

Call (Toll free) - Number Website Address

ADVANCE LOSS OF PROFIT INSURANCE POLICY - PROPOSAL FORM

(The property proposed for insurance is not covered until the proposal is accepted by the company and premium paid in advance. Coverage is as per the terms and conditions of Liberty General Insurance Limited's Standard Policy Wordings)

COMPANY OFFICE DETAILS (To be filled by insurer)				
1. 2.	Office Code: Office Address: City District State Discrict Di	_		
IN	TERMEDIARY DETAILS			
1. 2. 3.	Agent/ Broker Name: DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD]		
PR	DPOSER DETAILS			
 2. 	Name Of Proposer: Address of proposer: Road City State Pin Code	 		
3.	Business of Proposer			
4.	Financial Interest A. D.]		
ΑI	VANCE LOSS OF PROFIT DETAILS			
1.	Description of Construction / Erection Works to be carried out Any existing plant or surrounding property in proposer's possession or care, custody or control on the above site (s) or adjacent to it (them). (Please attach the site layout plan)]] ne		
2.	The project is \Box The extension of existing work \Box a new venture			
3.	Loss or damage to plants or Parts thereof adjacent to site and still in operation arising out of the			
4.	erection activities is likely(and to be covered) to cause any loss of profits If yes, please fill in Machinery Loss of Profits Questionnaire A. Brief description of the process or services; making special mention of bottlenecks (please attach flow sheet.)			

The state of the s	Liberty		
CA.II	General Insurance		
	B. Has the method of production or services been employed by the proposer previously?		
	\Box Yes \Box No		
	C. If so, for how many years? \Box		
5.	Intended normal working hours		
	Per day		
	Per week		
	Per Year		
6.	A Anticipated Gross Profits (Annual turnover less cost of supplies of goods, raw material, electricity,		
0.	gas, etc.) for first year of operation month figures.		
	B If indemnity period required Longer than 12 months		
	i) Indemnity period required $\square \square$ in Months		
	ii) Gross profit of required period		
	C In the event that a specific date of completion is not Met, is any one-off loss likely to arise		
	\Box Yes \Box No		
	If so, please specify, Date $\square \square / \square $		
	Reason		
	D Are there seasonal events likely to affect the gross profit ? \square Yes \square No		
	If so, please give details		
7.	Desired Time excess		
8. Maximum Indemnity period required to be insured $\Box\Box$			
9.	Is the additional expenditure Caused by using external power supply to be insured?* \(\subseteq\) Yes		
	i) Power requirements of the plant(kW,kWh pa)		
	ii) Percentage of the requirements met by the Plant's own power generation equipment $\Box\Box\Box\Box$		
	iii) Costs of kWh of power drawn from \Box own plant \Box external plant		
	iv) To what extent (kW) may electricity be drawn from an external Source?		
	v) What is the maximum demand charge per kW and within which period is it due?		
	(Please attach copy of contact)		
	vi) Annual maximum demand charges		
	* Question is only in respect of power generation equipment at the plant to be insured supplying power		
	to this plant and is only to be answered if electricity can be drawn from the public power network in the		

Proposal Form

event of damage to the power generation equipment at the plant to be insured.



10.	Time related information				
	i) Date of inception of CAR/EAR cover $\Box\Box/\Box\Box/\Box\Box$				
	ii) Date of commencement of work $\Box\Box/\Box\Box/\Box\Box$				
	iii) Testing period From $\Box\Box/\Box\Box/\Box\Box$ To $\Box\Box/\Box\Box/\Box$				
	iv) Anticipated date of completion (handover following testing/ commissioning [//			
	v) Scheduled date of commencement of insured business	//			
	vi) At which date after completion of testing/commissioning is full production to	be reached?			
	I	//			
	vii) Is it possible to reduce that period? \Box Yes \Box	No			
	If so, by which means?				
	viii) What allowance exists for delays due to accidents or otherwise?				
	Please attach phase diagram of construction giving the phasing of the work (date of erection, testing, commissioning, handover) regarding all plant sections and major it				
		,			
11.	Details of any penalty agreements in connection with the contract works				
12.	Remarks				
PA	MENT DETAILS				
1.	PAN card number (10 character number):				
2.	Sources of funds: Please tick appropriate box Salary Business Investments Others (please specify)				
De	Declaration:				

- 1. I/we hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002.
- 2. I understand that the Company has the right to call for documents to establish sources of funds.
- 3. The insurance company has right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

DECLARATION BY INSURED



I/We hereby declare that the statements made by me / us in this Proposal Form and annexure if any are true to the best of my / our knowledge and belief and I/We hereby agree that this declaration shall form the basis of the contract between me/ us and the "Liberty General Insurance Limited'

If any additions or alterations are carried out in the risk proposed after the submission of this proposal form then the same should be conveyed to the insurers immediately.

Date:	
Place:	
	Signature of Proposer

Prohibition of Rebates (Section 41) of the Insurance Act

Recommendations of Officer/ Agent / Broker

No person shall or offer to allow either directly or indirectly as an inducement to any person to take out or renew of continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of 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 provisions of this section shall be punishable with fine, which may extend to Five Hundred Rupees.