclone or other natural calamities? Yes No

If Yes, give detail and safety precautions taken

Will equipment belonging to other contractors operate on the same site? Yes No

Do you have trained and qualified operators? Yes No Are there any statutory rules governing the appointment? Yes No

Which of the equipments are required to be inspected and certified for operation by statutory rules?

Has your machinery sustained any damage from breakdown or other cause during last 3 years? Yes No

If Yes, give details of damage/s and repairing cost

Is regular periodical inspection of the machinery carried out? Yes No If Yes, by whom and at what intervals?

On payment of additional premium do you wish to cover? If Yes, please select & provide limits of indemnity you wish to cover

	Select (✓)	₹
Express Freight (excluding Airfreight), overtime and Holiday rates of wages		
Air Freight		
Owners surrounding property		
Clearance & Removal of Debris		
Additional Custom Duty		
Escalation		

Third Party Liability

• For any one accident ₹

• For all accident during the period ₹

Do you require Earthquake Cover? Yes No

Do you require Terrorism Cover? Yes No

Dismantling of CPM equipments required? Yes No

Period of Insurance: From To

Do you wish to opt for higher excess? Yes No

If Yes, please choose from any of the following: 2 times the minimum excess 5 times the minimum excess

10 times the minimum excess 20 times the minimum excess

SCHEDULE OF MACHINERY TO BE INSURED

1.	2.	3.	4.	5.	6.
Sr. No.	Quantity	Description, Type, Model, Capacity of Machine/Serial No. HP/KVA Volts, AMPS, RPM	Maker's Name and Country of Origin	Year of Make	Sum Insured

GUIDE NOTES

- Each machinery should be entered separately with necessary specifications as mentioned in schedule column no. 3. Full description with identification no. etc. of each and every equipment with valuation should be declared.
- 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 foundations, erection costs, customs duty, etc., to afford full protection under the Policy.
- All Portable Machines must be so designated.
- All items in the open must be so described separately.
- Transit risks from site to site will be excluded.

DECLARATION

I/We, the undersigned hereby declare that the above statements and particulars are true and complete and I/We declare and agree that this declaration and answers given above shall be held to be promissory and shall be the basis of the contract between me/us and the Company.

I/We authorize L&T General Insurance Company Limited to share my/our contact information like name, company name, address, phone number and e-mail id etc. relating to me / us, with their affiliate/group companies and also for communicating any promotional marketing offers and other transactional / features / products / services of L&T General Insurance Company Limited and its affiliate group companies via SMS Telephone

Place:

Date:

Signature of Proposer

PROHIBITION OF REBATES – UNDER SECTION 41 OF INSURANCE ACT 1938

No person shall allow or offer to allow either directly or indirectly as inducement to any person to take out 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 on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer.

Any person making default in complying with the provision of this section shall be punishable with fine which may extend to ₹ 500/-

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