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ETHIOPIAN INSURANCE CORPORATION

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Questionnaire and proposal for Machinery Breakdown Insurance No.

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 insured previously Been covered by other companies against breakdown?

Yes No

If so, which items of the specification and by what Companies?

State when the 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 foundations of the machinery?

Yes no

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

4. Does the specification include all the machinery coverable under Machinery Breakdown?

Yes no

If not, does the machinery to be insured represent all the machinery coverable in one plant section. Yes no

5. Do you wish the cover to include extra charges (in case of loss) for:

Express freight overtime, night work, yes no Work on public holiday?

Air freight? yes no

Limit of indemnity for air freight:

6. Give details of any special extension of cover required -----

We hereby declared 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 and that the insured will not lodge any other claims

The insurers undertake to deal with this information in strict confidence.

Executed at

this

day of

signature
