



HEAD OFFICE:

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**QUESTIONNAIRE & PROPOSAL FOR
MACHINERY BREAKDOWN TAKAFUL**

1. Name and address of proposer:	
Address of plant	
Nature of business	
Name of chief engineer or plant manager	
Nearest Railway station/ Airport	
2. Has any of the machinery to be participant previously been covered by other companies against breakdown?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If so, which items of the specification and by what companies?
State when the Takaful is to commence.	Date: _____ Time: _____ Period of Takaful to expire at the same date and time next year
3. Do you wish to insure the foundations of the machinery?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If so, please state the relevant items of the specification
4. Does the Specification include all the machinery coverable under Machinery Breakdown?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If not, does the machinery to be participant represent all the machinery coverable in one plant section? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you wish the cover to include extra charges(in case of loss) for:	Express freight, overtime, night work, work on public holidays? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Air Freight <input type="checkbox"/> Yes <input type="checkbox"/> No
	Limit of indemnity for air freight:
6. Give details of any special extension of cover required.	

We hereby declare that the statements made by us in this Questionnaire and Proposal are, to the best of our knowledge and belief, complete 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(s).
It is agreed that the insurers are liable in accordance with the terms of the policy only that the participant will not lodge any other claims of whatever nature.
The insurers undertake to deal with the information in strict confidence.

Executed:

Date: _____

Signature: _____

Specification of Items to be Participant

Item No.	Description of items Please give full and exact description of all machines, including name of manufacturer, type, output, capacity, speed, load, weight, voltage, amperage, cycles, fuel, pressure, temperature, etc	Year of manufacture	Remarks Give particulars of any part of the machinery to be participant which has had a breakdown or failure during the last three years, which shows any signs of repair or which is exposed to any special risk	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 and also value of foundations, if the later are to be participant
Total:				