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PROPOSAL AND QUESTIONNAIRE FOR CONTRACTORS' PLANT AND MACHINERY (CPM) INSURANCE

AGENT:	POLICY NO.
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FULL NAME

FULL ADDRESS:

TELEPHONE No.

AGENCY.....

PERIOD OF INSURANCE:	From:	To:
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2. Insurance
For Months
On annual basis
Years (specify period)

3. Has there been any previous CPM insurance

Yes No

If so, for which item(s) of the specification and by what companies?

4. Have the plant and machinery to be insured (partly or in total) been hired?

If so, please specify the owner's name and address

5. Are the plant and machinery highly exposed to these special hazards?

Fire, explosion Earthquake, volcanic activity, tsunami
Storm, cyclone Landslide Blasting Flood, inundation, Employment in mountainous
terrain Employment underground

Yes No

6. Do you wish the cover to include extra charges for Other Overtime, night work
work on public holidays Limit of Indemnity for such extra charges?

Yes No

7. Do you wish the cover to include inland transport?

Yes No

If so, please specify

Maximum value transported by one means of transport

Declaration:

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

Date. _____ Signature of Proponent _____

Specification of Plant and Machinery to be Insured

Description of items Please give full and exact description of all plant and machinery			Year of manufacture	High exposure to special hazards Please specify hazards of item 5 overleaf	Replacement Value Please state current cost of replacing the machine by new machinery of the same kind and capacity (including oil in the case of transformers and switches) plus freight charges, customs duties, costs of erection	
Name of manufacturer	Type and serial number	Output				
					Total Sum Insured	