

Proposal Form

Machinery Breakdown Consequential Loss

Please complete all sections to facilitate the processing of your application.

Statement pursuant to Section 25(5) Cap. 142 of the Insurance Act or any subsequent amendments thereof. You are to disclose in the proposal form fully and faithfully all facts which you know or ought to know, otherwise the Policy issued hereunder may be void.

Name of Producer & Producer Code: _____

Particulars of Proposer

Name of Proposer: _____		Business Registration No.: _____
Mailing Address: _____ _____ Postal Code ()		
Email: _____		Contact No.: _____
No. of Years in Business: _____	Period of Insurance: From _____ To _____	
Nature of Business: (Please provide full description) _____		

Information Required

1. What works of your business are to be insured against Machinery Loss of Profits?

Name	Address of the works	Purposes

2. What Company insures these works against? Fire Fire Loss of Profits

3. What Company covers the Machinery Breakdown policy? _____
Date of Issue of the Machinery Breakdown policy _____

4. Has the machinery to be insured been formerly covered by other companies against Machinery Loss of Profits? Yes No

If Yes, which company?

5. What chartered accountant audits in the accounting records and at what intervals?

Name	Address	Intervals of Audits

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Information Required

6. When was your firm established? _____

7. Since when has the works to be insured existed? _____

8. Since when has the present production method used in the works to be insured been applied? _____

9. What interruptions due to a machinery loss have occurred in the works to be insured during the last 5 years?

Number and type(s)	Duration	Due to machinery of Item No.

10. Please provide a brief description of the production process, making special allowance for production bottlenecks and attaching a flow sheet to show the machinery to be insured.

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Information Required

11. What type of repair work can be carried out without external help? _____

Please indicate external repair facilities for the individual machines in the list of machinery. _____

12. What maintenance work and what inspections are carried out regularly to keep the machines to be insured in good working order?

Types of Maintenance	No. of Intervals

13. Number of employees in the works to be insured.

Total Number	No. employed for maintenance purposes	Fluctuation (in %)

14. Normal working hours of the works to be insured

Per day _____ hours in _____ shifts

Per week _____ hours

Per year _____ days

15. Are there any seasonal production or sales fluctuation of more than 20% in the works to be insured? Yes No

If Yes, please indicate monthly figures.

16. Is there a stock of semi-finished or finished products? Yes No

If Yes, what period of interruption can be compensated thereby?

17. Are supplies furnished against letters of credit? Yes No

If Yes, please indicate the percentage such supplies have in the turnover?

18. In the case of machinery damage, is the interruption period longer than the repair period for the machinery involved? Yes No

If Yes, please indicate the cause and duration of such a delay.

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Information Required

19. Is the insurance to cover only the additional expenditure caused by using an external electric power supply in the case of breakdown of machines in your own power generation plant? Yes No

If so, please state:

- Item No. of the machines to be insured: _____
- Power requirements of the works (kW, kWhrs. P.a): _____
- % of power requirement met by the factory generator: _____
- Extent (kW, kWhrs p.a.) of current that may be drawn from external power sources: _____
- Cost per kWhr of external power: _____
- Factory generating costs saved per kWhr if external power is used: _____
- Annual increased cost of electricity under question 22 item 2: _____

If maximum demand charges are to be insured

- Maximum demand charge per kW of external power: _____
- Method of calculation: _____
- (please enclose copy of electricity supply contract): _____
- Annual maximum demand charge for external power to be insured under question 22 item 3: _____
- % of deductible desired for maximum demand charges (minimum deductible 10%): _____

20. If business interruptions due to the failure of public supplies (power, water, gas) are to be included in the cover. Please fill in separate questionnaire.

21. If the risk of deterioration of goods (raw materials, semi-finished or finished goods) due to a business interruption is to be included in the cover, please fill in separate questionnaire.

22. Summary of the insurance covers desired		
Item No.	Subject matter to be insured	Sum Insured
1	Gross Profit	
2	Increased cost of electricity	
3	Maximum demand charges	
4		
5		

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Information Required

23. Calculation of the sum insured:

The subject matter insured is the profit achieved by selling the goods manufactured in the works insured and the profit gained from services rendered as well as all standing charges which continue to accrue in the works insured in the event of a business interruption. The annual total of net profit and standing charges, the gross profit, is conveniently determined on the basis of the Profit Loss Account.

