



# KNIGHTSBRIDGE

INSURANCE GROUP

## INDUSTRIAL SPECIAL RISK INSURANCE

### ● Contact Details

First Name\*

Phone\*

Last Name\*

Email\*

Insured Name/s

Please list business activities

Website

Enter your ABN

Years in Business

### ● Property Details

Address

Building Declared Value

Plant & Contents Declared Value

Stock Declared Value

Total Material Damage Declared Value  
(this situation)

What material are the walls constructed from?

What material are the floors constructed from?

What material is the roof constructed from?

Is there any asbestos, combustible cladding or EPS (expanded polystyrene) present?

☒ Yes ☒ No

(if no, please provide details)

What year was the building constructed?

How many stories/levels is the building?

If constructed more than 20 years ago, when was the building last rewired?

What fire protection exists at the property? (ie sprinklers, extinguishers, fire alarms, fire doors etc)

What security measures are in place at the property? (ie back to base alarm, CCTV, deadlocks, swipe card access etc)

Do you lease the property to a tenant?

☒ Yes ☒ No

(if yes, Name and occupation of tenant (if multiple tenants please attach a tenant listing)

upload

**Business Interruption**

On what basis do you wish to insure Business Interruption?

Is 100% Payroll included in the Gross Profit figure?

☒ Yes ☒ No

(if no, please provide following details)

Dual Basis Payroll - Enter number of weeks for 100% Payroll

Percentage of Payroll for remainder of Indemnity Period

Amount you wish to insure Business Interruption for?

Indemnity Period (in months)

Claims Preparation Costs Sub-Limit

Additional Increased Cost of Working Sub-Limit

Preferred Excess/Deductible

● **Signature**

Name

Position/Title

Date