ALFA
INSURANCE BROKERS

QUOTATION – NEW BUSINESS QUESTIONNAIRE;

Date of Call: _____

Referred By: _____

Insured: _____

Occupation: _____

Situation: _____

Postal Address: _____

Are you Registered For GST?_____

% of Input Tax Credit Claimable?_____

A.B.N: _____

Date Quotation Required By:_____

Contact Details:
Bus No.: _____ Fax No.:_____ Mobile:_____
Home No.:_____
Email: _____ Website**:**_____

Construction: Walls_____ Floor_____ Roof_____ No. of Storeys_____
Age _____

Fire Security: Extinguishers _____ Sprinklers_____ Fire Blankets_____
Hose Reels_____Smoke Detectors_____ Monitored Smoke Alarm_____
Fire Hydrants_____
Do you have a Service/Maintenance Programme?_____

Burglary Security: Deadlocks _____ Window Locks_____ Local Alarm_____
Bars on Windows_____ Padlocks_____ Roller Shutters_____
Monitored Alarm: Provider Type (i.e.) Dialler, Securitel, Radio, Landline _____

Turnover: $_____ Wages$_____ No. of Employees_____

Occupation of Adjoining Properties?_____

No. of Years in This Business:_____
No. of Years in Similar Business: _____
Trading Hours: Weekdays_____ **Saturdays**_____ **Sundays**_____

Claims Experience: _____

Number of Seats: _____

Is Premises Licensed: _____

Additional Information:_____
_____
_____

TYPE OF COOKING APPLIANCES USED/SERVICED?

Deep Fryers & Size:_____
Are Deep Fryers Thermostatically controlled?_____
Other Cooking Appliances?_____
Are cooking appliances serviced annually?_____
How often are ducts/fans cleaned?_____

COVERAGE:

FIRE & PERILS	
Building: $_____	Contents: $_____
Stock: $_____	ROD: $_____

BUSINESS INTERRUPTION	
Gross Profit: $_____	Claims Prep Costs: $_____
Loss of Rent: $_____	Additional Inc Costs: $_____
Indemnity Period _____Months	

BURGLARY
Stock: $_____
Contents: $_____

MONEY	
Blanket Cover: Yes/No	
In Transit: $_____	Bus Hours: $_____
Outside Bus Hours $_____	Personal Custody $_____
In Locked Safe $_____	

GLASS
Internal/External……Replacement Value
Curved/Fancy Glass: $_____

LIABILITY
Limit of Liability; $_____
Goods In Care Custody; $_____

ENGINEERING
Machinery Breakdown – No of Units _____
Limit any one Breakdown:$_____
Deterioration of Stock: $_____

WORKERS COMPENSATION
No. of employees:
Estimated Annual Wages: $

INTERNAL USE ONLY:

Underwriters to approach:
_____