

APPLICATION FORM - Fire Insurance

1. Applicant – individual company

Name:

Address:

PIN (if individual) or Bulstat (if company):

Phone / fax:

Business (if company):

2. Insurance period: from 00:00 on till 24:00 on

Fire

3. Description of the property (if necessary, please attach on separate sheet):

Description	Value	Add. perils					
		1	2	3	4	5	6

Additional perils: 1) landslide 4) malicious acts
 2) earthquake 5) change of address
 3) short circuit 6) All Risks for glass breakage / other:

Mentioned values are: actual cash value new replacement value
 initial book value remaining book value
 other (explanation):

4. Location (address of the property):

Description of the building (type of construction):

In case of marked "earthquake" - number of floors age of the building

5. Additional cover: removal of debris relocation, protection & storage
 loss of rent up to: other:
 third party liability for: 2.000 BGL BGL

6. Close proximity of inflammable and/or explosive substances: yes / no

7. Fire fighting measures: none manual pump buckets
 fire-extinguishers hydrants
 sprinkler installation factory fire brigade
 other (explanation):

8. Distance to the nearest hydrant / water source:

9. Necessary time for arrival of the public fire brigade:

10. Please advise other details which you consider important for risk evaluation:

11. Is the property covered with another insurer? yes / no

12. Claims during the previous 3 years - yes / no
 If "yes", please provide details (year, type of event, amount of loss):

13. Previous insurer:

