

## PROPOSAL FORM - ERECTION ALL RISK 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 Videocon General Insurance Company's Standard Policy Wordings)

### COMPANY OFFICE DETAILS (To be filled by insurer)

- |                    |  |          |  |
|--------------------|--|----------|--|
| 1. Office Code:    |  |          |  |
| 2. Office Address: |  |          |  |
| City               |  | District |  |
| State              |  | Pin Code |  |

### INTERMEDIARY DETAILS

- |                                  |  |  |  |
|----------------------------------|--|--|--|
| 1. Agent/ Broker Name:           |  |  |  |
| 2. Agent/ Broker License Code:   |  |  |  |
| 3. Agent/ Broker Contact Number: |  |  |  |

### PROPOSER DETAILS

- |                              |  |          |  |
|------------------------------|--|----------|--|
| 1. Name of Proposer:         |  |          |  |
| 2. Address of Proposer:      |  |          |  |
| Road                         |  | Area     |  |
| City                         |  | District |  |
| State                        |  | Pin Code |  |
| 3. Name of Contractor:       |  |          |  |
| 4. Address of Contractor:    |  |          |  |
| Road                         |  | Area     |  |
| City                         |  | District |  |
| State                        |  | Pin Code |  |
| 5. Name of Sub-Contractor:   |  |          |  |
| 6. Address of sub-Contractor |  |          |  |
| Road                         |  | Area     |  |
| City                         |  | District |  |
| State                        |  | Pin Code |  |

7. Insured's Interest       Principal       Contractor       Sub-Contractor

8. Contract Work

A. Type of Main Plant

B. Full description of the Plant & Machinery to be erected, including Capacity. (Please attach separate sheet, if necessary)

9. A. Is this a Contract/ Sub Contract forming part of an overall erection project  Yes  No

B. If yes, give names of the project.

C. Whether to be commissioned  Independently  With Main Plant

10. A. Have the Plans, Designs and Materials been already tested in any previous erection?  Yes  No

B. Is the installation or part thereof built for the first time  Yes  No

C. Are you  Independently  Importer  Buyer  Contractor

D. Is the Property  Brand New  Second Hand/ Used

E. If second hand, state the age (in months)

11. A. Will the erection be carried out by your own personnel?  Yes  No

B. If not, by whom?

C. Past experience of the Erector

12. A. Will any sub-contractors be taking part in the work of erection?  Yes  No

B. If yes, what is their position as regards this insurance?

13. Contract Site

A. Location of site where the Plant is to be erected?

B. Nearest Port &/or Railway Station and distance.

**Note** - A complete lay out of the Factory and Site may be enclosed.

14. A i) Are any special risks of floods, fire or explosion involved?  Yes  No

ii) If yes, give details

B. Distance from nearest river or sea - the names and particulars to be given.

C. Elevation of Erection Site above normal river or sea level.

D. Is there any record of the Erection site ever having been submerged during floods?  Yes  No

E. Do you wish to cover earthquake (fire & shock) for risks in Earthquake Zones I & II  
 Yes  No

### 15. Storage Arrangements

A. Brief description of the arrangements made for storage of equipments – whether in open or closed premises

B. i) Will there be a watchman on duty round the clock?  Yes  No

ii) If not, what precautions will be taken against theft, malicious damage etc.?

### 16. Insurance Period

A. Probable date of first shipment or dispatch

B. Expected date of **first** arrival at site.

C. Expected date of **last** arrival at site.

D. Probable date of commencement of erection of Plant & Machinery

E. Probable date on which erection of Plant & Machinery is expected to be completed finally.

F. Duration of testing period included in (g) below.  Months

G. Period of Insurance required including test run  Months From   
 To

### 17. Sum insured

A. On landed cost of imported machinery as at Factory Site - i.e. @ Exchange rate  (sub divided as under) Rs

i) Invoice Cost Rs

ii) Freight, Insurance, Handling, Clearing and Transportation charges up to factory site  
 Rs

iii) Customs Duty Rs

B On machinery fabricated or manufactured in India (sub divided as under)  
 Rs

i) Invoice Cost including insurance, handling and clearing and transporting up to factory site.  
 Rs

ii) Freight Rs

C Cost of Foundation relating to 17.A.1 & 17. A.2 above Rs

D On Cost of Erection, including salaries of all Foreign and Indian Technicians and wages of all skilled and unskilled labour employed at Factory Site during erection. Rs

E On Civil Works

i) Permanent Civil Engineering Works Rs

ii) Temporary Works Rs

Completely Erected Value Rs

F. Clearance and Removal of Debris Rs

G. Construction Plant and Machinery to be used at the Project Site. (Details as per attached list)  
 Rs

H. Insured's Own Surrounding Property

i) On increased replacement value (including duty on such additional replacement value) which may have to be paid on replacement of imported Plant and Machinery as per item 17.A.2 above.

Rs

ii) On increased replacement value which may have to be paid on replacement of indigenous Plant and Machinery as per item 17.A.2 above.

Rs

iii) Escalation on

i) on increased replacement value Rs

ii) on reconstruction of

a Permanent Civil Works Rs

b Temporary Works Rs

I Extra charges for Express Freight (excluding Air Freight) Overtime, Sunday and Holiday rates of Wages viz., Expediting Cost

J Additional Customs Duty Rs

K Air Freight Rs

L 1) Third Party Liability

i) For any one accident Rs

ii) For all accidents during the period Rs

Total Sum Insured Rs

2) Cross liability if required Rs

18. Do you wish to opt for higher amounts of deductible excess  Yes  No

If yes specify

19. A Have you approached any other Insurance Co. for Insurance Cover in respect of this Proposal?

Yes  No

B If yes, please state the name of the Insurance Co.

20. Has any such proposal been

A Declined

Yes  No

B Withdrawn

Yes  No

C Accepted subject to an increased rate or special conditions?

Yes  No

21. Do you require **MARINE/TRANSIT** Insurance cover

Yes  No

If yes, the following questions are to be answered

A Are there any fragile items like Refractory Materials, Asbestos Cement Sheets, Porcelain Materials, Glass Equipments, Fire Bricks, Graphite Electrode, etc.

Yes  No

B If yes, please give their value, description and mode of packing (whether packed in cases or loose)

22. A Do you want cement to be covered?

Yes  No

B If yes, give its value and mode of packing (whether packed in gunny bags or paper bags)

23. Please give particulars of voyage for imports.

24. What is the limit required

Per any one shipment? (In case of imports)

Per any one dispatch? (In case of indigenous materials)

25. Please state (for Inland Transit)

How the goods will be transported to site of erection?

How many Transshipments will be there?

Special hazards, if any, in transporting goods from nearest Station/Port to erection site.

26. Do you require War & S.R.C.C. Risk to be covered during Overseas/Inland Transits?

Yes  No

27. Do you wish to opt for excess under marine/transit losses

Yes  No

## PAYMENT DETAILS

1. PAN card number (10 character number):

2. Sources of funds: Please tick appropriate box

Salary  Business  Investments  Others ( Please Specify)

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 annexures 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 Videocon General Insurance Company 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 or 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.