

FIRE INSURANCE CHECKLIST

1.	Name of Insured													
2.	Risk Location													
3.	Boundaries	Right - Left - Back - Front -												
4.	Occupancy													
5.	Construction of Building													
6.	Policy Term													
7.	Sum Insured / Items to be Covered	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Item</th> <th style="width: 40%;">Sum Insured</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> </tbody> </table>	Item	Sum Insured	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Item	Sum Insured													
_____	_____													
_____	_____													
_____	_____													
_____	_____													
_____	_____													
8.	Perils to be Covered	<input type="checkbox"/> Fire / Lightning <input type="checkbox"/> Earthquake <input type="checkbox"/> Typhoon <input type="checkbox"/> Flood <input type="checkbox"/> Extended Coverage <input type="checkbox"/> Riot Strike Malicious Damage <input type="checkbox"/> Broad Water Damage <input type="checkbox"/> Others												
9.	Loss History Over Five Years													
10.	Survey Report Available	<input type="checkbox"/> Yes <input type="checkbox"/> No												
11.	Previous / Existing Insurer													
12.	Broker / Agency / Agent Involved	<input type="checkbox"/> Yes <input type="checkbox"/> No												
13.	Remarks													

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