

Call (Toll free) - Number Website Address

PROPOSAL FOR MACHINERY LOSS OF PROFIT INSURANCE POLICY

(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)

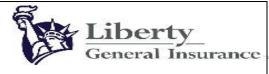
COMPANY OFFICE DETAILS (To be filled by insurer)		
1. Office Code: 2. Office Address: City District State Discrict Discri		
INTERMEDIARY DETAILS		
 Agent/ Broker Name: Agent/ Broker License Code: Agent/ Broker Contact Number: 		
PROPOSER DETAILS		
1. Name Of Proposer:		
 3. Business of Proposer 4. Paid up capital of the company 		
5. Financial Interest A. D.		
ADVANCE LOSS OF PROFIT DETAILS		
 Do you wish to cover the risk of Loss of Profits arising from A. Breakdown of Machinery in your premises If so, please complete schedule 'A' 	□Yes □No	
B. Explosion of Boiler and Pressure Plant in your premises If so, please complete schedule 'B'	□Yes □No	
2. Is the plant and Machinery specified in Schedules A & B insured against material dan	nage risk i.e.	
breakdown and/or explosion? If yes, please state	□Yes □No	
A. Name of Insurer		
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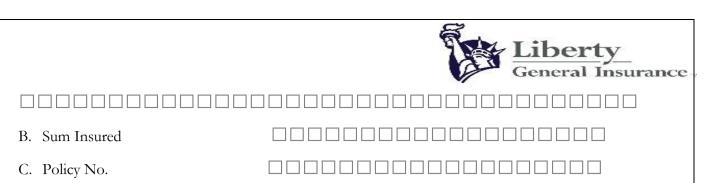
	B. Title of the Policy		
	C. Policy Nos.		
3.	D. Period(s) of Insurance From \(\subseteq \s		of the
	Machinery in the premises?	hole [□ Part
	B. Are all your Machineries subject to periodical inspection? If yes, state by whom and at what intervals inspections are carried out. Supply detail maintenance Schedule.	☐Yes s of your	□No
4.	Give description of the manufacturing process and utility supplies such as power, st required for production. Please attach a process flow diagram showing connected materials bottlenecks or buffer stocks if any. Please attach separate line diagram for utility supsteam, air and water showing interconnected machinery.	achinery a	nd indicate
_			
5.	In the event of stoppage of any of the machines proposed for insurance A. Can machines, which remain in operation, carry the load originally borne by the	machine,	which has
	failed?	□Yes	\square No
	B. Are there any alternative means of maintaining production by		
	i. the work being done at other premises?	\square Yes	\square No
	If yes, to what extent?		
	ii. hiring temporarily suitable replacement machine?	\Box Yes	\square No
	iii. by any other means?	\square Yes	\square No
6.	Are any of the machines described in the Schedules A & B de-rated?	\square Yes	\square No
7.	If yes please give details State repair facilities available in regard to machinery specified in Schedules A & B		
	A. In your own premises		
8.	B. Any other nearest place Which machines proposed under this insurance are the machines for which spare parts.	arts would	need to be
9. 10.	imported?	on, on acco	ount of
-0.	Ino per day		



	□ □ days per week □ □ da	ays per year	• -
11.	B. Can extra shifts be worked to make up production loss? A. Have you ever suffered Loss of Profit following Machinery Breakdown and/or I		
	B. If yes, give details of the cause, duration and loss suffered in each stoppage, during	\square Yes ng the last t	□No three
	years.		
12.	If the business is 'Seasonal' indicate the period of high and low output or turnover a degree of fluctuation. State if there is a tendency of fluctuations due to demands.	nd indicate	e the
13.	State what terms are required for Loss of Profits insurance with regard to		
	A. Indemnity period (max.12 months) Note - The Indemnity period should be selected based on an estimate of the Maxim would be required to resume normal production after a serious accident. Different selected for different items.		
14.	B. Time Exclusion (Min.7 working days)	,	ropriate –
	A. Interest on Debentures Motor Upkeep and Licenses:	\square Yes	\square No
	B. Mortgages, Loans and Lighting, Heating Power and Bank Overdrafts:	□Yes	\square No
	C. Water Charges	\square Yes	\square No
	D. Directors' Fees and Office Expenses:	\square Yes	\square No
	E. Remuneration	\square Yes	\square No
	F. Rents and Rates	\square Yes	\square No
	G. Salaries including State Insurance Contribution	\square Yes	\square No
	H. Taxes other than those chargeable on Profits	\square Yes	\square No
	I. Insurance Premiums	\square Yes	\square No
	J. Contributions to Pension Fund	\square Yes	\square No
	K. Telephone Rentals I. Miggellar gave Charges (not travelling expenses) expending 5% of the total errors	□Yes	
	L. Miscellaneous Charges (not travelling expenses) exceeding 5% of the total amou		
	Standing Charges.	□Yes	□No
	M. Traveling Expenses	□Yes	\Box No



	N. Advertising Cost	\square Yes	\square No
	O. Auditors' and Legal Fees	\square Yes	\square No
	P. Trade and Charitable Subscriptions	\square Yes	\square No
	Q. Repairs and renewals chargeable to revenue account	\square Yes	\square No
15	R. Depreciations of Buildings/ Machinery Plant and Motor Vehicles	□Yes	\square No
13.	5. State the Sum Insured on A. Gross Profit under the Loss of profits Policy (The Gross Profit for the current financial year to be computed from the last annual balance sheet being the Sum of net profit and Standing Charges with adjustment for upward or downward trend of business for the period of Insurance.)		
	Sum Insured Rs		
	Indemnity Period		
	i. \square weeks wages to the extent of \square \square % of the total wage roll Rs \square \square OR		
	ii. Wages to the extent of \square \square % of the total wages for roll \square Rs \square \square \square		
	 iii. Total wages for the first □□ weeks followed by □□ % for the Rs □□ remainder of the Indemnity Period C. On Auditors/Accountants Fees - (cost incurred in the preparation of claims.) 		
16.	Are your books regularly audited?	□Yes	\square No
	A. If so, give name and address of your Auditors		
	B. When does your financial year end?		
	C. Date of commencement of Insurance?		
17.	Are you insured or have you made a proposal in respect of loss of Profit following N	Aachinery	
	Breakdown and/or Boiler Explosion? If yes, give	□Yes	□No
	A. name of the Company concerned and state if renewal has been		
	B. declined	□Yes	\square No
	C. subjected to increased rates or special conditions	□Yes	\square No
18.	Are you insured against Loss of profit following Fire? If so, please state A. Name of the Insurer	□Yes	□No



PAYMENT DETAILS

1.	PAN card number (10 character	number):	
2.	Sources of funds: Please tick app	ropriate box	
	☐ Salary ☐ Business	☐ Investments	☐ Others (please specify)
			4 1 1

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

Recommendations of Officer/ Agent / Broker

Prohibition of Rebates (Section 41) of the Insurance Act

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

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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.