

Office Options

PART 3 SECTION 1A: CONTENTS (see Part 5 - How to Calculate Your Sums Insured)

- A. Business Equipment - fixtures, fittings, fixed glass and all other contents for which you are legally responsible. \$ _____
Of this figure, what amount relates to computer equipment? \$ _____
- B. Leasehold Improvements \$ _____
- C. Reproduction of your Business Files \$ _____
- D. Electronic Equipment (Worldwide) \$ _____

PART 4 OPTIONAL ADDITIONAL COVERS (complete only those items required)

SECTION 2: INTERRUPTION OF THE BUSINESS (see Part 5 - How to Calculate Your Sums Insured)

- A. Indemnity Period required 12 months 18 months 24 months
- B. Sum Insured for Increased Office Expenses \$ _____

SECTION 3: BUSINESS TRAVEL (list the names of any person to be insured and the estimated number of annual business trips)

Name of Traveller	Trips	Name of Traveller	Trips

PART 5 HOW TO CALCULATE YOUR SUMS INSURED

It is important to select and maintain adequate Sums Insured which take into account revenue, growth and acquisitions of equipment, etc.

CONTENTS - "Business Equipment" represents the cost of replacing, as new, all the items which you own or are legally responsible for as a tenant, without any deduction for wear, tear and depreciation and including any delivery and installation charges. This includes Furniture, Equipment & Machinery (computers, copiers, telephones, etc.), Office Fronts (glass, fixed signs, etc.) and all Other Contents (stationery, stock, etc.) plus the cost of debris removal.

"Business Files" represents the value of materials including stamp tax, the cost of labour or computer time expended in reproduction and expenses likely to be incurred to retrieve or re-compile the information.

BUSINESS INTERRUPTION - "Increased Office Expenses" represents your assessment of the additional costs, e.g., renting alternative office space, removal costs and expenses, etc., that would be incurred during the selected Indemnity Period following damage at the premises. This more limited cover will not compensate you for actual loss of revenue. Any expenses must reduce the loss of revenue of the Business to be considered covered expenses for the purpose of this insurance.

Office Options

PART 6 DECLARATION

I/We wish to effect insurance with Coralisle Insurance Company Ltd. I/We declare that the above statements and particulars are complete and correct and no material fact has been misrepresented, misstated or withheld. I/We agree that this proposal shall form the basis of the contract between me/us and Coralisle and I/we agree to accept Coralisle's usual form of policy for insurances of this nature. If this proposal has been written by anyone else, that person is my agent for that purpose and not the agent of Coralisle. (If you have not personally completed the answers to the questions, you should check them carefully before signing this declaration)

Signature _____ Date _____

For Office Use Only	Policy No.	First Premium	Renewal Premium	Agency
		\$	\$	