

**loss of profits (machinery) insurance proposal**

Lumley General Insurance (N.Z.) Limited, Head Office, Lumley Centre, 88 Shortland Street, PO Box 2426, Auckland, New Zealand, Tel 09 308 1100, Fax 09 308 1114

**Insured details**

<b>Name of proposer in full:</b>			
<b>Business address:</b>			
<b>Name of business:</b>			
<b>Period of insurance:</b>	<b>From:</b>	<b>To:</b>	<b>at 4pm (NZ time)</b>

**General questions**

<b>1</b>	On what date does your financial year close? / /	
<b>2</b>	Give name and address of your auditors:	
<b>3</b>	Has the business or any branch or department commenced operations within the last 12 months?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, give details:	
<b>4</b>	Do different sections of the business earn different gross profit margins?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, give details:	
<b>5</b>	Have you ever suffered loss of profits by breakdown of machinery?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, give details of cause, duration and loss suffered in each breakdown during the last 3 years.	
<b>6</b>	Would stoppage of any of your machines cause a loss of profits which might be disproportionate to the duration of the stoppage?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, give details:	
<b>7</b>	Are you or your works manager or managers aware of any faults or defects in your machines or of any other circumstances which make the risk of breakdown greater than usual with machinery of the class concerned?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, give full particulars:	
<b>8</b>	Has insurance against loss of profits or machinery breakdown ever been:	
	(a) refused to you?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	(b) offered only on special terms?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, give full particulars:	
<b>9</b>	Are you at present insured against loss of profits by fire?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, state: Name of Insurers:	
	Sum Insured: Indemnity Period:	
<b>10</b>	Are selected items of machinery only to be covered?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, give particulars on the schedule (page three).	
<b>11</b>	Machinery and plant policy currently held with the company: Policy no:	Due date: / /

## Limits required

Item no.	Sums Insured
1 On Gross Profit:	\$
2 On Public Accountant's Fees:	\$
3 Wages (if not included in Item 1) above:	\$
(a) _____ week's wages to the extent of _____ % of the total wage roll	\$
(b) Wages to the extent of _____ % of the total wage roll Indemnity Period (months):	\$
(c) All wages for the first _____ weeks and _____ % of the total wage roll for the remainder of the period:	\$
4 Additional items:	\$
	\$
	\$
Total Sums Insured	\$
The indemnity Period (months):	The Excess Period (days/weeks):

**The liability of the company does not commence until the proposal has been accepted by the company**

## Definitions

### Gross Profit

The amount by which:

- the sum of the Turnover and the amount of the Closing Stock shall exceed
- the sum of the amount of the Opening Stock, Purchases for use in connection with the Business, Discounts allowed, Carriage and Freight (by own vehicles).

### Public Accountants Fees

Fees incurred by the Insured in employing an accountant to complete a statement of the loss sustained.

### Sums Insured

It is important that allowance is made for growth and trends of the business plus of course the effects of inflation. We recommend that you base your Sums Insured upon the budget for the 12 months commencing with the last day of the period of Insurance, because damage could occur and the interruption begin on that day. The annual figure should be shown for periods of twelve months or less - if the Indemnity Period is more than 12 months then the annual figure must be proportionately increased.

### The Indemnity Period

This is the maximum period for which compensation will be payable and should therefore represent your estimate of the longest probable period of interruption.

### The Excess Period

Is the number of normal working days immediately after the interruption during which you will bear any losses.

## Pursuant to the Privacy Act 1993

The following is brought to your attention :-

- This proposal collects personal information about you;
- The information is collected to evaluate the insurance you seek;
- The intended recipient of the information is Lumley General Insurance (N.Z.) Limited;
- The information is being collected and held by Lumley General Insurance (N.Z.) Limited of PO Box 2426, Auckland;
- The collection of this information is required pursuant to the common law duty to disclose all material facts relevant to the insurance sought and is mandatory;
- The failure to provide this information may result in your application for insurance being declined, or your insurance being void from the beginning;
- You have rights of access to, and correction of, this information subject to the provisions of the Privacy Act 1993.

## Declaration

I/We declare that the answers given herein are in every respect correct and that I/We have not withheld any information likely to affect the acceptance of this proposal and that I/We have read and understood the proposal and policy wording.

I/We agree that my/our personal information may be used by the Company to advise me/us of the Company's other services.

I/We authorise the disclosure of personal information held by any other party regarding my/our previous insurances.

I/We agree to the Company releasing to other parties personal information regarding this insurance.

Insured's signature: _____	Date: ____ / ____ / ____
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