

following Details.

Sr. No	Plate No.	Type Of Vehicle	Chassis No.	Engine No.	Year of Make	Value (in Birr)
1						
2						
3						
4						

NB. In case of fleet of vehicles please attach details in a separate sheet following the same format.

b. Is cover required for Construction Plant and Machineries? Yes No

If your answer for 5.1b is yes, please state the list of vehicles with their unique Identification Number containing the following Details.

Sr. No	Plate No.	Type Of machine	Serial Number	Make and Model	Engine No.	Year of Make	Value (in Birr)
1							
2							
3							
4							

NB. In case of fleet of vehicles please attach details in a separate sheet following the same format.

6. Description of area surrounding location(s) to be insured:

a. Describe occupants of surrounding buildings.

b. Is it an area known to suffer from above perils under the proposed policy?

c. Distance from nearest police station or army post.

7. 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?