## **NIGERIAN AGRICULTURAL INSURANCE CORPORATION**

NAIC HOUSE Plot 590, Zone A.O, Central Area, P.O. Box 3754, Garki – Abuja



## QUESTIONNAIRE AND PROPOSAL FOR MACHINERY INSURANCE

\*AN INSURANCE AGENT WHO ASSISTS AN APPLICANT TO COMPLETE AN APPLICATION OR PROPOSAL FORM FOR INSURANCE SHALL BE DEEMED TO HAVE DONE SO AS THE AGENT OF THE APPLICANT\*

Name of proposer in full: Address: Address of plant: Nature of Business:					
E-mail Address:  Name of Chief Engineer of  Plant manager:  Nearest railway station/airport:			Tel:		
Has any of the machinery to be insured previously been covered by other companies?	Yes 🗖	No 🗖			
	If so, which items of the specification and by what companies?				
State when the insurance is to commence.	Date		Time	Period of insurar	
Do you wish to insure the foundations of the machinery?	Yes No	If so which item	os of the specification	n and by what compa	nias?
		ii so, which item	is of the specification	i and by what compa	mes:
Does the specification include all the machinery coverage under a machinery policy?	Yes 🗖	No 🗖			
			nachinery to be insur y coverable in one pl		Yes No
Do you wish the cover to include extra charges (in case of loss) for:	express freight, overtime night work, work on public holidays?  Yes No air freight? Yes No				
	Limit of indemnity for air freight:				
Give details of any special Extension of cover required.					
We hereby declare 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 questionnaire forms the bas of any policy nection with the		proposal d is part ed in con-	It is agreed that to are liable in acco the terms of the p and that the Insur lodge any other of Whatever nature	rdance with policy only red will not claims of	The Insurers undertake to deal with information in strict confidence.
Executed at:	tl	1is	•••••••••••••••••••••••••••••••••••••••	day of	
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