

**PROPOSAL FORM FOR CONSEQUENTIAL LOSS (FIRE) INSURANCE**

Broker/ Agent Name & Code	
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**Proposer Details**

1. a. Name of the Proposer				
b. Address of the Proposer		Plot No/Door No.		Building name
		Road		
		Area		
		City	Pincode	
		State		
		Phone No.		
		E-mail Id		
2	a) Situation of premises where proposer's trade or business is carried on and to which insurance is to apply (the various locations to be included should be described in details)			
	b) Nature of business carried on in each situation?			
	c) How long has the proposer carried on the business in these premises or elsewhere?			
3	Amount to be insured on:  a) Gross Profit i.e. Net trading profit and Standing Charges (Please specify the Standing Charges to be covered in detail)  b) Wages i. On weeks wages to all employees other than those whose wages are insured under item (a) above ii. On wages (dual basis): 100% for.....weeks and for the remainder of the indemnity period at.....%			

4	Are the proposer's books regularly audited? Give the name and address of the Auditors and enclose one copy of the latest audited accounts.	
5	Please give particulars of Sum Insured, period of insurance and premium of all Fire insurances (Material Damage) in respect of the premises now proposed for Consequential loss.	
6	State the basis of indemnity required:  a. Turnover basis or  b. Output basis or  c. Difference basis	
7	Does the proposer wish to include fees payable to Auditors for certifying particulars required in connection with claim? If so, state the amount.	
8	a) Is the proposer at present insured or has he been, in the past, insured for loss of profits, now proposed for insurance? If so, give details.  b) Has the proposer ever sustained any loss by Fire or other perils?  c) Has the proposer made any claim under Loss of profits policy?  d) Has any company i. Declined any proposal or cancelled any insurance?  ii. Required special terms or refused renewal thereof?	
9	Is cover required in respect of other perils like Earthquake, Forest fire, etc? Please specify perils for which cover is required.	



10	Does the proposer requires the following extensions? a. His property at other situations  b. Electricity, Gas works or water works.  c. Supplier's premises.  If so, give details.	
11	a. Period of Insurance	From  To
	b. Period for which indemnity is required	..... consecutive months following the damage

Declaration by Proposer

I/We hereby declare that the statements made by me / us in this Proposal Form are true to the best of my / our knowledge and belief and I / We hereby agree that this declaration shall form the basis of the contract between me / us and The Mediterranean and Gulf Cooperative Insurance & Reinsurance Company S.J.S.C.

Date

Place

Signature of Proposer