

 **THE ORIENTAL INSURANCE CO LTD**

## PROPOSAL FORM FOR THE INSURANCE OF NEON SIGNS AND/OR HOARDINGS

Name of Proposer

Address :

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| 1 | Particulars of the Hoarding or Neon Signs(a) Full description along with  measurements of its size(b) Year of manufacture(c) By whom manufactured(d) Price paid by proposer |  |
| 2 | Particulars of the Foundation and/or supporting structure on which Sign and/or Hoarding is errected.The measurements of and the materials from which such foundation and/or supporting structure is constructed should be given |  |
| 3. | Has the structure of the sign been approved and passed by the Municipal or other Government Authority concerned ?Does it require such approval ? |  |
| 4. | Will the Sign its foundation, supporting structure, fastening attachments etc. be regularly inspected by a duly qualified Electrician and Engineer if so, by whom and at what intervals. |  |
| 5. | Will the repairs or defects found by these inspections be immediately carried out or set rights |  |
| 6. | What are the measures adopted for the prevention of loss or damage occurring as a result of the falling down of the Sign. |  |
| 7. | Particulars of the property on which the sign is erected and / or attached to (a) Is the sign affixed to the wall or  erected on the roof of a building(b) State the address and the situation of  the building(c) What is the approximate age of the  building(d) Is the building in a sound condition(e) Is the building a butting on to a main  thoroughfare.(f) How far away is the nearest building  or structure from the building on  which the Sign is installed.(g) How for away is the building  concerned situated from the Road or  Street or Kerb on all sides.(h) Give brief information and  particulars of the surrounding area of  the building.(i) If the Sign/Hoarding is erected or  placed on the roof of a building,  please state whether the roof is flat or  gabled and how far in is it from the  edge of the roof on all sides.(j) If the sign is erected on the ground  give full particulars of its  surroundings. How far away is it from any public or  other pathways, thorough fares,  streets, roads, etc..(k) How high is the Sign/Hoarding from  ground level.(l) How high is the sign/Hoarding from  roof level. |  |
| 8. | Have any claims been made against you in the last five years in respect of accidents caused directly or indirectly by the Sign/Hoarding. If so, give full particulars. |  |
| 9. | Has any Company:(a) declined your proposal?(b) refused to renew your policy?(c) demanded an increased rate on  renewal?(d) cancelled any of your insurances? |  |
| 10 | Have you received any notice from any person or authority regarding any defect in the Sign/Hoarding ? |  |
| 11. | Amount of Indemnity required:(a) In respect of loss of or damage to the  Sign/Hoarding?(b) In respect of Third Party Liability: (a) Any one Accident:1. Personal Injury
2. Damage to Property

(c) For all Accidents in any one period  of Insurance |  |

I/WE HEREBY DECLARE AND WARRANT that the above statements are true and complete. I/We desire to effect an Insurance with The Company, and I/We agree that this proposal and declaration shall be the basis of the contract between me/us and the Company and I/We agree to accept a Policy subject to the conditions prescribed by the Company.

**Proposer’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**