The following calculation is based on the Profit and Loss Account of the year: _____

Commencement of business year: _____

Currency: _____

Deductions from turnover (such as discounts granted to customers, rebate, price deductions) _____	Turnover	
Excise and turnover taxes _____		
Expenditure incurred for external power, goods, raw materials and supplies total _____	Expenditure incurred for external power, goods, raw materials and supplies used for maintenance _____	
	Company-manufactured additions to assets _____	
Other costs (such as carriages paid to other firms, customs, duties, postage, turnover-dependent insurance premiums, licenses) _____	Reduction in Gross Profit due to damage incurred during the business year _____	
Inventory value of finished and semi-finished goods at the commencement of the business year _____	Inventory value of finished and semi-finished goods at the end of business year _____	
Total _____	Total _____	

If a separate indemnity period is desired for wages, please subdivide the sum insured accordingly and indicate the indemnity period desired for the item of wages under question 22.	<table style="width: 100%;"> <tr> <td style="width: 80%;">Gross Profit</td> <td style="width: 10%; text-align: center;">→</td> <td style="width: 10%; text-align: right;">less</td> </tr> <tr> <td>Safety margin for increase during the policy year</td> <td></td> <td></td> </tr> <tr> <td>Sum insured</td> <td></td> <td></td> </tr> </table>	Gross Profit	→	less	Safety margin for increase during the policy year			Sum insured		
Gross Profit	→	less								
Safety margin for increase during the policy year										
Sum insured										

24. What time excess is desired? 2 days 4 days 7 days 14 days
(minimum time excess 2 days)

IMPORTANT NOTES:

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

PREMIUM PAYMENT WARRANTY (CORPORATE)

Please note that the total premium must be paid and actually received in full by the Company (or the intermediary through whom this Policy was effected) within 60 days of the inception date of the coverage, failing which the Policy shall be deemed to be automatically canceled and a pro-rata premium is to be charged for the period that the Company is on risk.

PERSONAL DATA PROTECTION

Liberty Insurance Pte Ltd ("Liberty") takes the responsibilities under Singapore's Personal Data Protection Act 2012 (the "PDPA") seriously. We also recognize the importance of the personal data you have entrusted to us and believe it is our responsibility to properly manage, protect and process your personal data.

The personal data which Liberty collect from you in this application, that was previously collected and/or in the future, may be collected, used, disclosed and/or processed for one or more of the following purposes:

Name of Proposer: _____

PERSONAL DATA PROTECTION

- a) considering whether to provide you with the insurance you applied for. This includes Liberty considering your application for a policy with Liberty and another Insurer considering your application (whether now or in the future) for a policy with that Insurer (“Insurer” means any insurer or company operating insurance business in Singapore)
- b) processing your application for underwriting and insurance. This includes dealing with your application with Liberty and any other application that you may make (whether now or in the future) with another Insurer
- c) administering and/or managing your relationship, account and/or policy with Liberty including but not limited to renewing or reinstating your policy, accounting and dealing with or collection or refund of any outstanding amounts due from/to you
- d) processing and/or dealing with any claims including the settlement of claims and any necessary investigations relating to the claims, under your policy or policies, whether such policy is issued by Liberty or another Insurer
- e) carrying out due diligence or other screening activities (including background checks) in accordance with legal or regulatory obligations or risk management procedures that may be required by law or that may have been put in place by Liberty, whether for this policy with Liberty or a policy with another Insurer
- f) carrying out your instructions or responding to any enquiries by you
- g) conducting research, analysis and development activities (including but not limited to data analytics, surveys (such as insurance survey, customer service survey, branding survey), branding campaign, product and service development and/or profiling) to improve Liberty’s services or products and/or to enhance the product or service for your benefit
- h) dealing in any matters relating to the services and/or products which you are entitled to under this policy and/or dealing in any matters relating to this policy, which you are applying for or have applied. This includes but is not limited to contacting you or communicating with you via phone/voice call, text message and/or fax message, email and/or postal mail for the purposes of administering and/or managing your contractual relationship with us such as but not limited to communicating with you on matters related to your policy with us. You acknowledge and agree that such communication by us could be by way of the mailing of correspondence, documents or notices to you, which could involve disclosure of certain personal data about you to bring about delivery of the same as well as on the external cover of envelopes/mail packages
- i) investigating fraud, misconduct, any unlawful action or omission, whether relating to your application, your claims or any other matter relating to your policy or policies, whether such policy is issued by us or another Insurer, and whether or not there is any suspicion of the aforementioned
- j) storing, hosting, backing up (whether for disaster recovery or otherwise) of your personal data, whether within or outside Singapore; and/or
- k) complying with applicable law in administering and managing your relationship with Liberty
- l) Any other purposes which we notify you of at the time of obtaining your consent

