

FBC REINSURANCE LIMITED

FIRE FACULTATIVE UNDERWRITING REQUIREMENTS

CEDENT DETAILS:-

- i. NAME: (iii) OFFERING OFFICER.....
- ii. BRANCH:-

INSURED DETAILS: -

- i. NAME:
- ii. LOCATION: -
- iii. TRADE/OCCUPATION: -
- iv. POLICY NO: -

DESCRIPTION OF SUBJECT MATTER INSURED: -

- i. PROPERTY DETAILS
- ii. MODE OF CONSTRUCTION.....

COVER DETAILS: -

- i. PERILS INSURED
- ii. SPECIAL CONDITIONS
- iii. EXCLUSIONS
- iv. DEDUCTIBLE/EXCESSES
- v. PERIOD OF REINSURANCE

RATING

- i. PREMIUM RATE/S PER PERIL
- ii. ABSOLUTE PREMIUM AMOUNT

 - Discounts
 - Net premium

TOTAL SUMS INSURED

I. MATERIAL DAMAGE

- a. Buildings
- b. Machinery
- c. Plant & Equipment
- d. Stock
- e. Other
- TOTAL

II. LOSS OF PROFITS

- a) Gross Profit
- b) Accounts receivables

- c) Wages.....
- d) Other.....
- TOTAL

III. REINSURANCE COMMISSION.....

REINSURANCE PLACEMENT

- i. TOP LOCATION SUM INSURED.....
 - MATERIAL DAMAGE
 - LOSS OF PROFITS.....
 - TOTAL.....
- ii. MAXIMUM PROBABLE LOSS/ESTIMATED MAXIMUM LOSS (On whole risk)
 - MATERIAL DAMAGE.....
 - LOSS OF PROFITS.....
 - TOTAL
- iii CEDANT’S RETENTION.....

CLAIMS EXPERIENCE

| | CLAIMS AMOUNT USD | PREMIUM USD | LOSS RATIO % |
|-------------------------------|--------------------------|--------------------|---------------------|
| CURRENT YEAR | | | |
| 1 st PREVIOUS YEAR | | | |
| 2 nd PREVIOUS YEAR | | | |
| 3 rd PREVIOUS YEAR | | | |
| GRAND TOTAL | | | |

NATURE OF CLAIMS (DETAILS)

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