



protecting your future.

# Prabhu Insurance Limited

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## Questionnaire and Proposal For Contractor's Plant & Machinery Insurance

(a) Name and Address of proposer _____	
(b) Proposer's Trade of Business _____	
(c) Proposer's Postal Address _____	
(d) Location of Operation (site of property to be insured) _____	
1. Do the items listed represent the entire machinery listed by you at the above location	<input type="checkbox"/> yes <input type="checkbox"/> no
2. (a) Are you at Present Insured ?	<input type="checkbox"/> yes <input type="checkbox"/> no
(b) If so, with whom ?	
3. Has any Company	
(a) declined to insure any of the machinery now proposed	<input type="checkbox"/> yes <input type="checkbox"/> no
(b) required an increased premium or imposed special conditions ?	<input type="checkbox"/> yes <input type="checkbox"/> no
(c) requested for repairs or made other special stipulation for risk improvement ?	<input type="checkbox"/> yes <input type="checkbox"/> no
4. (a) Are you aware of any defect/damage existing in the machinery ?	<input type="checkbox"/> yes <input type="checkbox"/> no
(b) If so, give details there of	
5. Do you own or use any equipment other than that described above working on the same site ?	<input type="checkbox"/> yes <input type="checkbox"/> no
6. Is any of the equipment now proposed	
(a) licenced for road use ? If so, give details	
(b) Covered by any other insurance ? If so, give details	_____
7. (a) Are you the owner of the proposed equipment ? If yes, Will you be hiring out ?	_____
(b) If the equipment is hired	
(i) is insurance your responsibility ?	_____
(ii) is Maintenance and operation your responsibility ?	_____
8. Are the premises where the equipment operates well guarded ?	_____

9.	(a) What is the site condition where the Equipment will be utilised _____  (b) Are the equipments likely to operate on reclaimed or soft ground? _____  (c) Are ground conditions such that equipment are exposed to the risk of toppling over?  If so, give details. _____  (d) Is the site susceptible to flood, inundation, storm cyclone or other natural calamities?  If so, give details and safety precautions taken _____	
10.	Will equipment belonging to other contractors operate on the same site?	(R)
11.	Do you have trained and qualified operators? <span style="float: right;"><input type="checkbox"/> yes <input type="checkbox"/> no</span> Are there any statutory rules governing the appointment? <span style="float: right;"><input type="checkbox"/> yes <input type="checkbox"/> no</span>	
12.	Which of the equipments are required to be inspected and certified for operation by statutory rules? (If the space is insufficient please write on a separate sheet and attach hereto)	
13.	(a) Has your machinery sustained any damage from breakdown or other cause during last 3 years? <span style="float: right;"><input type="checkbox"/> yes <input type="checkbox"/> no</span> (b) If so, give details of damage and Repairing cost <span style="float: right;"><input type="checkbox"/> yes <input type="checkbox"/> no</span>	
14.	(a) Are regular periodical inspections of the machinery carried out? <span style="float: right;"><input type="checkbox"/> yes <input type="checkbox"/> no</span> (b) If so, whom and at what intervals?	
15.	On payment of additional premium do you wish to cover?  (a) Express freight (excluding airfreight) Overtime and holiday rates of wages (b) Owners Surrounding property (c) Clearance & removal of debris (d) Third party liability (i) for any accident (ii) for all accident during period	If Yes, provide of indemnity.  (a) Rs. <span style="float: right;"><input type="checkbox"/> no</span> (b) Rs. <span style="float: right;"><input type="checkbox"/> no</span> (c) Rs. <span style="float: right;"><input type="checkbox"/> no</span> (d) (i) Rs. (d) (ii) Rs.
16.	Period of Insurance	From _____ To _____

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

**GUIDE NOTES:**

- Each Machinery should be entered separately with necessary specification as mentioned in Schedule Column No. 3.
- 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 foundation, erections costs, customs, duty, etc. to afford full protection under this Policy.
- If any of the Machines is a 'Stand by' this fact should be mentioned.
- All portable Machines must be so designated. All items in the open must be so described separately.

We hereby declare that the statements made by us in this Proposal are to the best of our knowledge and belief, complete and true, and we hereby agree that this Proposal forms the basis and part of any policy insured in connection with the above risk(s). It is agreed that the Company is liable in accordance with the terms of the policy only and that the Insured will not lodge any other claims of whatever nature. The Company undertakes to deal with this information in strict confidence.

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