



**QBE Insurance (Malaysia) Berhad**

Reg No.: 161086-D

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# QBE STORAGE TANK Insurance PROPOSAL

Cover Note No.:
Policy No.:
Account No.:

## IMPORTANT NOTICE

Insurance Act 1996. You are to disclose in this proposal form, fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be void. . You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate a contract of insurance.

## A. DETAILS OF PROPOSER

1. Name of proposer: .....
2. Address: .....  
.....  
.....  
..... Tel: .....
3. Trade or Profession or Nature of business: .....
4. How long has the business been established? .....
5. Period of Insurance: From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ (dd/mm/yy)
6. Situation to which this insurance applies  
.....  
.....  
.....
7. Name of Chief Engineer or Plant Manager: .....

## B. GENERAL QUESTIONNAIRE

Note: All questions must be answered by the proposer and appropriately marked (✓) where applicable

1. Please provide complete description of storage tanks to be insured below.
  - a) Type of Tank: .....  
.....  
.....
  - b) Situation of Tank e.g. outdoors (ground raised), indoors (on which floor), mobile, etc:  
.....  
.....
  - c) Manufacturer and year of make: .....
  - d) Construction, e.g. welded or riveted plates etc: .....  
.....



- e) Thickness of plates and condition: .....
  - f) Condition of paintwork: .....
  
  - g) Internal lining, if any: .....  
.....
  - h) Size and capacity: .....  
.....
  - i) No. or air vents per tank, if any: .....  
.....
  - j) Description (cylindrical, spherical, horizontal, vertical, rectangular etc): .....  
.....
  - k) Describe tank top (fixed or floating etc): .....
  - l) Describe relevant equipment connected to tanks, e.g. piping, pumps etc: .....  
.....
  - m) Specifications of inlet and outlet pipes (list separately) e.g. diameter, length etc: .....  
.....  
.....
2. Is tank used to full capacity, seasonal or otherwise? Please describe: .....
3. What are the contents of tank(s)? .....  
.....
4. Is there a contents monitoring programme? YES  NO   
If YES, is it computerized, please describe details .....  
.....
5. Is tank under pressure? YES  NO   
If YES, please describe working pressure .....
6. Is heat introduced in the tank? YES  NO   
If YES, please describe working temperature and source of heating .....  
.....  
.....
7. Describe type of foundation, if any. (e.g. piles used etc): .....  
.....
8. Is a catch pit, retaining bund wall or dyke provided in the event of spillage of contents? YES  NO
9. What activities or operations are undertaken in the vicinity of the tanks? .....  
.....



10. Please answer the following specifications in respect of values and limits to insure:

- a) Average value of contents any one time (in total): RM .....
- b) Maximum Value of contents: RM .....
- c) Total Sum Insured for Tanks (Section I): RM .....

Please provide breakdown values by types of tanks if so required:

- ..... RM .....
- ..... RM .....
- ..... RM .....
- ..... RM .....

- d) Total values insured for Contents (Section II): RM .....

Please provide breakdown values by types of contents if so required:

- ..... RM .....
- ..... RM .....
- ..... RM .....
- ..... RM .....

11. Does the specification above include **ALL** storage tanks coverable under a storage tank policy? YES  NO

*If NO, please state which items are excluded and why.*

.....  
.....  
.....

12. Did an accident ever occur to your storage tanks? YES  NO

*If YES, please give full particulars.*

.....  
.....

13. Are all the tanks proposed for insurance in good condition? YES  NO

*If NO, please give particulars of defects, if any.*

.....  
.....  
.....

14. Are the storage tanks and their related installations and piping subject to periodical inspections and maintenance? YES  NO

*If YES, please describe by whom and at what intervals and other details of maintenance programme.*

.....  
.....  
.....

Date of last inspection .....



15. Has the storage tanks to be insured previously been covered by other Insurance companies against storage tank insurance? YES  NO   
*If YES, please name of Company, other details including period of cover*

.....  
 .....

16. Has any insurance company ever  
 (a) declined your proposal YES  NO   
 (b) refused to renew your policy? YES  NO   
 (c) cancelled your policy? YES  NO   
 (d) required an increased rate or imposed special terms on renewal? YES  NO   
*If any answer above is YES, please give details.*

.....  
 .....

**C. DECLARATION AND SIGNATURE**

I/We do hereby declare that:

1. I am/we are authorised to make this proposal.
2. The answers stated in this proposal are true and complete and I have not withheld any information which may influence the acceptance of this application.
3. This application and declaration hereby given shall be the basis of the contract with the Company and I/we will accept the terms, exclusions and conditions which will be set out in the policy to be issued.
4. The liability of the Company does not commence until the application has been accepted.

Proposer's Signature:.....  
 and company stamp

Date: \_\_\_/\_\_\_/\_\_\_ (dd/mm/yy)

**D. DECLARATION BY AGENT / BROKER / OFFICER (STAFF OF INSURANCE COMPANY)**

In compliance with Section 16(2) of the Anti-Money Laundering Act 2001:

1. I hereby certify that I have verified and authenticated the Proposer's Business Registration Certificate at the point of sale.
2. I have maintained a copy of the Certificate of Incorporation (ROC or ROS) for applicants of group insurance policies where premium is more than RM100,000.00.

Name: ..... NRIC No: .....

Date: \_\_\_/\_\_\_/\_\_\_ (dd/mm/yy)

Signature and company stamp: .....