



**The New India Assurance Company Limited**

Registered & Head Office : New India Assurance, 87, M.G. Road, Fort, Mumbai - 400 001.

**QUESTIONNAIRE AND PROPOSAL FOR  
ELECTRONIC EQUIPMENT INSURANCE POLICY**

1. Name and address of proposer \_\_\_\_\_

Type of business \_\_\_\_\_

Location of equipment to be insured \_\_\_\_\_

(address of building storey) \_\_\_\_\_

Structure of building \_\_\_\_\_

Steel skeleton    brickwork    concrete    wood

2. Has any of the equipment to be insured previously been covered by other insurance companies?   
 Yes \_\_\_\_\_ No \_\_\_\_\_ If so, which items of the specification and by which companies ? \_\_\_\_\_

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

3. Is all the equipment insured new ?    Yes / No    If not, which items of the specification are second hand ?    to be \_\_\_\_\_

What equipment can still be obtained ex works? \_\_\_\_\_ State items of the specification \_\_\_\_\_

4. Condition of Equipment    Is the equipment maintained in accordance with the manufacturer's instruction ?    Yes/No

5. Quality of Staff    Have operators been trained with the manufacturer    Yes

6. Is there a risk of flood inundation    Yes / No    If so, by bodies of water / torrential rainfall / sewer backflow / Other \_\_\_\_\_

7. Are dangerous materials used in vicinity ?    yes/ No    If so, specify acids / sensitised papers/ Dyes/test prepared or \_\_\_\_\_



payable or any rebate of the premium shown in the policy; nor shall any person taking out or renewing continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses of rebates of the Insurer.

- Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

**SPECIFICATION OF ITEMS TO BE INSURED**

Item No.	Description of Items: Please give full and exact description of all equipment, including name of manufacturer type serial number, voltage, power input, etc. In the case of outdoor lines indicate length and method of lying.	Year of Manufacture	Remarks Give particulars of any part of the equipment to be insured which has had a breakdown or failure during the last three years and shows any signs of repair. In the case of mobile equipment, statements and frequency of transport, areas of operation and distances please state if picture or admitter tubes are built in.	A 2 B 2	Replacement Value Please state current cost of replacing the equipment by new equipment of the same kind plus freight charges customs duties costs of erection, package material.

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**1. For the Insurance of electronic data processing (EDP), equipment, an additional questionnaire for EDP equipment has to be completed. TOTAL**

**2. In the case of bought equipment mark, "A"**

**3. In the case of hired equipment mark "B"**