



**PEOPLE'S  
INSURANCE**  
CARING WITH LOVE

**PEOPLE'S INSURANCE PLC**  
(Company No.PB 3754 PQ)  
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**BUSINESS INSURANCE  
(PACKAGE POLICY FOR SMALL AND MEDIUM ENTERPRISES)  
PROPOSAL FORM**

NOTE: - IF THE SPACE PROVIDED IS NOT SUFFICIENT PLEASE ATTACH A SEPARATE SHEET DETAILING RELEVANT INFORMATION.

01. Full Name of Proposer				NIC No:	
02. Trade name of the Business (If any)		Business Registration No.		VAT No: (If applicable)	
03. Postal Address				Phone No:	
				Fax No:	
				E-mail	
04. Address of the Property to be Insured					
05. Nature of Business: -.....					
06. Name and Address of Mortgagee (if any) Specify whether in respect of building and / or contents					
07. Period of Insurance	From:		To:		
<b>08. Details of the property to be Insured</b>					<b>Sum to be Insured (Rs.)</b>
(a) On Building, Permanent Fixtures and Fittings including water installation, electrical wiring for permanent lighting (if you own the building)					
(b) Landlord's Fixtures and Fittings for which you are responsible (if you are a tenant)					
(c) On Machinery and Equipment incidental to the business (Freezers, Weighing Equipment, Cash Machines, Computers, etc.) Please give a list of items					
(d) On Furniture, Showcases, and Racks					
(e) On Stock in Trade and/or Goods in Trust for which proposer is responsible:- Nature of Stocks : (If precious stones, precious metals, jewellery, watches, electric equipment, mobile phones, photographic equipment, work of art, motor spare parts and accessories included please specify)					
(f) Other – Please specify					

**SECTION 1 – LOSS OR DAMAGE TO PROPERTY (Terms & Conditions apply as per the policy wording)**

**A. Perils Covered (basic)**

1. Fire, Lightning, Explosion
2. Specified natural perils – Storm (including Hurricane, Cyclone, Tempest, Typhoon & Tornado), Flood, Earthquake, Volcanic Eruption or Overflow of the sea occasioned thereby.
3. Impact – aircrafts, vehicles, falling trees, animals, television or radio aerials or masts
4. Bursting & overflowing of domestic water tanks & water pipes
5. Burglary
6. Riot & Strike
7. Malicious act of a person

**B. Additional Benefits**

1. Architects', Surveyors', Consultant, Engineer's fees
2. Removal of debris
3. Fire extinguishing costs
4. Alternative accommodation and/or loss of rent
5. Cover during alterations & repairs
6. Directors & Employee's personal property
7. Temporary Removal

**C. Do you need Terrorism Cover for the property mentioned above:-**

Yes

No

**SECTION 2 - Optional Covers**

(Indicate the option (✓) selected and insert details required)

**A.  Electrical Appliances against Electrical Fire**

If you wish to cover any of the electrical appliances included under 8(c) above against fire damages due to short-circuiting, abnormal current or self heating, please give the following details.

Type of Equipment	Make Model & Serial No.	Year of make	Last date of Repair	Sum to be Insured

**B.  Business Interruption**

Covers: Cost of relocation and / or additional expenditure (not recoverable under other items) incurred for the purpose of maintaining normal operation of the business. Loss of profits not covered.

Sum Insured: Per day Rs.

Indemnity Period : 03 months

**C.  Money**

★ Places between money is carried

To:

From:

★ Maximum amount in transit any one time

Rs.

★ Maximum amount of money in locked safe

Rs.

★ Maximum amount of money in drawers & cash registers during the business hours

Rs.

★ Details of the Safe

Make

Dimensions

× ×

★ Do you need:-

Riot & Strike

Yes

No

Terrorism

Yes

No

**D.  Public Liability:**

• Is any manufacturing, repair or servicing process carried out in the premises?

Yes

No

If "Yes" give details

• Is work undertaken away from the premises?

Yes

No

If "Yes" give details

**E.  Accidental Damage to Fixed Glasses and Name Boards**

Description	Length/Breadth	No of Pieces	Sum Insured (Rs.)

**F.  Personal Accident (For named persons between 18 to 70 years)**

Name	Date of Birth	NIC No	Capital Sum Insured (Rs.)

★ Do you need:-

Riot & Strike

Yes

No

Terrorism

Yes

No

**G.  Workmen's Compensation for Employees (Cover as per prevailing Workmen's Compensation Act or at Common Law)**

Category (Nature of Duties)	Number	Estimated Annual Wages

★ Do you need:-

Terrorism

Yes

No

**H.  Freezer Contents**

Nature of Contents	Sum Insured (Rs.)

