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### QUESTIONNAIRE AND PROPOSAL FOR ELECTRONIC EQUIPMENT INSURANCE

No. \_\_\_\_\_

1. Name and address of Proposer :.....  
 .....  
 Address housing the Equipment:.....  
 Nature of business.....  
 Name of Chief Technician or Equipment Manager.....  
 Nearest railway station/airport.....

#### MATERIAL DAMAGE

2. Has any of the Equipment to be insured previously been Covered by other companies Yes  No

If so, which items of the specification and by what companies.....  
 .....  
 .....

|                                     |       |       |   |
|-------------------------------------|-------|-------|---|
| State when insurance is to commence | Date: | Time: | Period of insurance to expire at the same date and time next year |
|-------------------------------------|-------|-------|---|

3. Do you wish to insure the Accessories of the Equipment yes No

If so, please state the relevant items of the specification.....  
 .....

4. Does the specification include all the Equipment coverable under an Electronic policy Yes No

If not, does the Equipment to be insured represent all the Electronic Equipment coverable in one location? Yes No

5. Do you wish the cover to Include extra charge of express freight, overtime, night work, work on public holidays (in case of loss) ?  yes  no  
 air freight? yes  no

Limit of Indemnity for air freight

6. Give details of any special Extension of cover required  
 SUM INSURED FOR MATERIAL DAMAGE:

#### DATA MEDIA

7. How do you store your data/information?.....  
 8. On what do you store your data/information?.....  
 9. What do you do with the data/information you gather or store?.....

10. Does the Public have access to you data/information?.....
11. If so, do they pay to such data/information?.....
12. Do you have Data Back-up stored in Fire-proof Safe located elsewhere?.....
  - Value of Data Media Material: ¢
  - Value of information stored at Computer Centre: ¢

INCREASED COST OF WORKING

- Cost of renting/hiring alternate plant/equipment for use: ¢
- Expenditure for operating business at another location: ¢
- Additional Personnel Expenses: ¢
- Transportation of Data Media: ¢

TOTAL SUM INSURED: ¢

|   |   |  |   |
|---|---|--|---|
| We hereby declare that the to statements made by us in this information in Questionnaire and Proposal are, to the best of our knowledge and belief, | and hereby agree that this Questionnaire and Proposal forms the basis and is part of any policy issued in con- section with the above risk(s) | It is agreed that the Insurers are liable in accordance with the terms of the policy only and that the Insured will not lodge any other claims of whatever nature. | The Insurers undertake deal with this strict confidence |
|---|---|--|---|

Executed at \_\_\_\_\_ this day of \_\_\_\_\_ 20\_\_\_\_\_

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Signature.....