

Please ensure that all questions are answered fully and accurately and, where necessary, Schedules giving further explanation are provided.

Important Notice Concerning Disclosure: It is your duty to disclose all material facts to Underwriters. A material fact is one that is likely to influence an Underwriter's judgement and acceptance of your proposal. If your proposal is a renewal of an existing policy, it should also include any change in facts previously advised to Underwriters. If you are in any doubt as to whether or not facts are considered material, you should disclose them.

SECTION 1 DETAILS OF PROPOSAL

1. a. Name of Proposer: _____ Title: _____
b. Address: _____ Postal Code: _____
c. VAT No./TRN (where applicable): _____
d. Telephone No./Fax No.: _____
e. Email address: _____
f. Situation of Premises: _____
g. Trade or Business: _____

2. List of Equipment proposed: Please complete the Schedule in Section 3.

3. Is there a regular maintenance agreement in force? Yes No

4. Name and Address of the Maintenance Contractor:

5. Is the equipment owned or hired by the Proposer? Yes No

6. Give a brief general description of the building(s) housing the Equipment, e.g., single or multi-storey, type of roof and whether brick, concrete or other form of construction:

7. Give the precise location in the building of the Equipment, i.e., basement, ground or higher floor:

8. Describe the nature of the working environment in which the Equipment operates, e.g., laboratory, medical, studio, airport, communications:

9. a. If the Equipment is housed in the basement or on the ground floor, please indicate:

- i. if the equipment is exposed to water damage from rivers, streams or drains: Yes No
- ii. if the equipment is exposed to external impact risk: Yes No

b. If the Equipment is higher than the ground floor, please indicate the condition of the roof and gutters:

- Good Fair Poor

10. Wherever housed, is the Equipment exposed to water from radiators or other internal water-containing apparatus?
 Yes No If Yes, give details:

11. Is the ceiling area waterproof? Yes No

12. Is there any history of storm, flood, overflowing of external drains or of water-containing apparatus within the premises? Yes No If Yes, give details:

13. Describe briefly the security arrangements generally at the location and specifically for the Equipment itself:

14. Who is authorised to supervise and/or operate the equipment, what training is given and what experience is required?

15. Have there been any damage occurrences affecting the Equipment in the last four years? Yes No

If Yes, give details of damage, its cause and cost:

16. Is an automatic fire alarm system installed? Yes No

If Yes, does the alarm system automatically cut off the electrical power supply to the Equipment? Yes No

17. Is an air-conditioning system provided? Yes No If Yes:

a. is the system serving the Equipment area completely separate from the system serving the remainder of the premises? Yes No

b. are the ducts, etc., of incombustible material? Yes No

c. does the fire alarm system, if one is installed, automatically shut down the air- conditioning system? Yes No

18. Are portable extinguishers of carbon dioxide or other type provided? Yes No

19. Are the walls, floors and ceilings of the building housing the Equipment of incombustible construction, including linings? Yes No

20. Is the Equipment housed in a separate building? Yes No If No:

a. are all openings from the Equipment area protected by fire-proof doors? Yes No

b. is the ceiling of the Equipment area water-proof? Yes No

c. what is the nature of the occupation of the adjoining area? _____

21. Is the Equipment area sprinklered? Yes No
22. Is smoking permitted in the Equipment area? Yes No
23. Are waste bins with self-closing lids provided in the Equipment area? Yes No
If Yes, are these emptied regularly? Yes No
24. Is the electrical wiring associated with the Equipment regularly inspected and maintained? Yes No

SECTION 2 DECLARATION

NOTE: SIGNING THIS PROPOSAL DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE.

I/We declare that the statements and particulars in this Proposal are true and that no material facts have been mis-stated or suppressed after enquiry. I/We agree that this Proposal, together with any other information supplied shall form the basis of any contract of insurance effected thereon. I/We undertake to inform the Insurers of any material alteration to those facts occurring before the completion of the contract of insurance.

Data Protection Declaration:

By signing this form, I confirm/understand that:

- In order to administer the policy and plan CG United Insurance Ltd. may process any and all of the personal data provided.
- I consent to CG United Insurance Ltd. processing my personal data, in accordance with CG United Insurance Ltd.'s Privacy Policy (<https://international.cgcoralisle.com/privacy-policy/>). For additional information on your rights and how to exercise them, please access or request this Policy.
- I confirm that any personal data I provide to CG United Insurance Ltd. in respect of any third party, is done with that third party's consent and knowledge of CG United Insurance Ltd. processing of their personal data.
- I have the right for my personal data to be processed in accordance with the rights of Data Subjects under the relevant jurisdictional privacy legislation.
- I understand that this form shall be incorporated into and shall constitute a part of the policy contract between me/us and the Company.

Proposer Name (Please print) _____

Signature _____ Date _____

