



GA INSURANCE LIMITED

GA Insurance House, Ralph Bunche Road,

P O Box 42166 - 00100 Nairobi, Kenya.

Telephone: 2711633 Fax 2714542

E-mail: marketing@gakenya.com

TERRORISM & POLITICAL RISK QUESTIONNAIRE

A. INFORMATION ABOUT THE APPLICANT

1. Company Name
2. Names of all subsidiary companies
3. Head Office Address
4. Ownership of the Company (e.g. Public/Private/Government etc)
5. Nationality of Ownership
6. Date of commencement of operations
7. Description of Applicant's business operations
8. Is Business Interruption cover required?
9. Limit of cover required:
(Single combined limit each and every loss and in the aggregate during the period of Insurance for physical damage and business interruption)

Material Damage
Business Interruption
Aggregate during the period of Insurance for physical damage and business interruption)
10. Has the applicant, any of its subsidiaries or any other entity to be insured under this Policy suffered a loss, whether insured or not, in the past five years from an incident of terrorism or sabotage? If yes, list the date, location, type of incident and amount of loss.
11. Has the applicant, any of its subsidiaries or any other entity to be insured under this Policy received any threat(s) against their assets (e.g. bomb scares)? If yes, please provide details.



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- 12 Does the applicant, its directors and officers or any known person have knowledge or information that may reasonably give rise to a claim? If yes, please describe the knowledge or information
- 13 Description of the area surrounding the location (e.g. rural, commercial, government etc including name(s) of landmarks
- 14 Are there any of the following within 500 metres of the location
- (a) Military premises
 - (b) Government Premises
 - (c) Tourist attractions
 - (d) Airport / other transport facilities
 - (e) Landmarks
 - (f) Sporting Venues
 - (g) Religious institutions
- 15 Describe the occupants of the surrounding buildings
- Rear Right
 - Rear Left
 - Left
 - Right
 - Front
- 16 What, if any, businesses occupy the other parts of the building?
- 17 Notice to Applicants

B. Location Details

- 18 Name & Address of location
- 19 Zip or Postal Code
- 20 Value of Buildings



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- 21 Value of Contents
- 22 Business Interruption Value (12 Months)
- 23 Total Insured Value
- 24 Is there a Guard Force?
If Yes, how many guards?
- 25 Are there intrusion detection system and CCTV systems?
- 26 Is there a perimeter fence?
If yes, is it illuminated at night?
- 27 Is there an access control system?
(E.G card access or sign in procedure)
- 28 Is there a parking area?
If yes, where? (E.G. within the Building, outside, etc.)
- 29 Declaration
I/We hereby declare that the particulars of this proposal are true, and I/We agree that the proposal shall be the basis of the contract between myself/ourselves and the GA Insurance Limited.
- Authorised Signature of the Applicant
- Name & Title of Authorised Officer
- Date