

**ELECTRONIC EQUIPMENT INSURANCE PROPOSAL FORM**

Intermediary Name: .....

Code: .....

Your VAT No: .....

NIC No / Business Reg. No: .....

1. Proposer's Name in full:

Contact No(s)

.....

Home: .....

.....

Office: .....

Mobile: .....

2. Postal Address: .....

Fax: .....

.....

E-mail: .....

3. Type of Business: .....

4. Location of equipment to be insured: .....

5. Structure of building: Steel Skeleton  Brick work  Wood  Concrete

6. Period of Insurance: From: ..... To: .....

**7. SECTION I – MATERIAL DAMAGE**

Specifications / Sum Insured of items to be insured

Description of item	Year of Make	Replacement Value	Serial Number

8. Has any of the equipment to be insured previously been covered by other insurance companies?

Yes  No

If yes, which items of the specification and by which company: .....

9. Is the equipment maintained in accordance with the manufacturers Instructions? Yes  No

10. Have operators been trained with manufacturer? Yes  No

11. Valid maintenance contract in force? (If yes, copy to be enclosed) Yes  No

12. Is there a risk of flood and inundation? Yes  No

If yes, please give details: .....

.....

13. Are dangerous materials used in the vicinity? Yes  No

If so specify, Acids  Prepared or sensitized papers  Isotopes  Dyes

Test solution  Developers  Explosives  Other

14. Do you wish to extend the Policy to cover: Riot and Strike Yes  No  Terrorism Yes  No

15. Air conditioning plant: Pressurized  Recommended by manufacturers  Not necessary

**SECTION II – ELECTRONIC DATA PROCESSING (OPTIONAL)**

1. Name and address of manufacturer and/or lessor: .....
2. Is the system? Purchased  leased   
If leased is the lessee of the system free of liability? Yes  No
3. What are the provisions of your lease contract regarding our liability in case of damage to the EDP System (Please furnish copy of lease contract if available): .....
4. Housing of the EDP System:
  - a. Central Unit - Basement  Ground floor  Floor
  - b. Peripheral Unit - Basement  Ground floor  Floor
5. **Sum Insured**
  - a) Data media (Type and quantity)  
.....  
..... Rs.....
  - b) Data media (Type and quantity)  
.....  
..... Rs.....

Total Rs.....
6. Is Installation in accordance with the manufacturer’s recommendations? Yes  No   
If not, specify deviation has from instructions: .....
7. Manner in which the EDP system has been installed: On vibration absorbers  On rollers   
Big rigid anchoring  Without anchoring

**SECTION III – INCREASED COST OF WORKING (OPTIONAL)**

Insured item	Limit of indemnity		Sum insured
	Per day	Per month	
Rental of substitute electronic Data processing equipment	Rs.....	Rs.....	Rs.....
Personal expenses	Rs.....	Rs.....	Rs.....
Expenses for transport materials	Rs.....	Rs.....	Rs.....

**Declaration**

I / We hereby confirm and agree that:

- (a) All information and particulars given are true and complete and that no information has been withheld which might influence the Company’s decision regarding this insurance.
- (b) This Proposal shall form the basis of contract with Allianz Insurance Lanka Limited.
- (c) Immediate notice shall be given to the Company of any alteration in the circumstances described herein.
- (d) No Insurance shall be in force until this proposal has been accepted by the company and the full premium paid.
- (e) The personal information provided in this proposal form could be used to provide me/us a service, any communication, for product development and for any promotions offered by Allianz.

**Data Privacy**

Please ensure to go through the Privacy Notice (i.e. which explains how and what type of personal data will be collected, why it is collected and to whom it is shared or disclosed etc.) which is available on the Allianz Insurance Lanka Limited/ Allianz Life Insurance Lanka Limited official website “www.allianz.lk> Home>Contact us” prior to signing of this form/ application/ document.

I/We hereby agree to receive via SMS and/or via e-mail to the mobile number and/or email address provided by me/us herein above respectively for any digital marketing purpose/s and communication of relevant information including special promotional offers of Allianz Insurance Lanka Limited/ Allianz Life Insurance Lanka Limited.

Please visit <https://www.allianz.lk/Home/Contact us/> to view Allianz Lanka Data Privacy Notice.

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Signature Designation Date