



Questionnaire and Proposal for Contractors' Plant and Machinery (CPM) Insurance No

1. Name and address
of proposer

2. Insurance

On annual basis

For _____ months/ _____ years (specify period)

Geographical scope of cover

3. Has there been any
previous CPM insurance?

Yes

No

If so, for which item(s) of the specification
and by what companies?

4. Have the plant and machinery
to be insured (partly or
in total) been hired? Yes No

If so, please specify the owner's name and address.

5. Are the plant and machinery
highly exposed to special
hazards?

Fire, explosion

Earthquake, volcanic activity, tsunami,

Storm, cyclone

Flood, inundation

Landslide

Blasting

Employment in mountainous terrain

Employment underground

Other

6. Do you wish the cover to
include extra charges for

overtime, night work, work on public holidays?

Yes

No

Limit of indemnity for such extra charges:

7. Do you wish the cover to
include inland transport?

Yes

No

If so, please specify.

Maximum value transported by one means of transport:

We hereby declare that the
statements made by us in this
Questionnaire and Proposal
are, to the best of our knowl-
edge 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.

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 what-
ever nature.
The Insurers undertake to deal
with this information in strict con-
fidence.

Executed at

Date

Signature

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Specification of Plant and Machinery to be Insured

Item Description of items

No Please give full and exact description of all plant and machinery.

Year of
manufac-
ture

High exposure to special
hazards
Please specify hazards of item 5
overleaf.

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.

Name of manufacturer

Type and serial number

Output



Total
sum
insured

