



Application Form for Comprehensive Contractors Plant Insurance – Political Risks

Please answer all questions as comprehensively as possible. Any additional information that can be provided to enable the underwriters to evaluate the risk further will be beneficial to the Applicant.

1. The Applicant

a) Name of Applicant

b) Full mailing address of Applicant including Country of domicile

c) Ultimate parent company if applicable

d) Business of Applicant

2. **The Assets**

- a) List countries (Host Countries) in which the assets to be insured will be located

- b) The reason for the proposed assets to be located in the Host Country(ies)

- c) Who will be responsible for bringing the assets into the Host Country(ies)?

- d) Name & address of entity in Host Country(ies) which will have responsibility for the assets whilst in the Host Country(ies)

- e) For what period will the proposed assets be located in the Host Country(ies)?

f) Who will have Care, Custody and Control of the proposed assets whilst in the Host Country(ies)?

g) Please provide full details of the proposed assets to be insured

h) What is the basis of valuation for the proposed assets that are to be insured

3. Location

a) Where will the proposed assets be located throughout the period of this insurance? Please provide full details including addresses and any off-site operations

b) Is(are) the location(s) urban or rural?

Please provide further details as to whether residential, commercial, industrial, jungle, desert or other (please specify)

c) Are there any other operations (being carried out by the Applicant or another party), continuing or not, in the vicinity of those being covered hereunder? – if yes please provide further details as to those operations

d) Where will the assets be located overnight and whilst not operating?

e) What is the maximum likely accumulation of assets at any one location?

4. Security Details

a) Full details of the electronic security provided at the location(s) i.e. alarm systems, C.C.T.V, floodlighting etc...

b) Is each location fenced off or do barriers to entry exist at the location(s)?

c) Is there one main approach road to the location(s)?

If yes, is there any security check points on this approach?
Please provide details

d) Is there a dedicated security team in place?

If yes, please provide full details:

i) Is the security privately owned or provided by a Ministry?

ii) What is their experience of operating in

a) This location(s) / Country

b) On this type of project / contract?

iii) Nationality (ies) of the guard force?

iv) What is the standard of training and experience of the guard force?

v) Number of guards at each location(s) at any one time?

vi) Are the guards on 24-hour rotation?

- vii) Are the guards armed in any way?

- viii) What forms of communication exist between the individual posts and any central commanding post?

- e) What is the security to the entrance to the location(s)?

- f) What training is given to employees in the event of an attack at a proposed location?

- g) What is the distance from the nearest Police and / or Military post?

- h) Is there any additional Police or Military support available to the location?
Please provide further details

5. General Information

- a) Has the Applicant obtained all re-export licenses or other necessary authorisations required for re-exporting equipment?

Please supply details of licenses or permit required:

- b) Has the Applicant, or any of its Partners, Joint Ventures, Affiliates or Subsidiaries ever suffered an event that would lead to a loss under the proposed coverage?

If YES, please provide full details:

- c) What has been done by the applicant to prevent a reoccurrence?

- d) Does the Applicant have any knowledge of any facts that may give rise to a claim under the terms of the proposed policy? If Yes please provide details:

6. Cover Required

Please indicate what coverage is required under the proposed policy, the period and the values per coverage.

	Coverage Required	Period	Values
A	Abandonment		
B	Deprivation		
C	Expropriation		
D	Terrorism & Riots		
E	War		

If the values listed above are total values, a breakdown of individual items and their values will assist the underwriter when setting deductible levels. Any further information provided will be beneficial to the applicant.

DECLARATION

The undersigned Applicant declares that to the best of their knowledge all information contained in this application is true and no material information has been withheld.

The undersigned agrees any information withheld or not disclosed to the underwriter that may or may not lead to a claim under any associated Policy, will render that Policy invalid and unenforceable.

The undersigned also agrees that the existence of any Policy that may be issued will not be disclosed to the Host Government, or any third party without the underwriter's prior, written approval.

Whereas signing this application does not bind the undersigned to complete the insurance, it is agreed that this application shall form the basis and be part of any policy issued.

Signed: _____

Title: _____

Date: _____