## **DISCOVER INSURANCE**

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### FIRE AND PERILS INSURANCE PROPOSAL FORM

PERIOD OF INSURANCE: From	To
NAME OF THE PROPOSER:	
ADDRESS:	
TELEPHONE NUMBER: Home Office	
SITUATION OF PROPERTY:	
(If the Property to be insured is at more than one situation, please give sep respect of Buildings and Contents per Situation as here below)	arate amounts and descriptions in
DESCRIPTION OF PROPERTY PROPOSED FOR	INSURANCE

# DESCRIPTION OF PROPERTY PROPOSED FOR INSURANCE (Please fill where applicable)

DESCRIPTION	DETAILS OF PROPERTY & SITUATION	SUM INSURED
On the Buildings (including landlord's		
Fixtures, and Fittings)		
On Plant and Machinery (excluding		
landlord's Fixtures and Fittings) the		
Property of the Insured only held in the		
Building(s) described		
On Stock-In-Trade the Property of the		
Insured only held in the Building(s) described		
On Property held in trust or on commission		
for which the Insured is legally responsible		
only, held in the Building(s) described		
On Trade Fixtures and Fittings and Utensils		
the Property of the Insured		
ON RENT		
Payable/Receivable	<b>Number of Months</b>	
Delete type of rent not to be insured	Monthly rent	
On Building(s), Walls, Gates and Fences		
around and pertaining to the aforesaid		
Situations		
On Property in the open, please give full		
description of type and location		
On any other Property, give full details		
	TOTAL SUM INSURED	

## CONSTRUCTION OF SITUATIONS PROPOSED

TYPE OF CONSTRUCTION	BUILDING 1	BUILDING 2	BUILDING 3	BUILDING 4
WALL				
ROOFS				
FLOORS				
HEIGHT IN STOREYS				
NATURE OF POWER SUPPLY				
USE OF PREMISES: Office, Factory, Shop, Warehouse etc				

# SCOPE OF COVER REQUIRED (Please tick cover required)

EXPLOSION	EARTHQUAKE	RIOT &	MALICIOUS DAMAGE
		STRIKE	

### **SPECIAL PERILS**

Storm, Tempest, Flood and Bursting or	If this Extension is required, please indicate
Overflowing of water Tanks or Pipes	percentage of cover ie 50%, 75% or 100%
	liability

### DETAILS OF THE OCCUPANCY OF THE PREMISES

Are any mineral oils, spirits or any other goods of a	
hazardous nature stored on the premises by you or	
any tenant. If yes, give nature and quantity of goods	
stored	
Do you or any tenants carry on any process of	
manufacture or repair at the premises? If so, give	
details of process and by whom carried out	
If any power driven machinery is used on the	
premises by you or any tenants, give details	
Please give occupancy and construction of adjoining	
or adjacent property or use of land, situation within	
10 metres of your premises.	
If any part of the premises is occupied by tenants,	
give details of the occupants and their occupation	

### **DETAILS OF FIRE FIGHTING APPLIANCES INSTALLED (How many)**

Water Extinguishers	Smoke Detecting Equip.
CO2 Extinguishers	Fire Alarm System
Dry Power Extinguishers	Sprinkler System
Fire Blankets Horse Reels	<b>Details of Staff trained in Fire</b>
	fighting

#### **GENERAL INFORMATION**

Indicate how long you have carried out your business at	
the premises	
Indicate how long you have carried out your business at	
any other premises	
To what extent are the premises left unoccupied during	
the year?	
Are you the sole owners of the premises? If not, state	
owners	
If there is any other insurance on the property other	
than this proposal, give details of the Insurer and Policy	
number	
If there has been any previous loss or damage to your	
property due to any of the perils insured, give details of	
type of loss or damage	
Has any proposal, Policy or renewal in respect of Fire &	
allied Perils insurance been declined, cancelled, refused	
or increased terms applied. If yes, give details.	
Describe in full what your premises are used for	·
(retailing, wholesaling, manufacturing etc)	

#### **DECLARATION**

I/We the undersigned hereby declare that all the above statements and particulars are complete and true and that no material facts have been withheld and that this declaration shall be the basis of the Contract between me/us and the <u>DISCOVER INSURANCE COMPANY</u>, whose Policy subject to the Terms and Conditions thereof I/We am/are willing to accept and I/We undertake to pay the premium when called upon to so.

Date	Signature:
Agency:	•••••