

M & C General Insurance Company Ltd.

Head Office: 9-11 Bridge Street, P. O. Box 786, Castries
St. Lucia, W.I.

COMMERCIAL PROPERTY FIRE INSURANCE PROPOSAL

We provide insurance cover for your Buildings, Stock, Plant, Machinery and Equipment, Office Contents and other commercial property, against Fire and lightning and include on your request, additional perils such as Explosion, Earthquake, Hurricane, Riot and Strike, Malicious Damage, Flood, Impact, Aircraft and Burst Pipes.

In order to arrive at the sum to be insured, you should consider and note the following points:

(I) BASIS OF SETTLEMENT

INDEMNITY - The Sum Insured on all property proposed for insurance should be adequate to ensure that you are properly indemnified- You should take into account depreciation and wear and tear and in the case of stock, the Cost Price to you.

REINSTATEMENT - You may prefer to cover your property on a reinstatement basis, new for old, in which case the Sum Insured should be adequate to replace as new the property you elect to insure on this basis. Reinstatement conditions do not apply to Stock.

(2) **AVERAGE** - If the Sum Insured on any item of property at the time of the loss does not represent its correct value, the claim will be subject to the condition of Average. This condition applies only when a partial loss occurs and causes the claim to be settled in the same proportion as the Sum Insured is to the correct value that should have been insured.

IMPORTANT NOTES

- (1) In order to avoid unnecessary delays in settling claims, it is in your best interest to keep bills, receipts, invoices and adequate records so that you can easily substantiate your claim.
- (2) In the event of a claim you should notify us immediately.
- (3) Cover does not begin until the proposal has been accepted and the premium paid.
- (4) It is your duty to inform us of all facts which would affect our judgement in accepting this proposal. You should inform us if there are any significant changes which are likely to affect this insurance.

EACH OF THESE QUESTIONS MUST BE ANSWERED COMPLETELY

(Please use block, capitals and do not leave blanks or answer a question with a dash)

- (a) Full Name _____
- (b) Address of Property Insured _____
- (c) Postal Address _____
- (d) Telephone Numbers (h) _____ (w) _____ (c) _____ E-mail address _____
- (e) Business or Trade _____
- (f) Number of years in operation _____

2. Do you have other policies in force with us? YES NO
3. Have you or anyone with a financial interest in this property ever suffered a loss, whether insured or not, from any peril to be insured against at this or any other location? YES NO

If 'YES', please state:

- (a) Date of Loss _____ (b) Cause of Loss _____
- (c) Amount _____

4. Have you or anyone with a financial interest in the property to be insured ever had a Proposal or Policy - Refused, Declined, Cancelled or had Special Terms imposed? YES NO

If 'YES', please state the name of the company and the type of insurance. _____

5. (a) Do You keep proper books of account? YES NO
- (b) Are they available for inspection if necessary? YES NO
- (c) Please provide the name of your Auditors _____
6. (a) Did you make a trading gain during the last year? YES NO
- (b) Do you anticipate being able to meet all Charges, Debts and Liabilities against you? YES NO

If 'NO', please state fully _____

7. Have you or anyone having an interest in the property to be insured ever been convicted of any offense in connection with the ownership of property or the operation of a business? YES NO

8. Description of the Building:
- (a) Occupied by you as _____
- (b) How long have you occupied the building? _____
- (c) Occupied by others as _____

(d) When was it constructed? _____

(e) Number of storeys including the ground floor _____

(f) External Walls are Concrete Concrete or Clay Blocks Wood
..... Other (specify) _____ Mixed, give the proportion of each material

(g) Interior Walls are Concrete Concrete or Clay Blocks Wood
..... Other (specify) _____ Mixed, give the proportion of each material

(h) Roof is Galvanized Iron Concrete Asphalt Shingles Other
(specify) _____

..... Mixed, give the proportion of each material _____

(i) Floors are Concrete Wood Mixed, give the proportion of each material

(j) Are the premises protected by:-

(i) Any Fire Extinguishing appliances, e.g. Fire Extinguishers, Hose Reels etc? YES NO

If 'YES', please complete Section A

(ii) Security Guards or Watchmen? YES NO

if 'YES', please complete Section B

9. Particulars of Buildings within 20 feet, eave to eave:

(a) Occupied as _____

(b) Construction _____

(c) Number of storeys _____

10. If the building is to be insured, is any portion of the building

..... Vacant Unoccupied Seasonally unoccupied

If so, for how long? _____

11. Are there any existing insurances on any of the property to be insured? YES NO

If 'YES', please provide details _____

12. Give details of any Mortgage or other such interest _____

13. Please indicate against which perils additional cover is required:

..... Explosion Earthquake Hurricane Riot and Strike impact Flood

..... Aircraft Malicious Damage Burst Pipes Others, please state _____

14. Period of insurance, from _____ to _____ and any subsequent annual period

For which you shall pay, and we agree to accept a renewal premium.

PARTICULARS OF THE PROPERTY TO BE INSURED

Please tick the lines against the appropriate item if cover is required on a REINSTATEMENT basis.

- A. **BUILDING** including Landlord's Fixtures and Fittings and all Walls, Gates and Fences
 - B. **FURNITURE, FIXTURES and FITTINGS and OFFICE EQUIPMENT**
 - C. **PLANT, MACHINERY AND EQUIPMENT**
 - D. **STOCK IN TRADE** including Stock for which you are legally responsible
 - E. **OTHER PROPERTY** (Specify) _____

- TOTAL SUM INSURED

SUM INSURED

DECLARATION

I/We wish to effect an insurance with M & C General Insurance Co. Ltd. in terms of the Policy to be issued by the Company. I/We hereby declare that to the best of my/our knowledge and belief the statements and particulars given by me/us in this proposal are true and complete and no material fact, that is those facts which the Company would regard as likely to influence the acceptance and assessment of this proposal, has been misrepresented, misstated, suppressed or withheld. I/We agree that this proposal shall form the basis of the contract between me/us and M & C General Insurance Co. Ltd.

Date _____ Proposer's Signature _____
(Company Stamp)

FOR OFFICE USE ONLY

RATE	BRANCH _____
	PRODUCER _____ CODE _____
	AUTHORISED & CHECKED _____
	POLICY NO. _____

PREMIUM CALCULATION

ENDORSEMENTS