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## BUSINESS INSURANCE QUOTATION REQUEST

**Broker Firm &  
Contact Name**

**Contact Details**

**Date**

**Subject**

Please provide your quotation based on the following

<b>Insured</b>							
<b>Address Of Risk</b>							
<b>Occupation</b>							
<b>Years In Business</b>		<b>No Of Employees</b>		<b>Wages</b>	\$	<b>Turnover</b>	\$
<b>Construction</b>							
Walls							
Floors – Ground							
Floors – Upper							
Roof							
Age Of Building							
No Of Stories							
<b>Security</b>							
Back To Base Alarm							
Local Alarm							
Windows - Type Of Locks							
Doors - Type Of Locks							
Bars & / Or Grills							
Other – please specify							
<b>Fire Protection</b>							
Sprinklers							
Hose Reels							
Extinguishers							
Other – Please Specify							
<b>Services</b>							
Switchboards – Open Or Closed							
Wiring – Last Rewired							
Plumbing – Last Replumbed							
<b>Details Of Machinery</b>							
ie Number Of Machines							
<b>Holding Broker</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Current Underwriter</b>							
<b>Expiry Date</b>							
<b>Claims/Conviction Details</b>							
<b>Last 5 Years</b>							

**Broker Name****Insured****Sums Insured****Fire**

Building	\$
Contents	\$
Stock	\$
Removal Of Debris	\$
Accidental Damage	\$

**Business Interruption**

Gross Profits	\$
Claims Costs	
Other	\$
Indemnity Period 12 Months	

**Burglary**

Contents	\$
Stock	\$
Cigarettes/Tobacco	\$

**Money**

In Transit	\$
On Premises During Business Hours	\$
On Premises During Non Business Hours	\$
In Safe	\$
In Custody	\$

**Plate Glass**

External/Internal	\$R/Value
Signs	\$

**Liability**

Public & Products Liability	\$
Care Custody Control	\$

**Machinery Breakdown**

	\$
Deterioration Of Stock	\$

**Electronic Equipment**

	\$
	\$

**General Property**

	\$
	\$

**General Information**