

# PLANT ALL RISK CLAIM FORM

POL. NO	CLAIM NO
(1) Name of the Insuredõ õ õ õ õ õ õ õ õ õ õ õ õ õ	Õ Õ Õ Õ Õ Õ Õ Õ Õ Õ Õ Õ Õ Õ Õ Õ
(2) Addressõ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ	$\check{0}$ .
(3) Telephone Noõ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ	$\tilde{0}$
(4a) Description of plant including makers, numb	er and date of makeõ õ õ õ õ õ õ
õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ	$\dot{0}$ $\ddot{0}$ .
(4b) Market Value at time of accidentõ õ õ õ õ õ	$\tilde{0} \ \tilde{0} \ $
(4c) Is plant owned by you or hired in by youõ $$ õ $$	õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ
(5) If hired , please state from whom it was hired a	nd attach details of hire contract, if
availableõ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ	0 õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ
(6) At the time of the accident	
(a) Was plant being used by you or on your behal	tõ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ
(b) Was it hired out to you, if so state to whom and	d attach details of your conditions of
hireõ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ	$\tilde{0} \ \tilde{0} \ $
(c) Name of driver or person in charge of plant at	the time of the accidentõ õ õ õ õ õ õ .
$ ilde{0}$	
(7) In respect of the accident or loss, give:	
(a) Date: $\tilde{o}$	$\tilde{0}$
(b) Time: $\tilde{0} \ \tilde{0} \ \tilde{0}$	ÕÕÕÕÕÕÕÕÕÕÕÕÕÕÕÕÕ
(c) Locationõ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ	$\tilde{o}\ \tilde{o}\ \tilde$
<ul><li>(8) (a) Describe how loss or damage occurred:</li><li>(Show by sketch overleaf if possible)</li></ul>	

(b)Give details of extent of loss or damage and repairs or replacement necessary

 $\tilde{o} \ \tilde{o} \$ 

(9) Estimated cost and time for repairs or replacemento õ õ õ õ õ õ õ õ õ õ õ õ õ õ õ

- (10) State where damaged plant can be inspected õõõõõõõõõõõõõõõõõõõõõõõõõ
- (12) In case of consequential loss;
  - (a) What steps have been taken to accelerate repairsõõõõõõõõõõõõõõõõõõõõõõ

 $\tilde{0}\ \tilde{0}\ \tilde{0}$ 

#### 13. In case of loss in transit:

(b) Indicate whether consigned at the Carriers or ownercs riskõ õ õ õ õ õ õ õ õ

 $\tilde{0}\ \tilde{0}\ \tilde{0}$ 

(c) Was plant packed or unpacked?  $\tilde{o}$   $\tilde$ 

(d) If damage occurred during loading or unloading, state by whom the operation

(e) Has any claim been made on the Carriers?õõõõõõõõõõõõõõõõõõõõ...

(Under most Carrieros conditions there is a time limit for submitting a claim against them. It is therefore essential that you immediately notify the Carriers that you

#### 15 In the case of loss by theft:

- (a) State who discovered the loss  $\tilde{o}$   $\tilde$
- (b) Give the date the police were advised and the name of the police station  $\tilde{o}$   $\tilde{o}$   $\tilde{o}$
- (c) What other steps have been taken to discover the guilty person and to recover
  - the property  $\tilde{o}$   $\tilde$
- 16 If the damage was caused by third party.
  - (a) Give names and addresses of the persons involvedõ õ õ õ õ õ õ õ õ õ õ õ õ õ ...

 $\tilde{0}\ \tilde{0}\ \tilde{0}$ 

I/We declare that the whole of the statements made by me/us in this claim form are in Every respect true and that no person is interested in the property whether as Owner, Mortgagee, Trustee or otherwise, other than myself/ us.

### THE COMPANY DOES NOT ADMIT LIABILITY BY THE ISSUE OF THIS FORM



## FURTHER OBSERVATIONS AND SKETCHES