

## QUESTIONNAIRE AND PROPOSAL FOR LOSS OF PROFITS FOLLOWING MACHINERY BREAKDOWN INSURANCE

### SECTION 1 - PERSONAL DETAILS

- a. Full Name of Proposer
- b. Contact Details of Plant : (tel):  (fax):   
(mobile):  (web):   
(email):   
(postal):  (code):  (town/ city):

1. What works of your business are to be insured against Machinery Loss of profits ?  
( Names and address of the works, their purposes ? )

  
  

2. What Company insures these against :

Fire ?

Fire loss of Profits ?

3. What Company covers the machinery to be insured under a Machinery Break down policy ?

Name ?

Date of issue of policy ?

4. Has the Machinery to be insured been formerly covered by other companies against Machinery Loss of Profits ?

Yes  No If so What Company ?

5. What Chartered accountant ( Name and Address ) audits the accounting records and at what Intervals ?

  
  

6. When was your Firm established ?

7. Since when has the works to be insured existed ?

8. Since when has the present production method used in the works to be insured been applied ?

9. What interruptions due to a machinery loss have occurred in the works to be insured during the last 5 years ?

Number and Type(s)

Duration

Due to machinery of item No.





14. Normal working hours of the works to be insured

Per day .....	Hours in : .....	Shifts
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15. Are there any seasonal production or sales fluctuations of more than 20% in the works to be insured ?  Yes  No  
 If so, please indicate mothly figures :

16. Is there a stock of semi finished or finished products ?  Yes  No  
 If so , what period on interruption can be accomplished thereby?

17. Are there supplies furnished against letters of credit ?  Yes  No  
 If so, please indicate the percentage such supplies have in the turnover.

18. In the case of Machinery damage, is the interruption period longer than the repair period for the machinery involved?  Yes  No  
 If so, please indicate the cause and duration of such a delay.

19. Is the Insurance to cover only the additional expenditure caused by using an external electrical power supply in the case of breakdown of machines in your own powergenerating plant?  Yes  No  
 If so please indicate :

Item Numbers of the Machines to be insured here under	
Power requirements for the works (kW,kWh p.a )	
Percentage of power requirement met by factory generator	
Extend (kW, kWh p.a ) of current that may be drwan from external power sorces	
Cost per kWh of external power	
Factory generating costs saved per kWh if external power is used	
Please indicate the annual increased cost of electricity under question 23 ( item 2 )	
If Maximum demand charges are to be insured	
Maximum demand charge per kW of external power	
Method of calculation ( please enclose copy of electricity supply contract )	
Please indicate the annual maximum demand charge for external power to be insured under ques-tion 23 ( item 2 )	
Percentage of deductible desired for maximum demand charges (minimum deductible 10%)	

20. If business interruption is due to the failure of public supplies ( power, electricity , gas ) are to be included in the cover please fill separet questionannire.  
 21. If the risk of deterioration of goods ( raw materials, semi-finished or finished goods ) due to a business interruption is to be included in the cover , please fill separe questionbaire.

22. Calculation of Sum Insured.

The subject matter insured is the profit achieved by selling goods manufactured in the works insured and the profit gained from services rendered as well as all standing charges which accrue in the works insured in the event of a business interruption. The annual total of net profit and standing charges, the gross profit, is conveniently determined on the basis of the profit and Loss Account. The following calculation is based on the profit and loss Account of the year.

		Commencement of Year :	
		Currency :	
Deduction from turnover ( such as discounts granted to customers, rebates, price deductions )		Turn over	
Excise and Turnover taxes			
Expenditure incurred for external power, goods, raw materials and supplies total		Expenditure incurred for external power, goods, raw materials and supplies used for maintenance	
Other costs ( such as carriages paid to other firms, custom duties, postage, turnover-dependent insurance premiums, licences )		Company manufactured additions to assets	
Inventory value of finished and semi-finished goods at the commencement of the business year.			
TOTAL (a)		TOTAL (b)	
		Less : Total (a)	
		Gross Profit	
		Safety margin for increase during the policy year	
		Sum Insured	

If a separate indemnity period is desired for wages, please subdivide the sum accordingly and indicate the indemnity period desired for the item of wages under question 23.

23. Sum of the Insurance Covers desired.

Item No.	Subject matter to be insured	Sum Insured
1	Gross Profit	
2	Increased cost of electricity	
3	Maximum demand charges	
4		
5		

24. What time excess is desired ? ( minimum time excess 2 days ) :  2 Days  4 Days  7 Days  14 Days

25. When is the Insurance to commence : .....

The Insurers undertake to deal with the information supplied in strict confidence. The undersigned persons declare herewith that the statements made in the questionnaire are complete and to their best knowledge and belief and that they agree that this questionnaire forms the basis and part of the policy to be issued for the Insurance proposed.

Executed at : \_\_\_\_\_ Date : \_\_\_\_\_ Signature : \_\_\_\_\_