

Description of item: _____ _____		
Year of Manufacture: _____	Name of Manufacturer: _____	
Type and Serial Number: _____	Output: _____	Replacement Value: <input style="width: 100px;" type="text"/>
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Year of Manufacture: _____	Name of Manufacturer: _____	
Type and Serial Number: _____	Output: _____	Replacement Value: <input style="width: 100px;" type="text"/>
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Year of Manufacture: _____	Name of Manufacturer: _____	
Type and Serial Number: _____	Output: _____	Replacement Value: <input style="width: 100px;" type="text"/>
		Total Replacement Value: <input style="width: 100px;" type="text"/>

Declaration: I/We confirm that the above answers, statements, particulars and additional information are true to the very best of my/our knowledge and belief. I/We also confirm that I/We have disclosed all information and material facts that may alter the Insurer's view of the risk, or affect their assessment of the exposures they are covering under the Policy. I/We agree that this proposal shall be basis of the contract and part of the insurance between myself / ourselves and the company.

Signature:
 Date:

Office use only		
Rate: _____	Premium: _____	Agent's Name: _____

THIS INSURANCE WILL NOT BE IN FORCE UNTIL THE PROPOSAL HAS BEEN ACCEPTED BY THE COMPANY
(Acceptance of Proposal means Insurance policy issued and premium collected.)