



**QUESTIONNAIRE AND PROPOSAL FOR
MACHINERY BREAKDOWN INSURANCE**

Intermediary: DAO THANH HAI **Account No.:** 00156188
Tel No.: 0931 497 627 **Fax No.:** _____
Email: hai.dao.saliberty@gmail.com

Please write or tick where applicable.

1. The Proposer

Registered Business Name: _____
Mailing address: _____

Telephone: _____ Fax: _____
Email: _____
Address of Plant: _____

Nature of Business (Please provide full description): _____

Tax Number/ Mã số thuế _____
Business Registration No.: _____ Number of Years in Business: _____
Name of chief engineer or plant manager: _____
Nearest railway station/ airport: _____

2. Period of Insurance: From: _____ To: _____

3. The Machinery to be insured

(a)	Do you wish to insure the foundations of the machinery? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If so, please state the relevant items of the specification: _____ _____ _____ _____

Head Office: Vincom Office Building, 18th Floor
45A Ly Tu Trong Street, District 1
Ho Chi Minh City, Vietnam
Tel: (84-28) 38 125 125
Fax: (84-28) 38 125 018

Hanoi Branch Office: Lotte Center Building, East Tower, 10th Floor
54 Lieu Giai, Ba Dinh District
Hanoi, Vietnam
Tel: (84-24) 37 557 111
Fax: (84-24) 37 557 066



(b)	Maintenance Process (i) How often: _____ (ii) Briefly: _____ _____ _____ (iii) By whom: _____
(c)	Replacement source (i) How far from the site: _____ (ii) Which market: _____ (iii) Transport mean: <input type="checkbox"/> Air freight <input type="checkbox"/> Train <input type="checkbox"/> Other: _____
(d)	Does the specification include all the machinery coverable under a Machinery policy? <input type="checkbox"/> Yes <input type="checkbox"/> No If No , does the machinery to be insured represent all the machinery coverable in one plant section? <input type="checkbox"/> Yes <input type="checkbox"/> No

4. Extensions	
(a)	Do you wish the cover to include extra charges (in case of loss) for: (i) Express freight, overtime, night work, work on public holidays <input type="checkbox"/> Yes <input type="checkbox"/> No (ii) Air freight <input type="checkbox"/> Yes <input type="checkbox"/> No Limit of Indemnity for express freight, air freight: _____
(b)	Give details of any special extension of cover required? _____ _____ _____ _____ _____ _____ _____

5. Loss Experience		
Please give full particulars of losses during the last 5 years:		
Date of Loss	Nature of Loss	Amount of Loss (USD/VND)
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Insurance History

Has any insurance company ever:

(a) Declined your proposal? Yes No

If Yes, give details: _____

(b) Refused to renew your policy? Yes No

If Yes, give details: _____

(c) Cancelled your policy? Yes No

If Yes, give details: _____

(d) Required an increase premium or imposed special conditions? Yes No

If Yes, give details: _____

7. Details of Expiring Insurance

Please provide the following information:

(a) Insurer: _____

(b) Sums Insured (USD/VND): _____

(c) Annual Premium (USD/VND): _____

(d) Deductible: _____

(e) Special Terms and Conditions: _____

(f) Expiry Date: _____

8. Mode of Payment/Phương thức thanh toán

Bank transfer / chuyển khoản Cash at the Company / nộp tiền mặt tại Công ty Bảo hiểm

Cash via Agent or Sales staff / nộp tiền mặt cho Đại lý hay cho nhân viên bán hàng của Công ty Bảo hiểm

9. Language of the Policy

English

Vietnamese

Declaration

1/ WE/I DO HEREBY REPRESENT AND WARRANT that the answers/information given above in every respect are true, complete and correct. We/I agree that the answers/information provided above shall be the basis of the Insurance Policy between the Company and ourselves/myself. We/I have received, read, understand and agree to the Company's applicable MACHINERY INSURANCE policy wording, including but not limitation to, coverage terms, exclusions



and conditions expressed therein. We/I hereby agree that the Company can (i) send information on its products and services as well as other customer services' information, to our phone numbers and/or email/mail addresses and (ii) provide all information relating to any third party vendors that provide data processing, back-up and/or storage services to the Company.

2/ SANCTION LIMITATION EXCLUSION: "Liberty shall not provide cover and shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose Liberty to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United State of America"

Date

(Name and signature of proposer and company chop)

The liability of the Company does not commence until this Proposal has been accepted by the Company.

