



redefining / insurance

POLITICAL VIOLENCE APPLICATION

1. a. Applicant and all subsidiary companies to be insured under this policy:

b. Applicant's mailing address:
2. Limits of Liability requested for buildings, contents, and business interruption:
 - a. _____ Total each Loss
 - i. _____ Buildings each Loss
 - ii. _____ Contents each Loss
 - iii. _____ Business Interruption each Loss
 - b. _____ Total each Policy Year
3. Deductible requested:
4. Policy currency to be used:
5. a. Description of applicant's business operations at the locations to be insured:
(Industrial, Commercial, Residential etc).

b. Status of applicant (private company, public company, government owned):

c. How important to operation are computer and data processing?



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6. Building, contents, and business interruption values at the locations to be insured:

<u>Location</u>	<u>Values:</u>	<u>Buildings</u>	<u>Contents</u>	<u>Business Interruption</u>
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7. Physical description of location(s) to insured: (include if possible, plan showing electricity and other utility supplies, delivery/dispatch areas, computer/EDP facilities, authorised entry points, guard posts, restricted areas):
8. Description of area surrounding location(s) to be insured:
- a. Describe occupants of surrounding buildings.
 - b. Is it an area known to suffer from an above average crime rate?
 - c. Distance from nearest police station or army post.
9. Description of employees and operations at location(s) to be insured:
- a. Number of employees and operating hours at each location:
 - b. Details of ethnic minorities, labour relations, and unions at each location:
 - c. Number and location of employees in building(s) outside normal working hours:
 - d. Are cleaning staff in-house or contract and what are their hours?
 - e. What businesses occupy other parts of the building(s) to be insured?
 - f. Do these other businesses attract press or public attention?

10. Description of security at location(s) to be insured:

a. Details of guard force, number, reports to whom, recruitment, training, duties:

Details of alarm systems, CCTV etc:

b. Details of key system and control:

c. Details of perimeter fence and gates:

d. Details of access control procedures and equipment:

e. How is the building lit (inside and outside)?

f. Who locks the building at night?

g. Details of car parking arrangements:

11. Description of past history at location(s) to be insured:

a. Give full particulars of any incidents or threats in the past 5 years.

b. Describe steps taken to deal with them and to prevent recurrence:

c. List all property loss for last 5 years:

12. Does the applicant, its directors and officers or any other known person have knowledge or information of any specific fact which may reasonably give rise to a claim under the proposed policy?

13. **COVERED CAUSES OF LOSS (not covered unless specified here):**

	INSURED PERIL	COVER PURCHASED BY INSURED
(1)	Act of Terrorism	Yes/No
(2)	Sabotage	Yes/No
(3)	Riots, Strikes and/or Civil Commotion	Yes/No
(4)	Malicious Damage	Yes/No
(5)	Insurrection, Revolution or Rebellion	Yes/No
(6)	Mutiny and/or Coup d'Etat	Yes/No
(7)	War and/or Civil War	Yes/No



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THE UNDERSIGNED AUTHORISED OFFICER OF THE CORPORATION
DECLARES TO THE BEST OF HIS KNOWLEDGE THAT THE STATEMENTS
SET FORTH HEREIN ARE TRUE.

Authorised Signature of Applicant : _____

Name and Title of Authorised Officer : _____

Date : _____