



# My Business My Choice Society



Note: 1) Policy wordings are available on request. 2) Please complete all sections in capitals and tick boxes wherever applicable. 3) Failure to disclose facts material to the assessment of the risk or providing misleading information may render the contract VOID. 4) Attach separate sheets if space given is insufficient.

Insured / Business Name															
Contact Person															
Address for Correspondence															
Tel:										Fax:					
Description of Business										Period of Insurance					
Bank/Financing Institution										From: ____:____ hrs					
Paid-up Capital <input type="checkbox"/> < 15 Cr <input type="checkbox"/> > 15 Cr										To: (midnight)					
										D	D	M	M	Y	Y
										D	D	M	M	Y	Y

Risk Location (L) & Details: (RCC / Brick Work structure aged < 30 yrs only is covered. Kutchha / Temporary structure, not covered)

L	RISK LOCATION					Occupancy*	Location**	Age of Structure (Yrs)	EQ Zone	SIC Code	HG Code
	D.No.	Street	Village / City	District / State	PIN						
1											
2											
3											

\*Occupancy: Residential (R) / Office (O) / Shop (S) / Godown (G) / Mfg. Unit (MU) / Others - Specify    Location: Ground Floor (GF) / Me anine Floor (MF) / Higher Floor (H) / Dwelling in Mfg. Unit (DMU)

### STANDARD COVER : FIRE & SPECIAL PERILS

✓ to Exclude Covers	✓ to Include Add-on Covers	✓ Fire Extinguishing Appliances Installed	✓ Voluntary Deductible Desired
<input type="checkbox"/> Riot Strike & Malicious Damage  <input type="checkbox"/> Storm Tempest Flood & Inundation	<input type="checkbox"/> Earthquake (Fire and shock) <input type="checkbox"/> Terrorism damage <input type="checkbox"/> Other Add-on Covers: 1) Omission to Insure additions etc., 2) Spoilage Material Damage Cover, 3) Start-up Expenses, Architects, Engineers etc., Fees, 4) Leakage & Contamination Cover, 5) Spontaneous Combustion, 6) Temporary Removal of Stocks, 7) Deterioration of Stocks due to power failure, 8) Deterioration of stocks due to change in temperature, 9) Removal of Debris, 10) Forest Fire, 11) Impact Damage by own Vehicle 12) Loss of Rent 13) Addl. Rent for alternate accommodation.	I confirm FEA is maintained in efficient working condition.(Attached certificate of approved agency of TAC)  <input type="checkbox"/> Hand appliance & Trailer pump/ Fire engine <input type="checkbox"/> Hand appliance & Hydrant system <input type="checkbox"/> Hand appliance & Independent sprinkler / Fixed water spray <input type="checkbox"/> Hand appliance + Hydrant & Independent sprinkler/ Fixed water spray	<input type="checkbox"/> AOG 10 lakhs / Others 5 lakhs <input type="checkbox"/> AOG 20 lakhs / Others 10 lakhs <input type="checkbox"/> AOG 30 lakhs / Others 15 lakhs <input type="checkbox"/> AOG 60 lakhs / Others 30 lakhs <input type="checkbox"/> AOG 100 lakhs / Others 50 lakhs

Enter Sum Insured Particulars per Location(L). (Inadequate Sum Insured will attract provisions of Under Insurance clause).

	L	Building (with P&F)	Plinth & Foundation (separate SI)	Compound Wall	Sum Insured Total	Basic Fire (1)	Discounts	Exclusions	Discounts	Add on Covers		Rate %	Premium	
							(1.1)Age < 5 yr. Type AA or A+	(1.2) Const. RSMD(2)	STFI (3)	FEA (4) % (1-2-3)	VD (5) % (1-2-3-4)			EQ
BUILDING	1													
BUILDING	2													
BUILDING	3													
CONTENTS	L	Furniture & Fixture / Off. Equipment	Electrical Fittings	Plant & Machinery / Equipment	Sum Insured Total	<input type="checkbox"/>	✓ for Reinstatement Value Policy(Bldg. & Contents only) Not for Stocks							
	1													
	2													
STOCKS	L	Stock in Process / Finished	Stock in Godown	Stock in Open	Sum Insured Total									
	1													
	2													
3														
<b>TOTAL</b>														

Note: Basements, Stocks-in-open cannot be covered unless approved by Office

### OPTIONAL COVERS (Select minimum 2 covers)

	L	Furniture & Fixture / Office Equipment	Plant & Machinery / Equipment	Stocks	Others - specify	Sum Insured	First Loss (50%)	First Loss Sum Insured	Rate %	Premium
BURGLARY	2									
BURGLARY	3									
Covers Theft by visible and forcible means only.										
Do you have dedicated security arrangement round the clock? <input type="checkbox"/> YES <input type="checkbox"/> NO										<b>TOTAL</b>
Are the insured premises protected with <input type="checkbox"/> Solid Doors / Gates / Grills/ Rolling Shutters / Glass Door <input type="checkbox"/> Burglary Alarm system										