(collectively the “**Purposes**”)

Liberty may/will also be collecting from sources other than yourself, personal data about you, for one or more of the above Purposes, and thereafter using, disclosing and/or processing such personal data for one or more of the above Purposes.

You also consent that any other Insurer may/can collect from Liberty (and that Liberty may disclose to them), use, disclose (including disclose to Liberty) and/or process your personal data for one or more of the above Purposes.

Your personal data may/will be disclosed by Liberty and/or any of the other Insurers to third parties, whether located within or outside Singapore, for one or more of the above Purposes, as such third parties, would be processing your personal data for one or more of the above Purposes. In this regard, you hereby acknowledge, agree and consent that Liberty may/are permitted to disclose your personal data to such third parties (whether located within or outside Singapore) for one or more of the above Purposes and for the said third parties to subsequently collect, use, disclose and/or process your personal data for or more of the above Purposes including engaging and disclosing to their third party service providers or agents (whether sited in or outside of Singapore) to do so, and the aforementioned collection, use, disclosure and processing activities and permissions in this sub-clause apply to these third party service providers or agents and any third party service providers or agents they in turn engage and so on. Without limiting the generality of the foregoing, such third parties include:

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PERSONAL DATA PROTECTION

- a) Liberty's associated or affiliated organizations or related corporations
- b) any of Liberty's agents, contractors or third party service providers who process your personal data on Liberty's behalf including but not limited to those which provide administrative or other services to Liberty such as mailing houses, telecommunication companies, information technology companies, data storage or hosting companies, data centres, disaster recovery service providers, banks
- c) lawyers/law firms, legal process participants and their advisors
- d) any third party in connection with any proposed or actual reorganization, merger, sale, joint venture, assignment, transfer or other disposition or all or any portion of Liberty's business, assets or stock (including in connection with any bankruptcy or similar proceedings); and/or
- e) third parties to whom disclosure by Liberty is for one or more of the Purposes and such third parties would in turn be collecting and processing your personal data for one or more of the Purposes

I/We have read and I/we accept the terms of Liberty's Data Protection Policy at www.libertyinsurance.com.sg/data-protection-policy/.

DECLARATION

I/We do hereby declare and warrant that:

- a) All information provided by me/us in connection with this application is true, accurate and complete
- b) I/We understand that any inaccurate, incomplete or false information given or any omission of information required, may at Liberty Insurance Pte Ltd's ("**Liberty**", the "**Company**") discretion, render this application invalid
- c) I/We agree that this application and declaration shall be the basis of the contract between Liberty and myself
- d) I/We undertake to pay any difference arising from a discrepancy in the NCD declared, failing which the policy shall be canceled by the Company
- e) I/We agree to accept the Company's policy subject to the terms, exclusions and conditions to be expressed therein, endorsed thereon or attached thereto
- f) I/We agree to inform if there is any change in any of the details I have provided to Liberty in this application. I understand and agree that it is my sole responsibility to inform and update Liberty of any changes to my personal information. I hereby agree to indemnify and absolve Liberty of any liability arising out of any use and/or disclosure by Liberty of any inaccurate or incomplete information due to my failure to update Liberty promptly of any changes to my personal information
- g) The personal data of the individuals (the "**3rd Party Individuals**") which I/we am/are providing to you in this form are accurate and complete. I/we warrant that I/we have obtained consent from the 3rd Party Individuals (or if lacking in legal capacity, his/her legal representatives, guardians or parents as the case may be) for Liberty to collect, use and disclose his/her personal data for the above purposes and on the terms in this document, and as if the said data are about me/us. I/We will inform Liberty of any changes to the data as soon as practicable.
- h) I/We have read and agree to the above, including as to how my personal data may/will be collected, used, disclosed and processed by Liberty and others as stated above

Date

Signature of Management