**I.  Goods in Transit**

Nature of Stock	Type of Vehicle	Vehicle No.	Sum Insured (Rs.)

★ Do you need:-

Riot & Strike

Yes

No

Terrorism

Yes

No

<b>J. <input type="checkbox"/> Hospitalization Benefit (For owner between 18 to 55 years)</b>		
Name	Date of Birth	NIC No

**General Information**

i) Construction of the Building	External Walls:.....	Ceiling:.....
	Roof:.....	Lit by:.....
	No of floors:.....	
ii) Age of the Building (approximately)	.....years	
Is there a basement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" type of goods stored?		
iii) Is the building or any part of the building occupied other than as mentioned in 05 above? If "Yes" give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
iv) Describe the nature of business within 10 meters of the building to be insured		
v) Do you have any fire detection and/or fire fighting system/equipment? If "Yes" give details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
vi) Are drainage facilities in the premises and in the neighborhood adequate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
vii) Flood risk: Is the property		
(a) low lying, If "Yes" give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) near any water course, or sea?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(c) Give height of ground floor in relation to the highest known water level.		
viii) Are there any tall trees, antennas, masts etc. in close proximity? If so, describe, indicating distance(s)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
ix) Is the premises guarded by a watchman / security guard / caretaker or any other security arrangement? Eg:- Burglar alarm. If "Yes" give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
x) Does the proposer / an employee live in the premises after business hours?		
xi) How locked/secured	Doors .....	
	Windows .....	
	Other openings .....	
xii) At a time of a claim / loss, can you submit stock records? If 'no' give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
xiii) Have you suffered any loss or damage during the past three years by any of the perils covered under this Insurance? If "Yes", please describe Please disclose all losses, even if uninsured or not claimed at the time including at previous addresses		
xiv) Is there any Insurance on the same property in force? If "Yes", please give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
xv) Have you ever been refused cover by any Insurance Company or had Special Terms imposed? If "Yes" please state the name of the Insurance Company and reason for refusal	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Declaration**

- a) I/We wish to insure with People's Insurance PLC in the usual form for this class of insurance.
- b) I/We agree that immediate notice will be given to the Company of any alteration in the circumstances described herein.
- c) I/We declare that to the best of my/our knowledge and belief the information given is true in every respect and if such statements are in the writing of another person, he/she acted as my/our agent for such purpose.
- d) I/We agree that this proposal and declaration shall be the basis of the contract between me/us and the Company.
- e) I/We understand and agree that the proposal will be effective only if the Company has accepted it.
- f) I/We agree that the Policy is Subject to the Premium Payment warranty

.....  
Proposer's Signature & Company Seal  
(Where it is applicable)

.....  
Date

Agent / Broker	Agent Code	Branch Code	Policy No.

**BUSINESS INSURANCE**

Business Insurance enables you to simplify your insurance. Instead of a collection of separate documents covering a variety of risks – with the possibility of an important field of protection being overlooked, you receive a simple policy providing the cover you select according to your needs.

Think of the advantages -  
One Policy  
One Premium  
One Renewal Date

**All you have to do-**

You will be given opportunity to select the covers you need. Go through the proposal form carefully, remembering that the risk you decide to dispense with might prove to be the one most important to you. When you are certain about the protection you require, complete the form carefully and a policy tailored especially to your needs will be prepared.

Any existing insurance can be brought into line by delaying the operation of the appropriate sections of the Business Insurance until the expiry date of current policies, a corresponding pro-rata reduction being made from the first premium.

- 1) **Basic Cover:** Building and contents against Fire, Lighting, Explosion, Specified Natural Perils-Storm (Including Hurricane, Cyclone, Tempest, Typhoon & Tornado), Flood, Earthquake, Volcanic Eruption or overflow of the sea, Impact-Aircraft, Vehicle, falling trees, Animals, Television or radio aerial or mast, Bursting & overflowing of domestic water tanks & water pipes, Burglary, Riot & Strike, Malicious act of a person.
- 2) **Additional Benefits:** Architects', Surveyors', Consultant, Engineer's fees, Removal of debris, Fire Extinguishing Costs, Alternative Accommodation and/or Loss of Rent, Cover during Alterations and Repairs, Director's and Employee's Personal Property, Temporary Removal
- 3) **Options:**
  - A. Electrical Fire & Lighting damage to electrical appliances and installations
  - B. Business interruption (Fixed allowance per day)
  - C. Money
  - D. Public Liability
  - E. Accidental Damage to Fixed Glass & Name Boards
  - F. Personal Accident
  - G. Workmen's Compensation
  - H. Freezer Contents
  - I. Goods in Transit
  - J. Hospitalization Benefit