

360 Plant and Equipment Breakdown Extension Questionnaire





Breakdown Extension Questionnaire

Please advise details of the insured items requiring breakdown cover

ltem	Description	Age	Sum insured	
1			\$	
2			\$	
3			\$	
4			\$	
5			\$	
6			\$	
7			\$	
8			\$	
9			\$	
10			\$	
Please co	nfirm that all items are subject	to a scheduled routine maintenance	programme	☐ Yes ☐ No
Please confirm that you maintain records of the maintenance undertaken				☐ Yes ☐ No
Who is the	e maintenance, and/or repairs	carried out by?		
Our staff		External long term contractors	Contractors on a ra	ndom basis
Have any of the items had a full refurbishment, or a major repair in the last 3 years?				☐ Yes ☐ No
If Yes,	please advise details:			
Have any of the items been subject to a Machinery Breakdown claim in the last 5 years?				☐ Yes ☐ No
	please advise details:		,	
	prizzo da nos dotano.			





NSW Suite 3, Level 18 201 Kent St Sydney, NSW 2000

Level 14 141 Walker St North Sydney, NSW 2060

The Forum, Level 3 240 Pacific Highway Charlestown, NSW 2290

QLD

Suite 1, Level 22 345 Queen St Brisbane, QLD 4000

WA

PO Box 864 Joondalup DC, WA 6919